SCHEDULE WD

CAPITAL GAINS AND LOSSES

2012

Wisconsin Department of Revenue

Enclose with your Wisconsin Form 2

Name of estate or trust

Decedent's social security number

Estate or trust federal EIN

Pa	ırt l	Short-Term Ca	pital Gains and	l Losses – A	ssets Held	One	Year or Les	s				
(a	Description of property		(b) Date acquired	(c) Date sold			(e) Cost or other basis		(f) LOSS If (e) is more than (d), subtract (d) from (e)		(g) GAIN If (d) is more than (e), subtract (e) from (d)	
(Example, 100 shares XYZ Co.)			(mo., day, yr.)	(mo., day, yr.)								
1									Subtract (d) IIOI	1 (6)	Subtract (e) from	ii (u)
<u>'</u>												
2	Short-t	term gain or (loss)	from Forms 4684	6252 6781 #	and 8824		I	. 2				
		ort-term gain or (lo										
		ment to capital gai						, ,				
		Schedule C of Form						. 4				l
		term capital loss ca										
		nes 1 through 5, in	•		,		•		()		
		ort-term capital ga		-,						72		
		stributable portion i										
										70		
		utable portion inclue 11, column (d) of								7c		
		Long-Term Cap										
8		Long form our		200000 71				- Cui				
9		rom Form 4797, P										
	_	erm gain or loss fro										
		ng-term gain or (los	, '		•							
		al gain distributions						. 11				
12	Adjustment to capital gain or (loss) for differences between Wisconsin and federal basis from Schedule C of Form 2											
		term capital loss ca										
14	Add lir	nes 8 through 13, i	n columns (f) and	l (g)				. 14	()		
15a Net long-term capital gain or (loss). Combine columns (f) and (g) of line 14								15a				
15b	Nondi	stributable portion	included on line 1	I5a (see instru	ctions)					15b		
15c		outable portion incl			d on line 4a, c	olumi	n (d), of Scheo	dule 2	K-1 if a gain,	15c		

201	2 Schedule WD (Form 2)			Page 2
	e of estate or trust	Decedent's social security number	Estate or trust feder	
Pa	Int III Summary of Parts I and II (see instructions)			
16	Combine lines 7b and 15b, and fill in the net gain or (loss) here (i	if line 16 is a loss, go to line 26)	16	
	If line 16 shows a gain, fill in the smaller of line 15b or 16. Fill in there is a loss or no entry on line 15b			
	Fill in 30% of line 17 *			
19	Portion of the amount on line 14, column (g) that is attributable to the nondistributable portion of gain on the sale of farm assets. If zero, skip lines 20-23 and fill in the amount from line 18 on line 24			
20	Nondistributable portion of the amount from line 14, column (g)			
21	Divide line 19 by line 20. Carry the decimal to 4 places			
22	Multiply line 17 by the decimal amount on line 21 22			
23	Fill in 30% of line 22 *	23		
24	Add lines 18 and 23		24	
25	Subtract line 24 from line 16		25	
26	If line 16 shows a loss, fill in the smaller of: (a) The loss on line 16, (b) \$500, or (c) Wisconsin ordinary incom		26	
Not	e: When figuring whether 26a, 26b, or 26c is smaller, treat all nur	mbers as if they are positive.		
	*If capital gain income is used or set aside for charitable purpo	ses, see instructions.		
Pa	rt IV Computation of Wisconsin Adjustment to Income (Do	not complete this part if you are filing	3 Schedule NR.)	
27	Adjustment (see instructions for Part IV)			
	a Portion of the capital gain from federal Form 1041 allocable to or trust (if a loss, fill in -0-)			
	b Fill in gain from line 25 above (if blank, fill in -0-)			
	c If line 27b is more than line 27a, subtract line 27a from line 27 Fill in result here and on line 4 of Schedule A, Form 2		27c	
	d If line 27b is less than line 27a, subtract line 27b from line 27a Fill in result here and on line 9 of Schedule A, Form 2		27d	
	e Portion of the capital loss from federal Form 1041 allocable to estate or trust. Fill in as a positive amount (if a gain, fill in -0-)	the		
	f Fill in loss from line 26 above as a positive amount (if blank, fill in -0-)	27f		
	g If line 27f is more than line 27e, subtract line 27e from line 27f line 9 of Schedule A, Form 2 as a positive amount (if you also add the amounts on lines 27d and 27g, and fill in only the tota	f. Fill in result here and on have an amount on line 27d,	27g	
	h If line 27f is less than line 27e, subtract line 27f from line 27e. line 4 of Schedule A, Form 2 as a positive amount (if you also add the amounts on lines 27c and 27h, and fill in only the total	have an amount on line 27c,	27h	
Pa	rt V Computation of Capital Loss Carryovers From 2012 to	2013 (Complete this part if the loss or	n line 16 is more than t	he loss on line 26.)
Sho	ort-Term Capital Loss Carryover			
28	Fill in loss shown on line 7b as a positive amount. If none, fill in -	-		
29	Fill in gain shown on line 15b. If that line is blank or shows a loss			
30	Subtract line 29 from line 28.			
	Fill in the smaller of line 26 or line 30, treating both as positive an Subtract line 31 from line 30. This is your short-term capital loss of the smaller of line 30.			

Subtract line 31 from line 26, treating both as positive amounts. (Note: If you skipped lines 29

Long-Term Capital Loss Carryover