Form 3S

Wisconsin Partnership Temporary Recycling Surcharge

1999

Name and Address			A Federal Emp	A Federal Employer ID Number	
			B County	B County	
			C Check box [amended re	C Check box if this is an amended return.	
			D Check box [partnership E Check box [is an LLC.	partnership has terminated. E Check box if this H	
same period of same p	year beginning date, 1999, an as your Wisconsin partnership return and is due d an extension of time to file your partnership re	e at the same time as th turn, enter the extended	at return.) due date	,	
	ntact concerning this return: Namership engaged <i>only</i> in farming (see instructions		ephone Number If "yes," skip to line		
Surcharge on I	Net Business Income (Except From Farm	ning)			
1 Enter the partnership gross receipts (see instructions)					
Surcharge on Net Farm Profit					
6 If you are engaged in farming and have a net farm profit of \$1,000 or more, enter \$25					
Amount Due or Refund					
8 Enterestimat 9 Interest due (f 10 Amount Due 11 Overpaymer 12 Enter amount	nd 6. This is the total temporary recycling surcharge ed temporary recycling surcharge payments (see instrum Form 3U, line 11)	er amount oweder amount overpaidharge	8 9 10		
SIGNATURES	Under penalties of law, I declare that this return is true, of Signature of General Partner		t of my knowledge and belief. Date		
	Signature of Preparer	Preparer's Address		Date	
MAILING Please make your check payable to and mail Form 3S to: Wisconsin Department of Revenue P.O. Box 8965 Madison, WI 53708-8965					