Form

S-240

Wisconsin Temporary Event Report L

(Completed and submitted by the Event Operator)

Page 1 of

Doing Business As (DBA) Name (if applicable)	Wisconsin Tax Number (15 digits starting with 640, 456, or 600					
Legal Business Name (if not sole proprietor)				Full FEIN (Business)		
Event Operator Name (Last)	t Operator Na			Full SSN (Individual or Sole proprietor		
Mailing Address			Email Address			
City	State	Zip Contact F			hone Number	
Part B: Temporary Event Inforn	nation					
Event Start Date M M D D Y Y Y Y	Event End Date		M D D Y Y Y Y		Vendors	
Temporary Event Name	ı					Minimum Vendor Booth Fee
Street Address						Customer Admission Fee
						•

Common Questions

Signature

What is a temporary event?

A temporary event is an occasion, activity, or function at which merchandise is sold or traded or taxable services are provided. An event can be on one or consecutive days. It may reoccur on a weekly, monthly, quarterly, or annual basis.

How are recurring events reported?

Multiple events in a calendar month may be reported as one event. In this case, the event start is the first and the event end is the last day of the month.

Who is a temporary event operator?

The organizer or planner of an event is the event operator.

What must a temporary event operator report?

Temporary event operators must complete and submit Form S-240 with information about each event vendor to the Department of Revenue (DOR) within **10 days business days** of the close of the event.

Note: Operators may be assessed a \$200 penalty for the first offense and \$500 for subsequent missing, late, or incomplete reports.

What are temporary event vendor requirements?

Temporary event vendors must have a Wisconsin seller's permit unless their sales are exempt from sales and use tax.

Where can I find more information on temporary events?

- Publication 228, Temporary Events
- revenue.wi.gov and search 'Temporary Events'

More information about completing this report is on our website revenue.wi.gov and search 'Event Operator'

Completing Form S-240

The event operator is **required** to complete all sections of Form S-240, to include all vendor information.

Date

Part A is the event operator information.

Part B is the temporary event information.

Part C is used to report all vendors attending the event. Do not submit a vendor list without Page 1 (Parts A & B) of Form S-240. If the event operator is making taxable sales, they should complete a vendor report for themselves.

An operator may be assessed a penalty for an incomplete report for failure to obtain information about each vendor.

Submit the report by any of the following:

- Online through our Secure File Transfer web page at: revenue.wi.gov and search 'wteptran'
- Fax: (608) 224-5761
- Mail: Wisconsin Department of Revenue Temporary Events Project MS 3-80 PO Box 8902

Madison, WI 53708-8902

Important: Do not email reports or other confidential information.

Questions

- Email: DORTempEvents@wisconsin.gov
- Call: (608) 264-4582.

Applicable Laws and Rules

This document provides statements or interpretations of the following laws and regulations in effect as of June 1, 2022: sec. 77.52(19) and 73.03(38), Wis. Stats., and sec. Tax 11.53 and 11.535, Wis. Adm. Code.



Form S-240	Operator's Wisconsin Tax Number	Event End Date			i					
					Page of					
Part C: V	endor Information									
If the vendor provided by t	does not have a Wisconsin seller perm the vendor.	nit num	iber and c	laims their sales	are tax	exempt, enter the ex	cemption	า code number		
	t sales only or display only			nprofit occasiona		exemption				
2 - Multi-le	vel marketing company pays sales tax	X	4 - Exe	empt occasional	sales					
	er's Permit Number (15 digits starting with 456)			SSN (last 4 digits)		FEIN (last 4 digits)	FEIN (last 4 digits) Exemption (
456-				<u></u>						
Legal Business Name (if not sole proprietor)				Doing Business As (DBA) Name (if applicable)						
Vendor/Contact	Name (Last)	Vendor	r/Contact Na	ame (First) Vendor Phone Number						
Mailing Address	,	-1		Email Address						
City			State	Zip	Mult	Multi-Level Marketing Company (if claiming Code 2 above)				
City				,-						
Missansin Collo	er's Permit Number (15 digits starting with 456)			CCN (last 4 digita)		FEIN (last 4 digits)	$\overline{}$	Turnetian Codo		
456-	rs Permit Number (15 digits starting with 450)			SSN (last 4 digits)		FEIN (last 4 digits)		Exemption Code		
	Name (if not sole proprietor)			Doing Business As (DBA) Name (if applicable)						
- 3	, ,									
Vendor/Contact	Name (Last)	Vendor	r/Contact Na	Jame (First) Vendor Phone Number						
* * * * * * * * * * * * * * * * * * *				T- "A11						
Mailing Address				Email Address						
City			State	Zip	Zip Multi-Level Marketing Company (if clain			ng Code 2 above)		
Wisconsin Selle	er's Permit Number (15 digits starting with 456)			SSN (last 4 digits)		FEIN (last 4 digits)		Exemption Code		
456										
Legal Business Name (if not sole proprietor)				Doing Business As (DBA) Name (if applicable)						
Vendor/Contact	Name (Last)	Vendo	r/Contact Na	Ime (First) Vendor Phone Number						
Volladi, Vol										
Mailing Address				Email Address						
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City			State	Zip	Iviuiu	ti-Level Marketing Compan	у (Іт стантін	ng Code ∠ above)		
Missansin Collo				SSN (last 4 digits)		FEIN (last 4 digits)		Exemption Code		
Wisconsin Seller's Permit Number (15 digits starting with 456) 456-				Exemption Code						
Legal Business Name (if not sole proprietor)				Doing Business As (DBA) Name (if applicable)						
Vendor/Contact Name (Last) Vendor/Contact N				Ime (First) Vendor Phone Number						
Volladii Joshica	Hamo (Essy)		700111111111111111111111111111111111111	anne (i iisi) Venidoi Priorie Nutriber						
Mailing Address				Email Address						
Oth				Zip	ip Multi-Level Marketing Company (if claiming Code 2 above)					
City			State	Zip	Multi	il-Level Marketing Company	y (ii ciaimii	ng Code 2 above)		

Reproduce this page as needed to report all vendors. Page 1 must be included with your submission.

