

Form **3** Wisconsin Partnership Return

2008

For 2008 or taxable year beginning and ending

Complete form using BLACK INK.

Due Date: 15th day of 4th month following close of taxable year.

DO NOT STAPLE OR BIND

Name, Number and Street, City, State, ZIP (+ 4 digit suffix if known), A Federal Employer ID Number, B Business Activity (NAICS) Code, C State of Formation and Year, D Check type of entity that is filing this return: 1 General partnership, 2 Limited liability partnership, 3 Limited partnership, 4 Limited liability company, 5 Other (explain below). Enter abbreviation of state in box, or if a foreign country, enter below.

Check if applicable and see instructions:

- E If this is an amended return, include an explanation of the changes.
F If you have an extension of time to file, enter the extended due date
G If the partnership has terminated.
H If you are filing a Form 1CNP on behalf of nonresident partners.
I If you have related entity expenses and are required to file Schedule RT with this return.
J If you have at least \$4 million of gross receipts and file Form 3S.
K Number of partners
L Number of nonresident partners
M Person to contact concerning this return: Phone #: Fax #:



Schedule 3K - Partners' Distributive Share Items

ENTER NEGATIVE NUMBERS LIKE THIS -> -1000 NOT LIKE THIS -> (1000) NO COMMAS; NO CENTS

Table with 4 columns: (a) Distributive share items, (b) Federal amount, (c) Adjustment, (d) Amount under Wis. law. Rows include Income (Loss) items 1-11 and Other Deductions items 12-14.

	(a) Distributive share items	(b) Federal amount	(c) Adjustment	(d) Amount under Wis. law
Credits	15 a Manufacturing investment credit	_____	_____	_____
	b Dairy and livestock farm investment credit	_____	_____	_____
	c Health Insurance Risk-Sharing Plan assessments credit	_____	_____	_____
	d Ethanol and biodiesel fuel pump credit	_____	_____	_____
	e Development zones credit	_____	_____	_____
	f Development opportunity zone investment credit	_____	_____	_____
	g Development zone capital investment credit	_____	_____	_____
	h Technology zone credit	_____	_____	_____
	i Early stage seed investment credit	_____	_____	_____
	j Angel investment credit	_____	_____	_____
	k Supplement to federal historic rehabilitation tax credit	_____	_____	_____
	l Film production company investment credit	_____	_____	_____
	m Film production services credit - nonrefundable portion	_____	_____	_____
	n Internet equipment credit	_____	_____	_____
	o Enterprise zone jobs credit	_____	_____	_____
	p Dairy manufacturing facility investment credit	_____	_____	_____
q Film production services credit - refundable portion	_____	_____	_____	
(r) Tax paid to other states (enter postal abbreviation of state) (1) _____				
	(2) _____			
	(3) _____			
(s) Wisconsin tax withheld	_____	_____	_____	
Foreign Transactions	16 a Name of country or U.S. possession	_____	_____	_____
	b Gross income from all sources	_____	_____	_____
	c Gross income sourced at partner level	_____	_____	_____
	<i>Foreign gross income sourced at partnership level:</i>			
	d Passive category	_____	_____	_____
	e General category	_____	_____	_____
	f Other (<i>attach statement</i>)	_____	_____	_____
	<i>Deductions allocated and apportioned at partner level:</i>			
	g Interest expense	_____	_____	_____
	h Other	_____	_____	_____
	<i>Deductions allocated and apportioned at partnership level to foreign source income:</i>			
	i Passive category	_____	_____	_____
	j General category	_____	_____	_____
	k Other (<i>attach statement</i>)	_____	_____	_____
l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	_____	_____	_____	
m Reduction in taxes available for credit (<i>attach statement</i>)	_____	_____	_____	
n Other foreign tax information (<i>attach statement</i>)	_____	_____	_____	



		(a) Distributive share items	(b) Federal amount	(c) Adjustment	(d) Amount under Wis. law
Alternative Minimum Tax (AMT) Items	17 a Post-1986 depreciation adjustment	_____	_____	_____	_____
	b Adjusted gain or loss	_____	_____	_____	_____
	c Depletion (other than oil and gas)	_____	_____	_____	_____
	d Oil, gas, and geothermal properties – gross income	_____	_____	_____	_____
	e Oil, gas, and geothermal properties – deductions	_____	_____	_____	_____
	f Other AMT items (<i>attach schedule</i>)	_____	_____	_____	_____
Other	18 a Tax-exempt interest income	_____	_____	_____	_____
	b Other tax-exempt income	_____	_____	_____	_____
	c Nondeductible expenses	_____	_____	_____	_____
	19 a Distributions of cash and marketable securities	_____	_____	_____	_____
	b Distributions of other property	_____	_____	_____	_____
	20 a Investment income	_____	_____	_____	_____
	b Investment expenses	_____	_____	_____	_____
	c Other items and amounts (<i>attach schedule</i>)	_____	_____	_____	_____
	21 a Related entity interest expense addback	_____	_____	_____	_____
	b Related entity rental expense addback	_____	_____	_____	_____
	c Related entity interest expense allowable	_____	_____	_____	_____
	d Related entity rental expense allowable	_____	_____	_____	_____
	22 Income (loss) (<i>see instructions</i>)	_____	_____	_____	_____
23 Gross income (before deducting expenses) from all activities	_____	_____	_____	_____	

Under penalties of law, I declare that this return and all attachments are true, correct, and complete to the best of my knowledge and belief.

Signature of General Partner	Date	Signature of Preparer	Date
			

If you are not filing electronically, paper clip (don't staple or bind) a copy of your federal Form 1065, any accompanying schedules, and Schedules 3K-1.

File electronically through the Federal/State E-Filing Program, or mail to: Wisconsin Department of Revenue
 PO Box 8965
 Madison WI 53708-8965

