



Form **8**

# Transfers of Capital Stock

# 2006

Name of Reporting Corporation		
Number and Street		
City	State	Zip Code

Mail completed Form 8 to:  
 Wisconsin Department of Revenue  
 P.O. Box 8908  
 Madison, WI 53708-8908

Due Date is March 15, 2007

### STOCK TRANSFERRED FROM:

Name of Transferor	Transferor's Social Security Number		
Number and Street	Number of Shares Transferred		
City	State	Zip Code	Par Value Per Share \$

IC-091

Wisconsin Department of Revenue

FOLD AND TEAR ON PERFORATION

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## Instructions for Form 8

### Who Must File

All corporations doing business in Wisconsin must file with the Wisconsin Department of Revenue a report of transfers of capital stock made by individuals who were Wisconsin residents during the CALENDAR YEAR 2006. File Form 8 only for the Wisconsin residents who disposed of their stock and not for the persons who acquired it. Failure to file Form 8 by March 15, 2007, or filing an incorrect Form 8 due to wilful neglect, may result in a penalty of \$10 for each violation.

### When to File

File Form 8 by March 15, 2007, for stock transfers during calendar year 2006.

### Additional Forms or Assistance

If you need more forms, download them from the Department's web site at [www.revenue.wi.gov](http://www.revenue.wi.gov), use the Fax-A-Form system by calling (608) 261-6229 from a fax telephone, request forms online at [www.revenue.wi.gov](http://www.revenue.wi.gov), call (608) 266-1961, or write to the Forms Request Office, Wisconsin Department of Revenue, Mail Stop 5-77, P.O. Box 8949, Madison, WI 53708-8949. For help in preparing Form 8, e-mail [corp@dor.state.wi.us](mailto:corp@dor.state.wi.us), call (608) 266-2772, or write to the Audit Bureau, Wisconsin Department of Revenue, Mail Stop 5-144, P.O. Box 8906, Madison, WI 53708-8906.

### Specific Instructions

Enter the name and address of the reporting corporation, the name and address of the transferor, the number of shares transferred, and the par value per share. Also enter the transferor's social security number, if known.

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