Iowa Department of Revenue https://tax.iowa.gov

Daytime Telephone No.:

2015 IA 1065

Iowa Partnership Return of Income For Calendar Year 2015 or other fiscal year

From ___/___/__to_ /

Check all that apply: Name/Address Change]Short Period □ Ar	nended Return				
Part I: Partnership Name and Address						
-	FEIN:	▲ Business Code:				
Name:						
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 operates:					
Phone No.: (operates.	-				
	-					
Part II: Partnership Information Type of Return (check one): ☐ Partnership ☐ LLC ☐	TIIP					
Does the partnership have income/loss from business act		lowa? □Yes □No				
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	,	, 1				
PART III: Modification of Partnership Income		Use Whole Dollars				
Federal partnership taxable income (loss) from federal Sch	edule K					
2. Interest from state and municipal bonds and securities						
3. Other additions. Include Schedule						
4. Total additions. Add lines 2 and 3						
5. Interest and dividends from federal securities 5						
6. Other reductions. Include 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		9.				
Part IV: Business Activity Ratio (BAR) See instructio	ns. Enter	Whole Dollar Amounts.				
Types of Income	Column A Iowa Receip	ts Column B Receipts Everywhere				
1. Gross Receipts 1.						
						
3. Exempt Interest 3.						
4. Accounts Receivable Interest 4.						
5. Other Interest 5.						
6. Rent 6.						
7. Royalties 7.						
·						
·						
11. Other. Must include schedule 11.						
12. TOTALS 12.						
12. TOTALS	e 12, column B.	%				
12. TOTALS	e 12, column B.					
12. TOTALS	e 12, column B.	2013 2014				
12. TOTALS	e 12, column B. rs: 2012: his return and any included s	2013 2014 chedules/statements, and, to the best of my				
12. TOTALS	e 12, column B. rs: 2012 his return and any included sperson other than the taxpayer	% 2013 2014 chedules/statements, and, to the best of my er, the declaration is based on all information of				
12. TOTALS	e 12, column B. rs: 2012 his return and any included serson other than the taxpayer Preparer's Signature	% 2013 2014 chedules/statements, and, to the best of my er, the declaration is based on all information of				
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Mail To: Income Tax Return Processing, Iowa Department of Revenue, Hoover State Office Building, Des Moines IA 50319-0120

Preparer's ID No: ______ Telephone No. __

2015 IA 1065 Schedule K-1

Partner's Share of Iowa Income, Deductions, Modifications

Part I: General Information Partnership or Limited Liability Company Info Name: FEIN:									
Partner Information:									
Name:Social Security Number / FEIN:Address:									
				City, State, ZIP:		Partnership BAR from page 1, Part IV, line 13: %			
				Part II: Partner's Pro Rata Share Items		(2)		PARTNERS ONLY	
NOTE: Completed Iowa Schedule K-1s for all must be included with the IA 1065 Partnership		(a) Federal K-1 Amount	(b) Business Activity Ratio	(c) Apportionable To Iowa (a) x (b)					
Ordinary business income (loss)	 1								
2. Net rental real estate income (loss)	2								
3. Other net rental income (loss)	3								
4. Guaranteed payments	4								
5. Interest income	5								
6. Dividends line 6a, federal K-1	6								
7. Royalties	7								
8. Net short-term capital gain (loss)	8								
9. Net long-term capital gain (loss) line 9a, federal K-1 .	9								
10. Net section 1231 gain (loss)	10								
11. Other income (loss)	11								
Fotal Income. Add lines 1 through 11									
2. Section 179 deduction	12								
3. Other deductions	13								
Fotal deductions. Add lines 12 and 13									
Balance. Subtract total deductions from total income).								
4. Credits from the credit section of federal K-1	14								
5. 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 prop	perties 15d								
e) Deductions allocable to oil, gas, and geotherma	ıl properties15e								
f) Other adjustments and tax preference items. Include schedule.	15f								
		(a) All Source Modifications	(b) Business Activity Ratio	(c) Apportionable To Iowa (a) x (b)					
6. MODIFICATIONS SCHEDULE	16. <u>_</u>								
Part III: Partner's Portion of IA Credits /Wit	•								
Type of Iowa Credit C	ertificate Numb	oer	Current Year A	mount					
IA Income Tax Withheld				í					

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 Website: https://tax.iowa.gov or by calling 515-281-3114 or 800-367-3388.