

2021 Form 6I - Wisconsin Adjustment for Insurance Companies

Designated Agent Name	Federal Employer ID Number
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Part I Additions Specific to Insurance Companies

Corporation Name: _____								
FEIN: _____								
				Elimination Adjustments		Combined Totals		
1 Loss carryforward deducted in the calculation of federal taxable income 1	.00	.00	.00	.00	1	.00		.00
2 Dividend income received to the extent not included in the amount on Form 6, Part I, line 4 2	.00	.00	.00	.00	2	.00		.00
3 Additional federal deduction for insurers required to discount unpaid losses 3	.00	.00	.00	.00	3	.00		.00
4 Add lines 1 through 3. Enter this amount on Form 6, Part II, line 2i 4	.00	.00	.00	.00	4	.00		.00

Part II Nontaxable Income from Life Insurance Operations

5 Insurance company's federal taxable income as reported or included on Form 6, Part II, line 1 5	.00	.00	.00	.00	5	.00		.00
6 Insurance company's total addition modifications from Form 6, Part II, line 2k 6	.00	.00	.00	.00	6	.00		.00
7 Add lines 5 and 6 7	.00	.00	.00	.00	7	.00		.00
8 Insurance company's total subtraction modifications from Form 6, Part II, lines 4a through 4m plus line 4n-e 8	.00	.00	.00	.00	8	.00		.00
9 Subtract line 8 from line 7 9	.00	.00	.00	.00	9	.00		.00
10a Enter net gain from operations other than life insurance 10a	.00	.00	.00	.00	10a	.00		.00
10b Enter total net gain from operations 10b	.00	.00	.00	.00	10b	.00		.00
11 Divide line 10a by line 10b and enter result as a percentage (see instructions) 11	%	%	%	%	11	%		%
12 Multiply line 9 by line 11 12	.00	.00	.00	.00	12	.00		.00
13 Subtract line 12 from line 9. Enter this amount on Form 6, Part II, line 4o 13	.00	.00	.00	.00	13	.00		.00

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Part III Net Business Loss Adjustment for Insurance Companies

Corporation Name: FEIN:

Combined Totals

Table with 5 columns: Line number, Description, Amount 1, Amount 2, Amount 3, and Combined Totals. Rows 14-24 show calculations for business loss adjustments.

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Part IV Tax Computation for Insurance Companies

		Corporation Name: _____					Elimination Adjustments	Combined Totals
		FEIN: _____						
25	Use the amounts on Form 6, Part III to compute the insurance company's share of the combined Wisconsin net income. See instructions	25	.00	.00	.00	.00	25	.00
26	Multiply line 25 by 7.9%	26	.00	.00	.00	.00	26	.00
27a	Insurance company's gross premiums as defined in s. 76.62, Wis. Stats	27a	.00	.00	.00	.00	27a	.00
27b	Multiply line 27a by 2%	27b	.00	.00	.00	.00	27b	.00
28a	Wisconsin income realized from lottery prizes as reported on Form N, line 5	28a	.00	.00	.00	.00	28a	.00
28b	Multiply line 28a by 7.9%	28b	.00	.00	.00	.00	28b	.00
29	Add lines 27b and 28b	29	.00	.00	.00	.00	29	.00
30	Enter the lesser of the amounts on line 26 or line 29. This is the amount to enter on Form 6, Part III, line 9	30	.00	.00	.00	.00	30	.00

Sample Form File Electronically