



Form **3**

# Wisconsin Partnership Return

# 2003

For 2003 or taxable year beginning \_\_\_\_\_, 2003, and ending \_\_\_\_\_, 20\_\_\_\_  
**Due Date** - 15th day of 4th month following close of taxable year

|                                                                                |  |       |                                                        |  |                                                                                                           |
|--------------------------------------------------------------------------------|--|-------|--------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------|
| Place label here. Make necessary corrections. Otherwise, please print or type. |  |       | A Federal Employer ID Number                           |  | E Check here <input type="checkbox"/> if this is an amended return                                        |
|                                                                                |  |       | B Wis. Seller's Permit Number                          |  | F Check here <input type="checkbox"/> if the partnership has terminated                                   |
| Name                                                                           |  |       | C Wis. Employer ID Number                              |  | G Check here <input type="checkbox"/> if you want forms sent to you for 2004                              |
| Number and Street                                                              |  |       | D Contact Person                                       |  | H Telephone Number                                                                                        |
| City                                                                           |  | State | Zip Code                                               |  | J Check here <input type="checkbox"/> if you have at least \$4 million of gross receipts and file Form 3S |
| I What type of entity is filing this return?                                   |  |       |                                                        |  |                                                                                                           |
| <input type="checkbox"/> General partnership                                   |  |       | <input type="checkbox"/> Limited partnership           |  |                                                                                                           |
| <input type="checkbox"/> Limited liability company                             |  |       | <input type="checkbox"/> Limited liability partnership |  |                                                                                                           |
| <input type="checkbox"/> Other                                                 |  |       |                                                        |  |                                                                                                           |

## Schedule 3K – Partners' Shares of Income, Deductions, etc. (See instructions on page 5)

|                                             |                                                                    | (a) Distributive share items                                                  | (b) Federal amount                                                     | (c) Adjustment | (d) Wisconsin amount |  |
|---------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------|----------------------|--|
| <b>Income (Loss)</b>                        | 1                                                                  | Ordinary income (loss) from trade or business activities .....                |                                                                        |                |                      |  |
|                                             | 2                                                                  | Net income (loss) from rental real estate activities (attach Form 8825) ..... |                                                                        |                |                      |  |
|                                             | 3                                                                  | Net income (loss) from other rental activities .....                          |                                                                        |                |                      |  |
|                                             | 4                                                                  | Portfolio income (loss): a                                                    | Interest income .....                                                  |                |                      |  |
|                                             |                                                                    | b                                                                             | Total ordinary dividends .....                                         |                |                      |  |
|                                             |                                                                    | c                                                                             | Royalty income .....                                                   |                |                      |  |
|                                             |                                                                    | d                                                                             | Net short-term capital gain (loss) (entire year) .....                 |                |                      |  |
| e                                           | Net long-term capital gain (loss) (entire year) .....              |                                                                               |                                                                        |                |                      |  |
| f                                           | Other portfolio income (loss) (attach schedule) .....              |                                                                               |                                                                        |                |                      |  |
|                                             | 5                                                                  | Guaranteed payments to partners .....                                         |                                                                        |                |                      |  |
|                                             | 6                                                                  | Net section 1231 gain (loss) (entire year) (attach Form 4797) .....           |                                                                        |                |                      |  |
|                                             | 7                                                                  | Other income (loss) (attach schedule) .....                                   |                                                                        |                |                      |  |
| <b>Deductions</b>                           | 8                                                                  | Charitable contributions (attach schedule) .....                              |                                                                        |                |                      |  |
|                                             | 9                                                                  | Section 179 expense deduction (attach Form 4562) .....                        |                                                                        |                |                      |  |
|                                             | 10                                                                 | Deductions related to portfolio income (attach schedule) .....                |                                                                        |                |                      |  |
|                                             | 11                                                                 | Other deductions (attach schedule) .....                                      |                                                                        |                |                      |  |
| <b>Credits</b>                              | 12                                                                 | a                                                                             | Manufacturer's sales tax credit (attach Schedule 3Z) .....             |                |                      |  |
|                                             |                                                                    | b                                                                             | Development zones credit .....                                         |                |                      |  |
|                                             |                                                                    | c                                                                             | Development opportunity zone investment credit .....                   |                |                      |  |
|                                             |                                                                    | d                                                                             | Development zone capital investment credit .....                       |                |                      |  |
|                                             |                                                                    | e                                                                             | Technology zone credit .....                                           |                |                      |  |
|                                             |                                                                    | f                                                                             | Supplement to federal historic rehabilitation tax credit .....         |                |                      |  |
| <b>Inv. Interest</b>                        | 13                                                                 | a                                                                             | Interest expense on investment debts .....                             |                |                      |  |
|                                             |                                                                    | (1)                                                                           | Investment income included on lines 4a, 4b, 4c, and 4f above .....     |                |                      |  |
|                                             |                                                                    | (2)                                                                           | Investment expenses included on line 10 above .....                    |                |                      |  |
| <b>Adjustments and Tax Preference Items</b> | 14                                                                 | a                                                                             | Depreciation adjustment on property placed in service after 1986 ..... |                |                      |  |
|                                             |                                                                    | b                                                                             | Adjusted gain or loss .....                                            |                |                      |  |
|                                             |                                                                    | c                                                                             | Depletion (other than oil and gas) .....                               |                |                      |  |
|                                             |                                                                    | (1)                                                                           | Gross income from oil, gas, and geothermal properties .....            |                |                      |  |
|                                             |                                                                    |                                                                               | Deductions allocable to oil, gas, and geothermal properties .....      |                |                      |  |
| e                                           | Other adjustments and tax preference items (attach schedule) ..... |                                                                               |                                                                        |                |                      |  |
| <b>Other</b>                                | 15                                                                 | Section 59(e)(2) expenditures: Type <input type="checkbox"/> Amount           |                                                                        |                |                      |  |
|                                             | 16                                                                 | Tax-exempt interest income .....                                              |                                                                        |                |                      |  |
|                                             | 17                                                                 | Other tax-exempt income .....                                                 |                                                                        |                |                      |  |
|                                             | 18                                                                 | Nondeductible expenses .....                                                  |                                                                        |                |                      |  |
|                                             | 19                                                                 | Distributions of money (cash and marketable securities) .....                 |                                                                        |                |                      |  |
|                                             | 20                                                                 | Distributions of property other than money .....                              |                                                                        |                |                      |  |
|                                             | 21                                                                 | Attach schedule for other items and amounts not reported above .....          |                                                                        |                |                      |  |
| 22                                          | Income (loss) (see instructions) .....                             |                                                                               |                                                                        |                |                      |  |

**SIGNATURES** Under penalties of law, I declare that I have personally examined this return, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

|                              |      |                       |      |
|------------------------------|------|-----------------------|------|
| Signature of General Partner | Date | Signature of Preparer | Date |
|------------------------------|------|-----------------------|------|

**MAILING** Attach a copy of your federal Form 1065 and Schedules 3K-1  
Mail to: Wisconsin Department of Revenue, P.O. Box 59, Madison, WI 53785-0001