1998

## **Combined Wisconsin Individual Income Tax Return** for Nonresident Directors of Corporations

Form 1CND

Due Date: April 15, 1999

-								
Corporation Name		Federal Employer ID Number  Wisconsin Employer ID (Withholding) Number						
Number and Street								
City		State	Zip Code	Zip Code				
Person to Contact F	son to Contact Regarding This Return  Telephone Number  Fax Number							
Instructions:	:							
	form on behalf of the qualifying an acconsin. All requirements stated in the me tax return.							
Schedule 1	Fax Computation							
from Sche Tax from S Alternative Temporar Add lines Estimated If line 6 is If line 6 is Amount of	a directors' fees of qualifying and paredule 2, column C	olumn G	1	•				
	I have personally examined this return, includin knowledge and belief, a true, correct, and co also declare that this corporation has a power of director to file this combined return on the director to	implete report of income under the provis attorney or other written authorization from	ions of Chapter 71 of the Wisco	nsin Statutes. I				
SIGNATURES	Signature of Authorized Officer	Title	Date					
	Individual or Firm Signature of Preparer	Preparer's Address	Date					
	•	•						
	Attach a copy of any application for an extension of time to file the return.							
MAILING	Make check payable to and mail return to:  Wisconsin Department of Revenue P.O. Box 8912 Madison, WI 53708-8912							

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## Schedule 2 Nonresident Directors Qualifying and Participating in Combined Return (Attach a separate schedule, if necessary)

(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(1)	(J)
Name and Address of Nonresident Director (and Spouse if Married Filing Jointly)	Social Security Number	Wisconsin Directors' Fees	Federal Adjusted Gross Income	(E) Filing Status (S, H, MFJ, MFS)	Tax	Alternative Minimum Tax	Temporary Recycling Surcharge	Estimated Tax Payments	Balance Due (Over- payment)
a.									
b.									
c.									
d.									
е.									
f.									
g.									
h.									
i.									
j.									
k.									
TOTALS (enter on appropriate line on S									