

**Beneficiary's Share
of Income, Deductions, etc.****2013**Wisconsin Department
of Revenue

For 2013 or taxable year beginning _____, 2013, and ending _____, 20____

Part I	Information About the Estate or Trust	Part II	Information About the Beneficiary
A	Estate's or trust's federal employer ID number	C	Beneficiary's identifying number
B	Estate's or trust's name, address, city, state, and ZIP code	D	Beneficiary's name, address, city, state, and ZIP code

E Check applicable boxes: ☐ **Final 2K-1** ☐ **Amended 2K-1**

F ☐ Check if beneficiary is a nonresident and filed Form PW-2 to opt out of pass-through entity withholding.

Part III Beneficiary's Share of Current Year Income, Deductions, Credits, and Other Items				
	(a) Distributive share items	(b) Federal amount	(c) Adjustment	(d) Wisconsin amount
1	Interest income			
2	Ordinary dividends			
3	Net short-term capital gain			
4a	Net long-term capital gain			
4b	Portion of the amount on line 4a, column (d) that is attributable to gain on the sale of farm assets			
5	Other portfolio income			
6	Ordinary business income			
7	Net rental real estate income			
8	Other rental income			
9	Directly apportioned deductions (list):			
10	Estate tax deduction			
11	Final year deductions (list):			
12	Alternative minimum tax adjustment (list):			

(a) Distributive share items	(b) Federal amount	(c) Adjustment	(d) Wisconsin amount
13 Other information (list):			
14 Related entity expenses:			
a Related entity expense addback		14a	
b Related entity expense allowable		b	
15 Wisconsin credits:			
a Schedule _____		15a	
b Schedule _____		b	
c Schedule _____		c	
d Schedule _____		d	
e Schedule _____		e	
f Schedule _____		f	
g Schedule _____		g	
h Schedule _____		h	
i Schedule _____		i	
j Schedule _____		j	
k Schedule _____		k	
L Schedule _____		L	
m Schedule _____		m	
n Schedule _____		n	
o Supplement to federal historic rehabilitation credit		o	
p Health insurance risk-sharing plan assessments credit		p	
q Wisconsin tax withheld		q	