## SCHEDULE (Form 2)

## **CAPITAL GAINS AND LOSSES**

2008

Wisconsin Department of Revenue

## **Enclose with your Wisconsin Form 2**

Name of estate or trust		Decedent's social security number Es		per Estate or tru	state or trust federal EIN	
Part I Short-Term Capital Gains an	d Losses – Assets	Held One Year	or Less	I		
(a) Description of property (Example, 100 shares 7% preferred of "Z" Co	(b) Date acquired .) (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) GAIN OR (LOSS) (col. (d) less (e))	
1	, ( = , = 3, 3 ,	( - , , , ,			(3) (3)	
2 Short-term gain or (loss) from Forms	4684, 6252, 6781,	and 8824		2		
3 Net short-term gain or (loss) from par	tnerships, S corpor	ations, and othe	r estates or trusts	3		
4 Adjustment to capital gain or (loss) for from Schedule C of Form 2				4		
5 Short-term capital loss carryover from					( )	
6a Combine lines 1 through 5 in column						
6b Nondistributable portion included on	* *					
6c Distributable portion included on line	-	•				
if a gain, and on line 11, column (d) o						
Part II Long-Term Capital Gains and	d Losses – Assets	Held More Tha	n One Year or Ac	quired From A De	ecedent	
7						
8 Long-term gain or (loss) from Forms	2439, 4684, 6252, 6	6781, and 8824		8		
9 Net long-term gain or (loss) from part	nerships, S corpora	ations, and other	estates or trusts	9		
10 Capital gain distributions						
11 Enter gain from Form 4797, Part I				11		
12 Adjustment to capital gain or (loss) for basis from Schedule C of Form 2	r differences betwe			12		
13 Long-term capital loss carryover from 2007 Wisconsin Schedule WD (Form 2), line 30					( )	
14a Combine lines 7 through 13 in column (f)						
14b Nondistributable portion included on	line 14a (see instru	ctions)		14b		
14c Distributable portion included on line 14a (fill in here and on line 4, column (d), of Schedule 2K-1 if a gain, and on line 11, column (d) of Schedule 2K-1 if a loss)						

Schedule WD (Form 2) 2008 Page 2 Name of estate or trust Decedent's social security number Estate or trust federal FIN (a) Beneficiaries (b) Fiduciary Summary of Parts I and II Part III 15 Combine lines 6b and 14b and enter the net gain or (loss) in column (b) . . . . . . . . . Note: If line 15, column (b) is a loss, skip lines 16 through 18 and complete line 19. If line 15, column (b) is a gain, complete lines 16 through 18 and skip line 19. If line 15, column (b), shows a gain, fill in the smaller of line 14b or line 15, column (b). 17 Note: If capital gain income is used or set aside for charitable purposes, see instructions. If line 15, column (b) shows a (loss), fill in the smallest of: a The (loss) on line 15, column (b), or (\$500), or Note: When figuring whether 19a, 19b, or 19c is smallest, treat all numbers as if they are positive. Part IV **Computation of Wisconsin Adjustment to Income** (a) Beneficiaries (b) Fiduciary 20 Adjustment (see instructions for Part IV) Fill in gain from federal Form 1041, line 4. If a loss, fill in zero (0) . . . . . . . . . . 20a If line 20b, column (b) is more than line 20a, column (b), subtract line 20a from line 20b. Fill in the result here and on line 4 of Schedule A, Form 2. . . . . . . 20c If line 20b, column (b) is less than line 20a, column (b), subtract line 20b from line 20a. Fill in the result here and on line 9 of Schedule A, Form 2...............20d Fill in loss from federal Form 1041, line 4 as a positive amount. Fill in loss from line 19 above as a positive amount. If line 20f, column (b) is more than line 20e, column (b), subtract line 20e from line 20f. Fill in the result here and on line 9 of Schedule A, Form 2. (If you also have an amount on line 20d, column (b), add the amounts on lines 20d and 20g, and fill in the total on line 9 of Schedule A, Form 2)......20g h If line 20f, column (b) is less than line 20e, column (b), subtract line 20f from line 20e. Fill in the result here and on line 4 of Schedule A, Form 2. (If you also have an amount on line 20c, column (b), add the amounts on lines 20c and 20h, and fill in the total on line 4 of Schedule A, Form 2) . . . . . . . 20h Part V Computation of Capital Loss Carryovers From 2008 to 2009 (Complete this part if the loss on line 15, column (b) is more than the loss on line 19.) Fiduciary **Short-Term Capital Loss Carryover** Fill in the loss shown on line 6b as a positive amount. If none, fill in zero (0) and skip