

Schedule 2		Nonresident Shareholders Qualifying and Participating in Composite Return (Attach a separate schedule, if necessary.)						
(A) Name and Address of Nonresident Shareholder (if Married Filing Jointly, see instructions)	(B) Social Security Number	(C) Pro Rata Share (%)	(D1) Shareholder's Share of WI Net Income (Loss) (D2) Shareholder's Share of WI Gross Income (from Sch. 5K-1, line 20)	(E) Federal Adjusted Gross Income From Form 1040	(F) Filing Status (S, H, MFJ, MFS)	(G) Tax From Worksheet or 7.65% of (D1)	(H) Tax Withheld from Form PW-1	(I) Balance Due (Overpay- ment)
a.			D1					
			D2					
b.			D1					
			D2					
c.			D1					
			D2					
d.			D1					
			D2					
e.			D1					
			D2					
f.			D1					
			D2					
g.			D1					
			D2					
h.			D1					
			D2					
i.			D1					
			D2					
j.			D1					
			D2					
k.			D1					
			D2					
TOTALS (enter on appropriate line on Schedule 1)			D1 total only					