Form **4A**

Wisconsin Apportionment Data for Combined Groups

File with Wisconsin Form 4

2011

Wisconsin Department of Revenue

Read instructions before filling in this form

Designated Agent Name

Federal Employer ID Number

	(a) Company Name (abbreviate as necessary)		(b) FEIN	(C) Denominator (From column (b) of Form 4A-or Part II of Form 4A-2)
1			_	1a
4				4a
5			_	5a
6			_	6a
7 Total deno	minators from additional comp	anies reported on separa	te schedules	7a
factor dend	fa through 7a in column (c). The cominator			
(a) Company Number (Corresponds to numbers 1 through 6 in Part I)			(c) Member's Wisconsin Percentage of Combined Unitary Income (Divide amount in column (b) by amount on Part I, line 8a)	
	Company Number	(b) Numerator (From column (a) of Form 4A-1 or Part II of Form 4A-2)	Combine (Divide a	sconsin Percentage of ed Unitary Income mount in column (b) by
	Company Number	Numerator (From column (a) of Form 4A-1 or Part II of Form 4A-2)	Combine (Divide al amoul	sconsin Percentage of ed Unitary Income mount in column (b) by
	company Number ds to numbers 1 through 6 in Part I)	Numerator (From column (a) of Form 4A-1 or Part II of Form 4A-2)	Combine (Divide al amoul) 1c	sconsin Percentage of ed Unitary Income mount in column (b) by nt on Part I, line 8a)
	company Number ds to numbers 1 through 6 in Part I) 1	Numerator (From column (a) of Form 4A-1 or Part II of Form 4A-2) 1b 2b	Combine (Divide al amoul) 1c 2c	sconsin Percentage of ed Unitary Income mount in column (b) by nt on Part I, line 8a)
	company Number ds to numbers 1 through 6 in Part I) 1	Numerator (From column (a) of Form 4A-1 or Part II of Form 4A-2) 1b 2b 3b	1c 2c	sconsin Percentage of ed Unitary Income mount in column (b) by nt on Part I, line 8a)
	Company Number ds to numbers 1 through 6 in Part I) 1 2 3 4	Numerator (From column (a) of Form 4A-1 or Part II of Form 4A-2) 1b 2b 3b	1c 2c 4c	sconsin Percentage of ed Unitary Income mount in column (b) by nt on Part I, line 8a)
	1	Numerator (From column (a) of Form 4A-1 or Part II of Form 4A-2) 1b 2b 3b 4b	1c 2c 3c 4c	sconsin Percentage of ed Unitary Income mount in column (b) by nt on Part I, line 8a)
(Correspon	1	Numerator (From column (a) of Form 4A-1 or Part II of Form 4A-2) 1b 2b 3b 4b 5b 6b	1c 2c 3c 4c 5c	sconsin Percentage of ed Unitary Income mount in column (b) by nt on Part I, line 8a)