Forr

3 Wisconsin Partnership Return

2014

DO NOT STAPLE OR BIND

Con	plete form using BLACK INK.		Due Date: 1	5th day of 4th	month follow	wing close o	f taxable year.
Nam	e						
Num	ber and Street					Suite Numb	per
City		State	ZIP (+ 4 digit suffix if	known) A Fed	leral Employe	r ID Number	
D C	neck ✓ type of entity that is filing this return:			B Bus	iness Activity	(NAICS) Code)
1	General partnership 3 Limited partnership	5	Other (explain below)	C Sta	te of Formatio		d Year
2	Limited liability partnership 4 Limited liability compan				state in	bbreviation of box, or if a country, enter	<u> </u>
Chec	k ✓ if applicable and see instructions:						
E_	If you have an extension of time to file, enter the extended due date	te		<u>.</u> •			
	If this is an amended return, include an explanation of the changes		DYYYY				
G _	If you are filing a Form 1CNP on behalf of nonresident partners.		1				
н_	If you have related entity expenses and are required to file Schedu	ule RT with th	is return.				
ı _	If the partnership has terminated. J If this is the first re	eturn.					
K N	umber of partners ▶ L Number of nonresident	partners					
М	If the partnership is the sole owner of any limited liability companie	es. Prepare a	nd submit Schedule DI	E			
	with this return.				IF NO E	NTRY, LEA	VE BLANK
	ENTER NEGATIVE NUMBERS LIKE THIS → -1000	<u>NO</u>	\overline{OT} LIKE THIS \rightarrow	(1000)	<u>NO</u> CO	OMMAS; <u>N</u>	O CENTS
Pa	rt I Amount of Refund						
<u>1</u>	Payments from Form WT-11				1		. 00
<u>2</u>	Withholding from Form W-2G				2		. 00
<u>3</u>	Amended Return Only – amount previously paid				3		. 00
<u>4</u>	Add lines 1 through 3				4		. 00
<u>5</u>	Amended Return Only – amount previously refunded				5		. 00
<u>6</u>	Overpayment. Subtract line 5 from 4. This is your re	fund			6		. 00
7	Wisconsin property				7		•00
<u>8</u>	Total company property				8		•00
9	Wisconsin payroll				9		. 00
<u>10</u>	Total company payroll				10		•00
<u>11</u>	Wisconsin sales				11		•00
<u>12</u>	Total company sales				12		•00
<u>13</u>	Did you file federal Form 8886 – Reportable Transac	tion Disclo	sure Statement w	ith the Interr	al Revenu	e Service?	
	Yes , No If yes, enclose federal Form 8886 v	vith vour W	/isconsin tax retu	rn.			

2014 Form 3 Page **2 of 4**

Par	Schedule 3K – Partners' Distributive Share Items							
	(a) Distributive share items (b) Federal amount	(c) Adjustment (d) Amount under Wis. law						
	1 Ordinary business income (loss)	.00						
Income (Loss)	2 Net rental real estate income (loss) (attach Form 8825) 2	.00 2 .00						
	3 Other net rental income (loss) (attach schedule)	.00 3 .00						
	4 Guaranteed payments 4 00	.00 4 .00						
	5 Interest income	.00 5 .00						
	6 Ordinary dividends	.00 6 .00						
	7 Royalties	.00 7 .00						
	8 Net short-term capital gain (loss)	.00.						
	Net long-term capital gain (loss)	.00.						
	10 Net section 1231 gain (loss) (attach Form 4797)	.00 00 .00						
	(11) Other income (loss) (attach schedule)	.00 (11) .00						
	(12) Section 179 deduction (attach Form 4562)	.00(12) .00						
Other Deductions	13 a Contributions	.00.						
	b Investment interest expense	.00						
Other ductio	c Section 59(e)(2) expenditures (1) Type							
De	(2) Amount	.00. 00.						
	d Other deductions (attach schedule)	.00. d .00.						
	14 Net earnings (loss) from self employment							
	15 (a) Schedule	a .00						
	b Schedule							
	© Schedule	<u> </u>						
	d Schedule							
	(e) Schedule	_						
	f Schedule	_						
	(9 Schedule							
	h Schedule							
ts	i Schedule							
Credits								
ວັ	k Schedule	<u> </u>						
	n Schedule							
	Tax paid to other states (enter postal abbreviation of state) (1)							
	(2)							
	(3)							
	p Wisconsin tax withheld							



2014 Form 3 Page **3 of 4**

			(a) Distributive share items	(b) Federal amount	(c) Adjustment	(d) Amount under Wis. law
	16	а	Name of country or U.S. possession			
		b	Gross income from all sources			
		С	Gross income sourced at partner level	.00	00.	.00.
			Foreign gross income sourced at partnership level:			
		d	Passive category		00	.00.
"		е	General category			.00
Foreign Transactions		f	Other (attach statement)		.00	00
sact			Deductions allocated and apportioned at partner level:			
ran		g	Interest expense			00
gn T		h	Other			.00
orei			Deductions allocated and apportioned at partnership level to	foreign source incom	ne:	
Ĕ		i	Passive category	.00	.00	.00
		j	General category	.00	.00	.00
		k	Other (attach statement)	.00	.00	.00
		ı	Total foreign taxes (check one): Paid Accrued	.00	.00	.00
		m	Reduction in taxes available for credit (attach statement)	.00	.00	.00
		n	Other foreign tax information (attach statement)	.00	.00	.00
	17	а	Post-1986 depreciation adjustment		00	
ັ ems		b	Adjusted gain or loss		00	.00
Minimum Tax (AMT) Items		С	Depletion (other than oil and gas)	.00		
AM		d	Oil, gas, and geothermal properties – gross income		.00	
] [ax (е	Oil, gas, and geothermal properties – deductions			
		f	Other AMT items (attach schedule)		.00	
	18	a	Tax-exempt interest income	.00	.00(a .00
	(b	Other tax-exempt income	.00	000(b .00
	(C	Nondeductible expenses	.00	000	c .00
	19	a	Distributions of cash and marketable securities 19 a	.00	000_	a .00
	(b	Distributions of other property	.00.	.00	b .00
er	20	а	Investment income			
Other		b	Investment expenses			
		С	Other items and amounts (attach schedule)			.00.
	21 (_	Related entity expense addback		(a .00
		_	Related entity expense allowable			b 00
	(22)	In	come (loss) (see instructions)	.00		.00
	<u></u>		ross income (before deducting expenses) from all activities			.00



Page 4 of 4 2014 Form 3 Person to contact concerning this return: Phone #: Fax #: 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 **Third** Do you want to allow another person to discuss this return with the department? ____ Yes Complete the following. **Party** Personal Designee's Phone identification **Designee** no. ▶ (number (PIN)

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

If partnership completed Part I...... PO Box 8908, Madison, WI 53708-8908

If partnership only completed Part II...... PO Box 8965, Madison, WI 53708-8965