

27 Interest, penalty, and late fee due (from Form 4U, line 17 or 26). If you annualized income on Form 4U, check box.	27	<u>.00</u>
28 Tax due. If the total of lines 22 and 27 is larger than line 26, enter amount owed	28	<u>.00</u>
29 Overpayment. If line 26 is larger than the total of lines 22 and 27, enter amount overpaid.	29	<u>.00</u>
30 Enter amount of line 29 you want credited on 2009 estimated tax	30	<u>.00</u>
31 Subtract line 30 from line 29. This is your refund	31	<u>.00</u>
32 Enter total company gross receipts from all activities (see instructions).	32	<u>.00</u>
33 If the corporation paid, accrued, or incurred more than \$100,000 of expenses to a related entity, the corporation must file Schedule RT with this return. Under Wisconsin law, certain related entity expenses may not be allowable unless disclosed on Schedule RT on a timely filed return. See instructions for details. On line 33, enter total related entity expenses disclosed on Schedule RT	33	<u>.00</u>
34a Total Wisconsin payroll (see instructions).	34a	<u>.00</u>
34b Total company payroll (see instructions)	34b	<u>.00</u>

Additional Information Required

- 1 Person to contact concerning this return: _____ Phone #: _____ Fax #: _____
- 2 City and state where books and records are located for audit purposes: _____
- 3 Are you the sole owner of any limited liability companies (LLCs)? Yes No If yes, attach a list of the names and federal EINs of your solely owned LLCs. Did you include the incomes of these entities in this return? Yes No
- 4 Do you own, directly or indirectly, 50% or more of the outstanding voting stock of any corporations? Yes No If yes, attach a list of the names and federal EINs of these corporations. Have the incomes of these affiliated corporations been included in this return? Yes No
- 5 Do any corporations, individuals, partnerships, trusts, or associations own 50% or more of your outstanding voting stock? Yes No If yes, attach a list of the names and federal EINs of these organizations. Have the incomes of these organizations been included in this return? Yes No
- 6 Has your corporation been involved in any reorganization during the period covered by this return? Yes No If yes, attach a detailed explanation.
- 7 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? Yes No If yes, you owe Wisconsin use tax. See instructions for how to report use tax.
- 8 Did any adjustments made by the Internal Revenue Service to your income for prior years become finalized during this year? Yes No If yes, see instructions and indicate years adjusted: _____

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, related schedules, and annual statement with your Form 41.

Make your check payable to and mail your return to: Wisconsin Department of Revenue
PO Box 8908
Madison WI 53708-8908



Schedule 1 – Additions to Federal Taxable Income

1	Loss carryforward deducted in the calculation of federal taxable income.	1	_____	.00
2	Dividend income received to the extent used as a deduction in determining federal taxable income.	2	_____	.00
3	Additions from Schedule V, line 12.	3	_____	.00
4	Additional deduction for insurers required to discount unpaid losses.	4	_____	.00
5	Total (enter on Form 41, page 1, line 2)	5	_____	.00

Schedule 2 – Subtractions From Federal Taxable Income

1	Subtractions from Schedule W, line 16.	1	_____	.00
2	Income realized from the purchase and subsequent sale or redemption of lottery prizes if the winning tickets were originally bought in Wisconsin.	2	_____	.00
3	Total (enter on Form 41, page 1, line 4)	3	_____	.00

Schedule 3 – Wisconsin Apportionment Percentage

		(a) Wisconsin	(b) Total Company
1	Direct premiums written for insurance on property and risks, other than life insurance	1	_____
2	Assumed premiums from domestic insurance companies written for reinsurance on property and risks, other than life insurance	2	_____
3	Add lines 1 and 2. This is the total premiums.	3	_____
4	Divide line 3, column a, by line 3, column b, and multiply by 100 (<i>carry to 4 decimal places</i>). This is the Wisconsin apportionment percentage.	4	_____ %

