

Schedule 2 Nonresident Partners Qualifying and Participating in Composite Return (Attach a separate schedule, if necessary.)									
(A)	(B)	(C1) Partner's Share of WI Net Income (Loss)	(D)	(E)	(F)	(G)	(H)	(I)	(J)
Name and Address of Nonresident Partner (if Married Filing Jointly, see instructions)	Social Security Number	(C2) Partner's Share of WI Gross Income (from Sch. 3K-1, line 24)	Guaranteed Payments	Total Wisconsin Income (Loss) [(C1) + (D)]	Federal Adjusted Gross Income From Form 1040	Filing Status (S, H, MFJ, MFS)	Tax From Worksheet or 7.65% of Column (E)	Tax Withheld From Form PW-1	Balance Due (Overpayment)
a.		C1							
		C2							
b.		C1							
		C2							
c.		C1							
		C2							
d.		C1							
		C2							
e.		C1							
		C2							
f.		C1							
		C2							
g.		C1							
		C2							
h.		C1							
		C2							
i.		C1							
		C2							
j.		C1							
		C2							
k.		C1							
		C2							
TOTALS (enter on appropriate line on Schedule 1)									