

Wisconsin Department of Revenue

For 2011 or taxable year beginning _____, 2011, and ending _____, 20____

Part I Information About the Partnership																
A Partnership's federal employer ID number B Partnership's name, address, city, state, and ZIP code C IRS center where partnership filed return D <input type="checkbox"/> Check if this is a publicly traded partnership (PTP)	G <input type="checkbox"/> General partner or LLC member-manager <input type="checkbox"/> Limited partner or other LLC member H <input type="checkbox"/> Domestic partner <input type="checkbox"/> Foreign partner I What type of entity is this partner? _____ (The following part of item I is optional): If known that this partner is a disregarded entity or grantor trust, enter name and identifying number of the taxpayer to whom this income will be reported: _____ J Partner's share of profit, loss, and capital: <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 20%; text-align: center;">Beginning</th> <th style="width: 20%; text-align: center;">Ending</th> </tr> </thead> <tbody> <tr> <td>Profit</td> <td style="text-align: center;">%</td> <td style="text-align: center;">%</td> </tr> <tr> <td>Loss</td> <td style="text-align: center;">%</td> <td style="text-align: center;">%</td> </tr> <tr> <td>Capital</td> <td style="text-align: center;">%</td> <td style="text-align: center;">%</td> </tr> </tbody> </table>					Beginning	Ending	Profit	%	%	Loss	%	%	Capital	%	%
	Beginning	Ending														
Profit	%	%														
Loss	%	%														
Capital	%	%														
Part II Information About the Partner																
E Partner's identifying number F Partner's name, address, city, state, and ZIP code	K Partner's share of liabilities at the year end: <table style="width:100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 80%;">Nonrecourse</td> <td style="width: 20%; text-align: right;">\$ _____</td> </tr> <tr> <td>Qualified nonrecourse financing</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Recourse</td> <td style="text-align: right;">\$ _____</td> </tr> </tbody> </table>				Nonrecourse	\$ _____	Qualified nonrecourse financing	\$ _____	Recourse	\$ _____						
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L Partner's capital account analysis: <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">Beginning capital account</th> <th style="width: 20%;">Capital contributed during the year</th> <th style="width: 20%;">Current year increase (decrease)</th> <th style="width: 20%;">Withdrawals and distributions</th> <th style="width: 20%;">Ending capital account</th> </tr> </thead> <tbody> <tr> <td>\$ _____</td> <td>\$ _____</td> <td>\$ _____</td> <td>\$ (_____)</td> <td>\$ _____</td> </tr> </tbody> </table> <p> <input type="checkbox"/> Tax basis <input type="checkbox"/> GAAP <input type="checkbox"/> Section 704(b) book <input type="checkbox"/> Other (explain) </p>					Beginning capital account	Capital contributed during the year	Current year increase (decrease)	Withdrawals and distributions	Ending capital account	\$ _____	\$ _____	\$ _____	\$ (_____)	\$ _____		
Beginning capital account	Capital contributed during the year	Current year increase (decrease)	Withdrawals and distributions	Ending capital account												
\$ _____	\$ _____	\$ _____	\$ (_____)	\$ _____												

M Partner's state of residence (if a full-year Wisconsin resident, items N, O, and P do not apply) _____

N Check if partner's Wisconsin amount is determined by apportionment. Apportionment percentage _____ %

O Check if partner's Wisconsin amount is determined by separate accounting.

P Check if the partner is a nonresident and filed Form PW-2 to opt out of pass-through entity withholding.

Q Check applicable boxes: **Final 3K-1** **Amended 3K-1**

	(a)	(b)	(c)	(d)	(e)
Distributive share items	Federal amount	Adjustment	Amount under Wis. law	Wis. source amount (see instructions)	
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 Ordinary dividends					
7 Royalties					
8 Net short-term capital gain (loss)					
9 Net long-term capital gain (loss)					
10a Net section 1231 gain (loss)					
10b Portion of the amount on line 10a attributable to gains on sales of farm assets					
11 Other income (loss) (list):					

12 Section 179 deduction					

(a) Distributive share items	(b) Federal amount	(c) Adjustment	(d) Amount under Wis. law	(e) Wis. source amount (see instructions)
13 Other deductions (list):				
14 Self-employment earnings (loss)				
15 a Schedule _____				
b Schedule _____				
c Schedule _____				
d Schedule _____				
e Schedule _____				
f Schedule _____				
g Schedule _____				
h Schedule _____				
i Schedule _____				
j Schedule _____				
k Schedule _____				
l Schedule _____				
m Schedule _____				
n Schedule _____				
o Tax paid to other states (1) _____				
(2) _____				
(3) _____				
p Wisconsin tax withheld				
16 Foreign transactions (list):				
17 Alternative minimum tax (AMT) items (list):				
18 a Tax-exempt interest income				
b Other tax-exempt income				
c Nondeductible expenses (list):				
19 Distributions (list):				
20 Other information (list):				
21 a Related entity expense addback				
b Related entity expense allowable				
22 Gross income (before deducting expenses) from all activities				

Part IV Partner's Share of Apportionment Factors (applies to partners that are corporations, partnerships, or LLCs)		
(a) Indicate factor used	(b) Wisconsin	(c) Total company
23 First factor:		
24 Second factor:		
25 Third factor:		