


**WT-11****Nonresident Entertainer's Report****ENTERTAINER**

Legal name of entertainer performing in Wisconsin		Entertainer's Federal ID Number or SSN	
Stage or professional name of nonresident entertainer			
Address			
City		State	Zip Code
Entertainer's Entity Type ( <i>check one</i> ) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Limited Liability Company (LLC)  <input type="checkbox"/> Partnership <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation		If LLC is checked, indicate type <input type="checkbox"/> Disregarded (single member LLC only) <input type="checkbox"/> Taxed as Corporation <input type="checkbox"/> Taxed as Partnership	

**EMPLOYER**

Name		Telephone Number (    )	
Address			
City		State	Zip Code

**PERFORMANCE**

Date of Performance	Location of Performance		
1. Total contract price ..... <b>1</b> _____ 2. If lower rate was not granted, enter 6% (.06) ..... <b>2</b> _____ 3. If lower rate was granted, indicate the percentage granted ..... <b>3</b> _____ 4. Multiply Line 1 by Line 2 or Line 3, whichever is applicable. Enter on Line 4 ..... <b>4</b> _____ Amount of ( <i>check one</i> ): <input type="checkbox"/> bond <input type="checkbox"/> cash deposit <input type="checkbox"/> withholding			

*I declare that this report is true, correct and complete to the best of my knowledge and belief.*

Signature	Title	Date
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- Submit one copy to Wisconsin Department of Revenue with payment or surety bond.
- Print one copy for nonresident entertainer.
- Retain one copy for your records.

Wisconsin Department of Revenue  
PO Box 8966  
Madison WI 53708-8966

*This space for Department use only*

Receipt for: ☐ Surety Bond    ☐ Cash Deposit    \$ \_\_\_\_\_

\_\_\_\_\_  
Department Representative

\_\_\_\_\_  
Date