

Part 2: Nonresident Shareholder, Partner, Member, or Beneficiary Information

(Note: See instructions corresponding to each column letter)

↓ If affidavit (Form PW-2) was filed by nonresident, columns E through H are not required.

| Line | A. Nonresident's Name and Address | B. FEIN or SSN | C. Tax Form | D. Affidavit Filed | E. Share of Wisconsin Taxable Income | F. Gross Withholding | G. Share of Tax Credits | H. Withholding Tax Computed |
|---|--------------------------------------|-------------------|----------------|------------------------------|---|-------------------------|----------------------------|--------------------------------|
| a | Name | FEIN | | <input type="checkbox"/> Yes | \$ | \$ | \$ | \$ |
| | Address | SSN | | <input type="checkbox"/> No | | | | |
| b | Name | FEIN | | <input type="checkbox"/> Yes | \$ | \$ | \$ | \$ |
| | Address | SSN | | <input type="checkbox"/> No | | | | |
| c | Name | FEIN | | <input type="checkbox"/> Yes | \$ | \$ | \$ | \$ |
| | Address | SSN | | <input type="checkbox"/> No | | | | |
| d | Name | FEIN | | <input type="checkbox"/> Yes | \$ | \$ | \$ | \$ |
| | Address | SSN | | <input type="checkbox"/> No | | | | |
| e | Name | FEIN | | <input type="checkbox"/> Yes | \$ | \$ | \$ | \$ |
| | Address | SSN | | <input type="checkbox"/> No | | | | |
| f | Name | FEIN | | <input type="checkbox"/> Yes | \$ | \$ | \$ | \$ |
| | Address | SSN | | <input type="checkbox"/> No | | | | |
| g | Name | FEIN | | <input type="checkbox"/> Yes | \$ | \$ | \$ | \$ |
| | Address | SSN | | <input type="checkbox"/> No | | | | |
| h | Name | FEIN | | <input type="checkbox"/> Yes | \$ | \$ | \$ | \$ |
| | Address | SSN | | <input type="checkbox"/> No | | | | |
| i | Name | FEIN | | <input type="checkbox"/> Yes | \$ | \$ | \$ | \$ |
| | Address | SSN | | <input type="checkbox"/> No | | | | |
| Total Wisconsin income (add lines a through i) | | | | | \$ | | | |
| 15 Total withholding this page | | | | | | | | \$ |
| 16 Number of additional pages included _____. Total of line 15 amount from all additional pages | | | | | | | | \$ |
| 17 Total withholding tax computed. Add lines 15 and 16 . Enter total on Part 1, line 1 | | | | | | | | \$ |