

Beneficiary's Share of Income, Deductions, etc.

For 2017 or taxable year beginning MMDDYYYY and ending MMDDYYYY

Part I: Information About the Estate or Trust

Form with fields: Name of Estate or Trust, Estate's or Trust's FEIN, Estate's or Trust's Address, Estate's or Trust's City, State, Estate's or Trust's Zip Code

Part II: Information About the Beneficiary

Form with fields: Beneficiary's Business Name, Beneficiary's FEIN, Beneficiary's Last Name, Beneficiary's First Name, M.I., Beneficiary's SSN, Beneficiary's Address, Beneficiary's City, State, Beneficiary's Zip Code

If the beneficiary is a disregarded entity or trust, enter the name and identifying number of the taxpayer to whom this income will be reported:

Form with fields: Business Name, FEIN, Individual's Last Name, First Name, M.I., SSN

A Check if applicable: [] Final 2K-1 [] Amended 2K-1

B Beneficiary's state of residence _____

C [] Check if beneficiary is a nonresident and filed Form PW-2 to opt out of pass-through entity withholding



Part III Beneficiary's Share of Current Year Income, Deductions, Credits, and Other Items NO COMMAS; NO CENTS

Table with 5 columns: (a) Distributive share items, (b) Federal amount, (c) Adjustment, (d) Amount under Wis. law, (e) Wis. source amount. Rows include Interest Income, Ordinary Dividends, Net short-term capital gain, Net long-term capital gain, Other portfolio income, Ordinary business income, Net rental real estate income, Other rental income, Directly apportioned deductions, Estate tax deduction.

Part III Beneficiary's Share of Current Year Income, Deductions, Credits, and Other Items NO COMMAS; NO CENTS

| | (a) | (b) | (c) | (d) | (e) |
|------------|--|-----------------------|-------------------|------------------------------|--|
| | <u>Distributive share items</u> | <u>Federal amount</u> | <u>Adjustment</u> | <u>Amount under Wis. law</u> | <u>Wis. source amount (see instructions)</u> |
| 11 | Final year deductions <i>(list)</i> | | | | |
| a | _____ | 11a _____ | _____ | 11a _____ | _____ |
| b | _____ | 11b _____ | _____ | 11b _____ | _____ |
| c | _____ | 11c _____ | _____ | 11c _____ | _____ |
| d | _____ | 11d _____ | _____ | 11d _____ | _____ |
| e | Total (add lines 11a through 11d) | 11e _____ | _____ | 11e _____ | _____ |
| 12 | Alternative minimum tax item <i>(list)</i> : | | | | |
| a | _____ | 12a _____ | _____ | 12a _____ | _____ |
| b | _____ | 12b _____ | _____ | 12b _____ | _____ |
| c | _____ | 12c _____ | _____ | 12c _____ | _____ |
| 13 | Other information <i>(list)</i> : | | | | |
| a | _____ | 13a _____ | _____ | 13a _____ | _____ |
| b | _____ | 13b _____ | _____ | 13b _____ | _____ |
| c | _____ | 13c _____ | _____ | 13c _____ | _____ |
| 14a | Related entity expense addback | | | 14a _____ | |
| b | Related entity expense allowable | | | 14b _____ | |
| 15 | Wisconsin Credits: | | | | |
| a | Schedule _____ | | | 15a _____ | |
| b | Schedule _____ | | | 15b _____ | |
| c | Schedule _____ | | | 15c _____ | |
| d | Schedule _____ | | | 15d _____ | |
| e | Schedule _____ | | | 15e _____ | |
| f | Schedule _____ | | | 15f _____ | |
| g | Schedule _____ | | | 15g _____ | |
| h | Schedule _____ | | | 15h _____ | |
| i | Schedule _____ | | | 15i _____ | |
| j | Wisconsin tax withheld | | | 15j _____ | _____ |
| 16 | Income (loss) | | | 16 _____ | _____ |

