

If this is a final return, check here

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.

L i n e	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							\$	