

Beneficiary's Share of Income, Deductions, etc.For 2018 or taxable year beginning M M D D Y Y Y Y and ending M M D D Y Y Y Y **2018****Part I: Information About the Estate or Trust**

Name of Estate or Trust		Estate's or Trust's FEIN	
Estate's or Trust's Address	Estate's or Trust's City	State	Estate's or Trust's Zip Code

Part II: Information About the Beneficiary

Beneficiary's Business Name			Beneficiary's FEIN
Beneficiary's Last Name	Beneficiary's First Name	M.I.	Beneficiary's SSN
Beneficiary's Address	Beneficiary's City	State	Beneficiary's Zip Code

If the beneficiary is a disregarded entity or trust, enter the name and identifying number of the taxpayer to whom this income will be reported:

Business Name			FEIN
Individual's Last Name	First Name	M.I.	SSN

A Check if applicable: ☐ Final 2K-1 ☐ Amended 2K-1**B** Beneficiary's state of residence _____**C** ☐ 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 NO COMMAS; NO CENTS**

(a) <u>Distributive share items</u>	(b) <u>Federal amount</u>	(c) <u>Adjustment</u>	(d) <u>Amount under Wis. law</u>	(e) <u>Wis. source amount (see Form 2 instructions)</u>
1 Interest Income 1			1	
2 Ordinary Dividends 2			2	
3 Net short-term capital gain 3			3	
4a Net long-term capital gain 4a			4a	
b Portion of the amount on line 4a, that is attributable to gain on the sale of farm assets 4b			4b	
5 Other portfolio income 5			5	
6 Ordinary business income 6			6	
7 Net rental real estate income 7			7	
8 Other rental income 8			8	
9 Directly apportioned deductions (<i>list</i>)				
a _____ 9a			9a	
b _____ 9b			9b	
c _____ 9c			9c	
d Total (add lines 9a through 9c) 9d			9d	
10 Estate tax deduction 10			10	

Part III Beneficiary's Share of Current Year Income, Deductions, Credits, and Other Items NO COMMAS; NO CENTS

	(a) <u>Distributive share items</u>	(b) <u>Federal amount</u>	(c) <u>Adjustment</u>	(d) <u>Amount under Wis. law</u>	(e) <u>Wis. source amount (see Form 2 instructions)</u>
11 Final year deductions (<i>list</i>):					
a _____	11a _____		11a _____		
b _____	11b _____		11b _____		
c _____	11c _____		11c _____		
d _____	11d _____		11d _____		
e Total (add lines 11a through 11d)	11e _____		11e _____		
12 Alternative minimum tax item (<i>list</i>):					
a _____	12a _____		12a _____		
b _____	12b _____		12b _____		
c _____	12c _____		12c _____		
13 Other information (<i>list</i>):					
a _____	13a _____		13a _____		
b _____	13b _____		13b _____		
c _____	13c _____		13c _____		
14a Related entity expense addback			14a _____		
b Related entity expense allowable			14b _____		
15 Wisconsin Credits:					
a Schedule _____			15a _____		
b Schedule _____			15b _____		
c Schedule _____			15c _____		
d Schedule _____			15d _____		
e Schedule _____			15e _____		
f Schedule _____			15f _____		
g Schedule _____			15g _____		
h Schedule _____			15h _____		
i Schedule _____			15i _____		
j Wisconsin tax withheld (Do NOT include withholding from Forms 1099-R, W-2, and W2-G) ..			15j _____		
16 Income (loss)			16 _____		

