Form 6BL

Wisconsin Net Business Loss Carryforward for Combined Group Members

2014

Name of Combined Group Member Federal Employer ID Number

Combined Group Members			(see instructions)								
			Loss			Loss Used/Expired			Remaining Loss Available		
	(a) Year	(b) Income	(c) Non- shareable	(d) Shareable	(e) Pre-2009 Shareable	(f) Non- shareable	(g) Shareable	(h) Pre-2009 Shareable	(i) Non- shareable	(j) Shareable	(k) Pre-2009 Shareable
1	1984										
2	1985										
3	1986										
4	1987										
5	1988										
6	1989										
7	1990										
8	1991										
9	1992										
10	1993										
11	1994										
12	1995										
13	1996										
14	1997										
15	1998										
16	1999										
17	2000										
18	2001										
19	2002										
20	2003										
21	2004										
22	2005										
23	2006										
24	2007										
25	2008										
26	2009										
27	2010										
28	2011										
29	2012										
30	2013										