

Name	Identifying Number
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If you qualify for the angel investment credit, complete Part I. If you qualify for the early stage seed investment credit, complete Part II.

Round Amounts to Nearest Dollar

Part I Angel Investment Credit

1 Fill in the following information regarding your investments in qualified new business ventures that the Wisconsin Economic Development Corporation has verified as first eligible for a tax credit in 2014 (attach separate schedules if more space is needed):

Date Investment Made	Name of Qualified New Business Venture	Total Investment	Qualified Investment
1a <u> </u> 1a _____	_____	1a _____ .00	1a _____ .00
1b <u> </u> 1b _____	_____	1b _____ .00	1b _____ .00
1c <u> </u> 1c _____	_____	1c _____ .00	1c _____ .00

1d Total qualified investments (add lines 1a through 1c) **1d** _____ .00

2 Multiply the amount on line 1d by 25% (0.25) **2** _____ .00

3 Fill in the 2014 angel investment credit passed through from angel investment networks:

3a Entity Name _____
 FEIN _____ Amount **3a** _____ .00

3b Entity Name _____
 FEIN _____ Amount **3b** _____ .00

3c Total pass through credits from additional schedule. **3c** _____ .00

3d Total credits (add lines 3a through 3c) **3d** _____ .00

4 Add lines 2 and 3d. This is your 2014 credit **4** _____ .00

4a Fiduciaries - enter the amount of credit allocated to beneficiaries **4a** _____ .00

4b Fiduciaries - subtract line 4a from line 4 **4b** _____ .00

5 Carryover of unused angel investment credit (see instructions) **5** _____ .00

6 Add lines 4 and 5 (lines 4b and 5 if fiduciary). This is the available angel investment credit . . . **6** _____ .00



Part III Transfer of Early Stage Seed Investment Credit

1 Fill in the following information regarding the transfer in 2014 by a person eligible to claim the early stage seed investment credit to a person subject to tax under ch. 71 or subch. III or ch. 76:

1a Person Eligible to Claim the Early Stage Seed Investment Credit:

Name _____

Number and Street _____

City _____	State _____	Zip Code _____
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1b Recipient of Transferred Early Stage Seed Investment Credit:

Name _____

Number and Street _____

City _____	State _____	Zip Code _____
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1c Transferred Amount _____ Investment Fund Manager Approval Date

Wisconsin Economic Development Corporation Approval Date

2a Person Eligible to Claim the Early Stage Seed Investment Credit:

Name _____

Number and Street _____

City _____	State _____	Zip Code _____
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2b Recipient of Transferred Early Stage Seed Investment Credit:

Name _____

Number and Street _____

City _____	State _____	Zip Code _____
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2c Transferred Amount _____ Investment Fund Manager Approval Date

Wisconsin Economic Development Corporation Approval Date

3a Person Eligible to Claim the Early Stage Seed Investment Credit:

Name _____

Number and Street _____

City _____	State _____	Zip Code _____
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3b Recipient of Transferred Early Stage Seed Investment Credit:

Name _____

Number and Street _____

City _____	State _____	Zip Code _____
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3c Transferred Amount _____ Investment Fund Manager Approval Date

Wisconsin Economic Development Corporation Approval Date