

Part I: General Information

Partnership or Limited Liability Company Information:

Name: _____

Federal Employer Identification Number (FEIN): _____ ▲

Partner Information:

Name: _____ ▲

Social Security Number/FEIN: _____ ▲

Address: _____

City: _____ State: _____ ZIP: _____

Resident Partner Nonresident Partner

Amended K-1

Partner's Entity Type: ▲

Individual..... Corporation

Trust..... Partnership.....

S Corporation..... Other

Partner's Ownership Percentage..... %

Partnership Iowa Receipts..... \$00

Partnership Total Receipts \$00

Partnership Business Activity Ratio from page 1, Part IV, line 13 of IA 1065..... %

Is the Partnership including additional attachments with this K-1? Yes No

Part II: Partner's Pro Rata Share Items

Completed Iowa Schedule K-1s (including additional attachments) for all partners must be included with the IA 1065 Partnership Return.

Income/Adjustments	(a) Federal K-1 Amount	(b) Nonresident Business Activity Ratio	(c) Nonresident Apportionable to Iowa (a) x (b)
1. Ordinary business income/(loss).....			
2. Net rental real estate income/(loss).....			
3. Other net rental income/(loss).....			
4. Total guaranteed payments.....			
5. Interest income.....			
6. Dividends line 6a, federal K-1.....			
7. Royalties.....			
8. Net short-term capital gain/(loss).....			
9. Net long-term capital gain/(loss) line 9a, federal K-1.....			
10. Net section 1231 gain/(loss).....			
11. Other income/(loss).....			
Total Income. Add lines 1 through 11.....			
12. Section 179 deduction.....			
13. Other deductions.....			
Total deductions. Add lines 12 and 13.....			
Balance. Subtract total deductions from total income.....			▲
14. Credits from the credit section of federal K-1.....			
15. a) Post-1986 depreciation adjustment.....			
b) Adjusted gain/(loss).....			
c) Depletion other than oil and gas.....			
d) Gross income from oil, gas, and geothermal properties.....			
e) Deductions allocable to oil, gas, and geothermal properties.....			
f) Other adjustments and tax preference items. Include schedule.....			

16. Modifications Schedule

a) All Source Modifications: _____

b) Business Activity Ratio: _____

c) Apportionable to Iowa (a) x (b): _____

Part III: Partner's Portion of IA Credits/Withholding

Type of Iowa Credit	Certificate Number	Current Year Amount
IA Income Tax Withheld		

To The Partner: You may have a filing requirement with the State of Iowa, even if you are not a resident. The partnership may file a composite return on behalf of its nonresident partners and should notify you if they have done so. To claim any withholding or tax credits, a return must be filed. Filing information for individuals, corporations, and other entities are provided on our website (tax.iowa.gov) or by calling 515-281-3114 or 800-367-3388.

