

For 2010 or taxable year beginning and ending

If this is an amended return, check here

If this is a final return, check here

DO NOT STAPLE OR BIND

Part 1: Pass-Through Entity Information

Name of Pass-Through Entity Withholding the Tax		Federal Employer ID Number	
Number and Street	Suite/Unit	For Estates Only: Decedent's Social Security Number	
City		State	ZIP Code
Person to Contact Regarding This Information		Telephone Number	
A Income of franchise tax form number filed (or to be filed) by the pass-through entity for this period (check one): <input type="checkbox"/> 5S <input type="checkbox"/> 3 <input type="checkbox"/> 2			
B Total pass-through income under Wisconsin law (see instructions)00

ENTER NEGATIVE NUMBERS LIKE THIS → -1000 NOT LIKE THIS → (1000)		NO COMMAS; NO CENTS	
1	Total withholding tax computed (from Part 2, line 14)	1	.00
2	Estimated quarterly withholding tax payments (less Form 4466W refund, if any)	2	.00
3	Enter total tax withheld by lower-tier entities from Part 1A (Identify lower-tier entities in Part 1A below.)	3	.00
4	AMENDED RETURN ONLY - amount paid with original return	4	.00
5	Add lines 2, 3 and 4	5	.00
6	Underpayment interest due (from Form PW-U, line 17). If you annualized income on Form PW-U, check the space after the arrow. <input type="checkbox"/>	6	.00
7	Other interest and penalty due	7	.00
8	Amount due. If the total of lines 1, 6 and 7 is greater than line 5, enter amount owed	8	.00
9	Overpayment. If line 5 is greater than the total of lines 1, 6 and 7, enter amount overpaid	9	.00
10	Enter amount from line 9 you want credited on 2011 estimated withholding tax	10	.00
11	Subtract line 10 from line 9. This is your refund	11	.00

Part 1A: Additional Information Required for Tiered Entities

If the pass-through entity is claiming credit in line 3 for tax withheld by one or more other pass-through entities, enter the name, federal employer identification number (FEIN) of the entity (or entities) and total amount withheld by each entity. Attach additional pages if necessary.

Name	FEIN	Total Amount Withheld
Name	FEIN	Total Amount Withheld

I declare, under penalties of law, that this return is true, correct, and complete to the best of my knowledge and belief.

Preparer's Signature <input type="checkbox"/>	Date
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File this form electronically at www.revenue.wi.gov/eserv/pw/index.html or through the Federal/State E-Filing Program.

If you have obtained a waiver from electronic filing, mail completed form with payment to:

Wisconsin Department of Revenue, PO Box 8991, Madison, WI 53708-8932



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.	B.	C.	D.	E.	F.	G.	H.
	Nonresident's Name and Address	FEIN or SSN	Tax Form	Affidavit Filed	Share of Wisconsin Taxable Income	Gross Withholding	Share of Tax Credits	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				
12 Total withholding this page								\$
13 Number of additional pages included _____. Total of line 12 amount from all additional pages								\$
14 Total withholding tax computed. Add lines 12 and 13 . Enter total on Part 1, line 1								\$

Underpayment of Estimated Withholding Tax by Pass-Through Entities

2010

Wisconsin Department of Revenue

File with Wisconsin Form PW-1

Name	Federal Employer ID Number
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Part I Computation of Underpayment and Interest Due on Underpayment

1 a Enter 2010 withholding tax computed (<i>see instructions</i>)				
b Enter 2010 tax withheld from lower-tier entities				
c Subtract line 1b from line 1a. This is 2010 withholding tax due for taxable year (<i>see instructions</i>)				
2 Enter 90% of line 1c				
3 Enter 2009 withholding tax due from PW-1, if applicable (<i>see instructions</i>)				
4 If preceding taxable year return covered 12 months, use the smaller of line 2 or line 3; otherwise, enter line 2				
5 Enter installment due dates (the 15th day of the 3rd, 6th, 9th, and 12th months of your taxable year)	(a)	(b)	(c)	(d)
6 Divide line 4 by 4 and enter the result in each column or, if you use the annualized income installment method for any period, first fill in Part III and enter the amounts from line 45				
7 Estimated withholding tax paid				
8 If line 7 is less than line 6, subtract line 7 from line 6. This is your underpayment				
9 If line 7 is more than line 6, subtract line 6 from line 7. This is your overpayment				
10 Carryback of overpayment or late payment				
11 Carryforward of overpayment				
12 Subtract the total of lines 10 and 11 from line 8. This is your net underpayment				
13 Number of days from the due date of the installment to the date carryback on line 10 was paid				
14 Number of days from the due date of the installment to the date balance due on return was paid or unextended due date of return, whichever is earlier				
15 Interest: 12% per year on amount on line 10 for the number of days on line 13				
16 Interest: 12% per year on amount on line 12 for the number of days on line 14				
17 Add all of the amounts on lines 15 and 16 and enter the total. If your return is filed after the unextended due date and shows withholding tax due, enter the total on Part II, line 22. Otherwise, enter the total on the line provided on PW-1, line 6				

Part II Computation of Other Interest and Penalty Due

Complete this part only if Form PW-1 is not filed by the unextended due date and shows withholding tax due.

	(a) Interest at 18% per year	(b) Interest at 12% per year	(c) Total
18 If PW-1 filed late without an extension, enter net withholding tax			
19 If PW-1 filed with extended due date and shows –	(90%)	(10%)	
a Net withholding tax of \$500 or more, enter portion of net tax indicated			
b Net withholding tax of less than \$500, enter net tax			
20 Enter payments made (apply first to 18% per year column)			
21 Subtract line 20 from line 18 or 19a or 19b. This is amount due the 15th day of the month that includes unextended due date (after end of taxable year)			
22 Interest on underpayment from Part I, line 17			
23 Add lines 21 and 22			
24 Interest on amounts on line 23 to _____ (date PW-1 filed)	(18% per year)	(12% per year) *	
25 If PW-1 is filed late without an extension or after the extended due date –			
a Enter penalty of 5% of net tax due on your return for each month or fraction thereof that your return is late, but not more than 25%			
b Enter \$30 or applicable late fee			
26 Add lines 24, 25a, and 25b. Enter the total on PW-1, line 7			

* **Note:** See the instructions for line 24.