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IC-002

Form 4 T Wisconsin Exempt Organization Business Franchise or Income Tax Return

For 2013 or taxable year beginning ____

| | | | | | | | | and ending | | | | | | | | | |
|---|---|----------------|----------------|---|---|---|---|------------|---|---|---|---|---|---|---|---|--|
| И | M | \overline{D} | \overline{D} | Y | Y | Y | Y | · · | M | M | D | D | Y | Y | Y | Y | |

2013

| | <u>, </u> | 5th month | (4th month for certain trus | ts and IRAs) follow | ving close of taxable year. |
|------------|---|-------------------|---------------------------------|---------------------------------------|--|
| Exe | mpt Organization Name | | | | |
| Num | ber and Street | | | | Suite Number |
| City | | State | ZIP (+ 4 digit suffix if known) | A Federal Employer | ID Number |
| D C | heck ✓ if applicable and attach explanation: | B Business | Activity (NAICS) Code | C State of Organiza | tion and Year |
| 1 , | , Amended return | | | state in t | breviation of box, or if a country enter |
| 2 . | First return - new corporation or entering Wisconsin 4 Shot | rt period - ch | ange in accounting period | foreign of below. | ountry, enter |
| 3 . | Final return - corporation dissolved or withdrew 5 Shot | rt period - sto | ock purchase or sale | | |
| | k ✓ if applicable and see instructions: | | | I | |
| E | If you have an extension of time to file, enter extended due date $\phantom{aaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa$ | <u></u> | <u></u> | | |
| | If you have related entity expenses and are required to file Schedule | | | | |
| | If you changed your organization name. | | | | |
| | , Internal Revenue Service adjustments became final during the year. | | | | |
| | Enter years adjusted ▶ | | | | |
| ı cı | neck ✓ type of organization: | , | J Name of Trustee if Taxable a | as Trust | |
| 1, | Corporation 2 Trust - due 4th month 3 Trust - due 5th | h month | | | |
| | ENTER NEGATIVE NUMBERS LIKE THIS → -100 | 00 <u>N</u> C | <u>OT</u> LIKE THIS → (1000) | <u>NO</u> C | OMMAS; <u>NO</u> CENTS |
| Org | anizations Taxable as Corporations (Trusts do not fill in | n lines 1 tl | hrough 13) | | |
| 7 <u>1</u> | Unrelated business taxable income (from federal Form | 990-T, lir | ne 34) | 1 | . 00 |
| <u>2</u> | Job creation deduction (from Schedule JC, line 7) | | | 2 | . 00 |
| <u>3</u> | Subtract line 2 from line 1 | | | 3 | . 00 |
| <u>4</u> | Total net nonapportionable unrelated business taxable in | ncome (lo | ss) (from Form 4N, line 8) . | 4 | . 00 |
| <u>5</u> | Subtract line 4 from line 3. This is apportionable unrela | ited busin | ess taxable income | 5 | . 00 |
| <u>6</u> | Wisconsin apportionment percentage (from Form 4A-1 does not apply, enter "100.0000%"). If percentage is from Form 4A-1 does not apply, enter "100.0000%". | rom Form | 4A-2, check (✓) | | |
| | the space after the arrow | | | | % |
| 7 | If 100% apportionment, check (✓) the space after the a | | | | 00 |
| _ | Multiply line 5 by line 6 | | | | <u>.00</u> |
| 8 | • | | | | |
| 9 | Combine lines 7 and 8. This is Wisconsin unrelated bu | | | | |
| <u>10</u> | Enter 7.9% (0.079) of amount on line 9. This is gross to | | | · · · · · · · · · · · · · · · · · · · | • |
| 11 | Nonrefundable credits (from Schedule CR) | | | 11 | <u>.00</u> |
| <u>12</u> | If not qualified, enter 0 | | . Check here if claimed | | <u>.00</u> |
| <u>13</u> | Subtract lines 11 and 12 from line 10. If lines 11 and 12 This is net tax | | | | . 00 |
| Org | anizations Taxable as Trusts (Corporations do not fill | in lines 14 | through 23) | | |
| <u>14</u> | Unrelated business taxable income (from federal Form Form 4720) | | | | .00 |
| <u>15</u> | Additions (from Schedule T1, line 10 on page 3) $\ldots \ldots$ | | | 15 | . 00 |
| <u>16</u> | Add lines 14 and 15 | | | 16 | . 00 |
| <u>17</u> | Subtractions (from Schedule T2, line 8 on page 3) | | | 17 | . 00 |

