Iowa Department of Revenue www.iowa.gov/tax ___

2011 IA 1065

Iowa Partnership Return of Income For Calendar Year 2011 or other fiscal year

From_ __/__ /__ to___/_

Check all that apply: Name/Address Change	☐ Short Period ☐ Ar	nended Return		
Part I: Partnership Name and Address				
Name:	FEIN:	▲ Business Code:		
Street Address:	County No.:	Principal Activity:		
City, State, ZIP:	Number of Partners:	Number of Partners:		
Name of contact person:	Please list any other	Please list any other states in which the partnership operates:		
Phone No.: (
Part II: Partnership Information Type of Return (check one): Partnership LLC Does the partnership have income/loss from business a Is any of the partnership's income/loss from real proper Does the partnership's income / loss come from any ac of stocks or bonds? Yes No	activities carried on within ty within lowa? ☐ Yes	☐ No dividends, or capital gain from the sale		
PART III - Modification of Partnership Income		Use Whole Dollars		
1. Federal partnership taxable income (loss) from federal So				
2. Interest from state and municipal bonds and securities				
3. Other additions. Attach Schedule				
4. Total additions. Add lines 2 and 3				
5. Interest and dividends from federal securities				
6. Other reductions. Attach Schedule				
7. Total reductions. Add lines 5 and 6				
8. Net modifications. Subtract line 7 from line 4				
9. Total all-source partnership income. Add lines 1 and 8				
Part IV: Business Activity Ratio (BAR) See instruct Types of Income	ions. Enter Column A Iowa Receipt	Whole Dollar Amounts. ts Column B Receipts Everywhere		
1. Gross Receipts 1.	Column A Towa Heccip	Goldini B Heccipts Everywhere		
O. Nat Dividenda Osa instructions				
3. Exempt Interest				
4. Accounts Receivable Interest				
5. Other Interest				
6. Rent				
7. Royalties 7.				
8. Capital Gains / Loss				
9. Ordinary Gains / Loss				
10. Partnership Gross Receipts. Attach schedule 10.				
12. TOTALS				
13. BAR to six decimal places. Divide line 12, column A, by li	ine 12, column B.			
		2000		
PART V: Enter Iowa net income for three preceding y File electronically. For details go to www.iowa.gov/tax. Declaration: Under penalties of perjury, I declare that I have examin knowledge, believe it to be true, correct and complete. If prepared b which there is any knowledge. Signature of Partner or Member:	ned this return and any attached y a person other than the taxpa	yer, the declaration is based on all information of		
	Preparer's Signature			
Data		Data		
Date:		Date:		
Title: Date: Daytime Telephone No.:	Preparer's Address:	Date: Telephone No		

2011 IA 1065 Schedule K-1

Partner's Share of Iowa Income. Deductions. Modifications

Part I: General Information	☐ Amended	΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄ ΄	
Partnership or Limited Liability Company Information: Partner's Entity Type:			A
Name:	Resident Partner Nonresident Partner Partner's Ownership Percentage: Partnership Iowa Receipts: \$		
FEIN:			
Partner Information:			
Name:			
Social Security Number / FEIN:			
Address:			
City, State, ZIP:			
		NONRESIDENT PARTNERS ONLY	
NOTE: Completed Iowa Schedule K-1s for all partners must be included with the IA 1065 Partnership Return.	(a) Federal K-1 Amount	(b) Business Activity Ratio (Same ratio applies to each line item)	(c) Apportionable To Iowa (a) x (b)
1. Ordinary business income (loss)			
2. Net rental real estate income (loss)			
3. Other net rental income (loss)			
4. Guaranteed payments			
5. Interest income			
6. Dividends line 6a, federal K-1 6.			
7. Royalties			
8. Net short-term capital gain (loss)			
9. Net long-term capital gain (loss) line 9a, federal K-1			
10. Net section 1231 gain (loss)			
11. Other income (loss)			
Total Income. Add lines 1 through 11.			
12. Section 179 deduction			
13. Other deductions			
Total deductions. Add lines 12 and 13			
Balance. Subtract total deductions from total income			
14. Credits from the credit section of federal K-1 14.			
15. a) Post-1986 depreciation adjustment			
b) Adjusted gain or loss			
c) Depletion other than oil and gas			
d) Gross income from oil, gas, and geothermal properties 15d.			
e) Deductions allocable to oil, gas, and geothermal properties 15e.			
f) Other adjustments and tax preference items. Attach schedule			
	(a) All Source Modifications	(b) Business Activity Ratio	(c) Apportionable To Iowa (a) x (b)
16. MODIFICATIONS SCHEDULE			(2)
Part III: Partner's Portion of IA Credits /Withholding			
Type of Iowa Credit Certificate Num	ber	Current Year A	mount
IA Income Tax Withheld			

TO THE PARTNER: You may have a filing requirement with the State of Iowa, regardless of whether or not you are a resident of another state. The partnership may file a composite return on behalf of its nonresident partners and should notify you if they have done so. To claim any withholding or tax credits, a return must be filed. Filing information for individuals, corporations, and other entities are provided on our Web site: www.iowa.gov/tax/ or by calling (515) 281-3114 or 1-800-367-3388.

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