Form 4A

## Wisconsin Apportionment Data for Combined Groups

File with Wisconsin Form 4

2013

(c)

Denominator

(b)

**FEIN** 

Wisconsin Department of Revenue

**Part I Apportionment Factor Denominators** 

(a) Company Name

Read instructions before filling in this form

Designated Agent Name	Federal Employer ID Number

## (abbreviate as necessary) (From column (b) of Form 4A-1 or Part II of Form 4A-2) 1a \_\_\_\_ 2a \_\_\_\_ 3a \_\_\_\_\_ 4a 5a 6a 7 Total denominators from additional companies reported on separate schedules. . . . . 7a 8 Add lines 1a through 7a in column (c). This is the combined group's apportionment Part II Apportionment Factor Numerators and Members' Percentages (c) **Member's Wisconsin Percentage of Company Number** Numerator (Corresponds to numbers 1 through 6 in Part I) **Combined Unitary Income** (From column (a) of Form 4A-1 or Part II of Form 4A-2) (Divide amount in column (b) by amount on Part I, line 8a) 1b \_\_\_\_\_ 1 . . . . . . . . . . . . . . . . . 1c \_\_\_\_\_ % 2 . . . . . . . . . . . . . . . . . . 2b \_\_\_\_\_ 2c \_\_\_\_ % 3 . . . . . . . . . . . . . . . . . . 3b \_\_\_\_\_ 3c \_\_\_\_ % 4c \_\_\_\_ % 4b \_\_\_\_\_ 5c \_\_\_\_ % 5 . . . . . . . . . . . . . . . . . . 5b 6c \_\_\_\_ % 6 . . . . . . . . . . . . . . . . . 6b 7 Total from additional companies reported on separate schedules . . . . . . 7c \_ \_ \_ \_ % Part III Combined Group's Wisconsin Apportionment Percentage 8 Add lines 1c through 7c in Part II, column c. This is the apportionment percentage to enter on Form 4, line 8...... 8c \_\_\_\_\_ %