2013 Form 4T Page 2 of 3 .00 .00 .00 .00 .00 .00 Subtract line 22 from line 19. If line 22 is greater than line 19, enter zero (0). This is net tax . . . 23 .00 .00 .00 Endangered resources donation (decreases refund or increases amount owed)..... .00 Veterans trust fund donation (decreases refund or increases amount owed)..... 27 _ .00 **29** Estimated tax payments less refund from Form 4466W. . . **29** .00 Amended Return Only – amount previously paid 32 Amended Return Only – amount previously refunded 34 .00 35 Subtract line 34 from 33..... Interest, penalty, and late fee due (from Form 4U, line 17 or 26). .00 37 Tax due. If the total of lines 28 and 36 is larger than line 35, subtract line 35 from the total of .00 38 Overpayment. If line 35 is larger than the total of lines 28 and 36, subtract the total of lines .00 39 Enter amount of line 38 you want credited on 2014 estimated tax . . 39 .00 Subtract line 39 from line 38. This is your refund40 .00 **Additional Information Required** Phone #: **1** Person to contact concerning this return: **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 Did you purchase any taxable tangible personal property or taxable services for storage, use, or consumption in Wisconsin without payment ___ Yes of a state sales or use tax? No If yes, you may owe Wisconsin use tax. See instructions for how to report use tax. (You will not be liable for Wisconsin use tax if you hold a Wisconsin Certificate of Exempt Status.) **5** List the locations of your Wisconsin operations: 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 or Trustee | Title | Date | | | | | |
|---------------------------------|---------------------------------------|------|--|--|--|--|--|
| | | | | | | | |
| | | | | | | | |
| Preparer's Signature | Preparer's Federal Employer ID Number | Date | | | | | |
| | | | | | | | |
| | | | | | | | |

You must file a copy of your federal Form 990-T or 4720, including attachments, with your Form 4T.

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



2013 Form 4T Page **3 of 3**

| Sch | edule T1 - Trust Additions (See instructions) | |
|-----|--|---|
| 1 | Interest income (less related expenses) from state and municipal obligations | 1 |
| 2 | State and local franchise or income taxes | 2 |
| 3 | Capital gain/loss adjustment | 3 |
| 4 | Federal net operating loss carryover | 4 |
| 5 | Related entity expenses (from Sch. RT, Part I or Sch. 2K-1, 3K-1, or 5K-1) | 5 |
| 6 | Domestic production activities deduction | 6 |
| 7 | Transitional adjustments | 7 |
| 8 | Credits computed (see instructions for list of applicable credits) | 8 |
| 9 | Other: | 9 |
| 10 | Total (enter on page 1, line 15) | |
| | nedule T2 – Trust Subtractions (See instructions) | |
| | Interest income (less related expenses) from United States government obligations | |
| | Capital gain/loss adjustment | |
| | Wisconsin net operating loss carryforward | |
| | Deductible related entity expenses (from Sch. RT, Part II or Sch. 2K-1, 3K-1, or 5K-1) | 4 |
| 5 | Income from related entities whose expenses were disallowed (obtain Schedule RT-1 from related entity and submit with your return) | 5 |
| 6 | Transitional adjustments | 6 |
| 7 | Other: | 7 |
| | | |
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