Iowa Department of Revenue www.iowa.gov/tax

2012 IA 1065

Iowa Partnership Return of Income For Calendar Year 2012 or other fiscal year

From / / to / /

<u> </u>	Short Period Amended Return Fi	nal Return		
Part I: Partnership Name and Address	A			
Name:	FEIN: A Business Code:			
Street Address:	County No.: Principal Activity:			
City, State, ZIP:	Number of Partners:			
Name of contact person:	Please list any other states in which the partnership			
Phone No.: (operates:	 		
Part II: Partnership Information Type of Return (check one): ☐ Partnership ☐ LLC ☐ Does the partnership have income/loss from business act Is any of the partnership's income/loss from real property Does the partnership's income / loss come from any activ of stocks or bonds? ☐ Yes ☐ No	ivities carried on within lowa? ☐ Yes ☐ No within lowa? ☐ Yes ☐ No	from the sale		
PART III - Modification of Partnership Income	Use Whole			
Federal partnership taxable income (loss) from federal Sche Interest from state and municipal bonds and securities Other additions. Attach Schedule				
Part IV: Business Activity Ratio (BAR) See instruction	ne Enter Whole Dellar Amounts			
	Column A Iowa Receipts Column B Receip			
2. Net Dividends. See instructions. 2. 3. Exempt Interest 3. 4. Accounts Receivable Interest 4. 5. Other Interest 5. 6. Rent 6. 7. Royalties 7. 8. Capital Gains / Loss 8. 9. Ordinary Gains / Loss 9. 10. Partnership Gross Receipts. Attach schedule. 10. 11. Other. Must attach schedule. 11. 12. TOTALS 12. 13. BAR to six decimal places. Divide line 12, column A, by line PART V: Enter Iowa net income for three preceding year File electronically. For details go to www.iowa.gov/tax. Declaration: Under penalties of perjury, I declare that I have examined knowledge, believe it to be true, correct and complete. If prepared by a which there is any knowledge.	12, column B. ars: 2009 2010 2011 this return and any attached schedules/statements, and, to person other than the taxpayer, the declaration is based o	% the best of my		
Signature of Partner or Member:	Preparer's Signature:	i		
Title:Date:	Date			
Daytime Telephone No.:	Preparer's Address: Preparer's PTIN: Hoover State Office Building, Des Moines IA	č		
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2012 IA 1065 Schedule K-1

Partner's Share of Iowa Income. Deductions. Modifications

Part I: General Information		Amondod I	ŕ						
Partnership or Limited Liability Company Information:		☐ Amended K-1 Partner's Entity Type: ☐ Individual ☐ Corporation ☐ Trust ☐ Partnership							
Name:									
FEIN:	A								
Partner Information:	Resident Partner Nonresident Partner Partner's Ownership Percentage: % Partnership Iowa Receipts: \$ Partnership Total Receipts: \$ Partnership BAR from page 1, Part IV, line 13: %								
Name: Social Security Number / FEIN: Address: City, State, ZIP:									
				Part II: Partner's Pro Rata Share Items		(a)	(b)	PARTNERS ONLY (c)	
				NOTE: Completed Iowa Schedule K-1s for all partners must be included with the IA 1065 Partnership Return.		Federal K-1 Amount	(Same ratio applies to each line item)	Apportionable To Iowa (a) x (b)	
				1. Ordinary business income (loss)	1.				
				2. Net rental real estate income (loss)	2.				
3. Other net rental income (loss)	3.								
4. Guaranteed payments									
5. Interest income									
6. Dividends line 6a, federal K-1									
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)	. 10.								
11. Other income (loss)	. 11.								
Total Income. Add lines 1 through 11.									
12. Section 179 deduction	. 12.								
13. Other deductions	. 13.								
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	15a.								
b) Adjusted gain or loss	15b.								
c) Depletion other than oil and gas	15c.								
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	15f.								
		(a) All Source Modifications	(b) Business Activity Ratio	(c) Apportionable To Iowa (a) x (b)					
16. MODIFICATIONS SCHEDULE	. 16.			<u> </u>					
Part III: Partner's Portion of IA Credits /Withholding Type of Iowa Credit Certificate I	Num	uher I	Current Year A	mount					
IA Income Tax Withheld	Tulli		Julient Teal A						
IA IIICOITIE I ax Withheld				<u></u>					
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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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