For 2009 or taxable year beginning $\qquad$ and ending $\bar{M} \frac{}{M} \frac{}{D} \frac{}{\mathrm{D}} \frac{}{\mathrm{Y}} \overline{\mathrm{Y}} \overline{\mathrm{Y}}$

Complete form using BLACK INK.
Corporation Name


Check $\checkmark$ if applicable and see instructions:
E $\qquad$ If you have an extension of time to file, enter the extended due date $\bar{M} \frac{}{M} \frac{D}{D} \frac{}{Y} \frac{Y}{Y}$

F __ If no business was transacted in Wisconsin during the taxable year, attach a complete copy of your federal return. G $\qquad$ If you have related entity expenses and are required to file Schedule RT with this return.

H $\qquad$ If you filed a federal consolidated return, enter Parent Company's federal employer ID number


## ENTER NEGATIVE NUMBERS LIKE THIS $\boldsymbol{\rightarrow} \mathbf{- 1 0 0 0}$ NOT LIKE THIS $\boldsymbol{\rightarrow} \mathbf{( 1 0 0 0 )}$

## NO COMMAS; NO CENTS

$\underline{1}$ Federal taxable income from Form 1120, line 28 . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . 1
$\underline{\underline{\mathbf{2}}}$ Additions (from Schedule $V$, line 13) . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . 2
3 Add lines 1 and 2 ................................................................................ . . . 3
4 Subtractions (from Schedule W, line 15) . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . 4
$\underline{\mathbf{5}}$ Subtract line 4 from line 3 . This is net income (loss) before net business loss offset . . . . . . 5
む $\underset{\ddagger}{\mathbf{6}}$ Wisconsin net business loss carryforward (from Form 4BL, line 30) but not more than line $5 . \quad 6$
$\underline{7}$ Subtract line 6 from line 5. This is Wisconsin net income (loss) . . . . . . . . . . . . . . . . . . 7
$\underline{8}$ Enter $7.9 \%(0.079)$ of Wisconsin net income on line 7. This is gross tax . . . . . . . . . . . . . . . 8
9
10 Subtract line 9 from line 8 . If line 9 is more than line 8, enter zero (0). This is net tax . . . . . . 10
11 Recycling surcharge (see instructions) . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . 11
12 Endangered resources donation (decreases refund or increases amount owed) . . . . 12
13 Veterans trust fund donation (decreases refund or increases amount owed) . . . . VETS VETS. 13
14 Add lines 10 through 13 . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . 14
15 Estimated tax payments less refund from Form 4466W. If this is an amended return, see instructions . . . . . . . . 15

15
16
17
17 Refundable credits (from Schedule CR, line 44) $\qquad$ . 00

16 Wisconsin tax withheld fee due (from Form 4 U , line 17 or 26 )
19 Interest, penalty, and late fee due (from Form 4U, line 17 or 26). If you annualized income on Form 4 U , check $(\checkmark)$ the space after the arrow $\cdots>$ 19 4 .000000

17
18 Add lines 15 through 17 ..... 18

20
$\underline{20}$ Tax due. If the total of lines 14 and 19 is larger than line 18, enter amount owed ..... 2000
$\square$
$\qquad$ $\xrightarrow{.00}$
$\qquad$
$\qquad$
$\qquad$ . 00
$\qquad$
$\qquad$
$\square$
$\qquad$0000


26a If the corporation is the sole owner of any limited liability companies (LLCs), enter the names and FEINs of those LLCs below. Submit an additional schedule if necessary.

| Name of LLC | FEIN |
| :--- | :--- |
|  |  |
|  |  |
|  |  |
|  |  |

26b Did you include the income of the LLCs listed on line 26a on this return? $\qquad$ Yes $\square$ No

## Additional Information Required

1 Person to contact concerning this return: $\qquad$ Phone \#: $\qquad$ Fax \#: $\qquad$
2 City and state where books and records are located for audit purposes: $\qquad$
3 Did you purchase any taxable tangible personal property or taxable services for storage, use, or consumption in Wisconsin without payment of a state sales or use tax?YesNo If yes, you owe Wisconsin use tax. See instructions for how to report use tax.

4 Did any adjustments made by the Internal Revenue Service to your income for prior years become finalized during this year? $\qquad$ YesNo If yes, see instructions and indicate years adjusted: $\qquad$

Under penalties of law, I declare that this return and all attachments are true, correct, and complete to the best of my knowledge and belief.

| Signature of Officer | Title | Date |
| :--- | :--- | :--- |
| Preparer's Signature | Preparer's Federal Employer ID Number | Date |

## You must file a copy of your federal return with Form 5, even if no Wisconsin activity.

If you are not filing your return electronically, make your check payable to and mail your return to: Wisconsin Department of Revenue PO Box 8908
Madison, WI 53708-8908


