

ANNUAL PARTNERSHIP INFORMATION RETURN

Tax Year: _____

SECTION I: PARTNERSHIP IDENTIFICATION

PARTNERSHIP LEGAL NAME _____

EMPLOYER IDENTIFICATION NUMBER (EIN) / TAX ID _____

PRINCIPAL BUSINESS ADDRESS _____

CITY, STATE, ZIP CODE _____

DATE OF FORMATION _____

PRINCIPAL BUSINESS ACTIVITY _____

SECTION II: PARTNER INFORMATION & CAPITAL ACCOUNTS

NO.	PARTNER NAME & ADDRESS	TIN/SSN	PARTNER TYPE (GEN/LTD)	PROFIT/LOSS SHARE (%)	CAPITAL CONTRIBUTION
1					
2					
3					
4					
5					

SECTION III: FINANCIAL SUMMARY (FOR THE TAX YEAR)

GROSS RECEIPTS OR SALES _____

COST OF GOODS SOLD _____

GROSS PROFIT _____

TOTAL DEDUCTIONS / EXPENSES _____

NET ORDINARY INCOME (LOSS) _____

OTHER PORTFOLIO INCOME _____

SECTION IV: DECLARATION & SIGNATURES

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of General Partner / Authorized Representative

Title

Date

Signature of Preparer (if other than partner)

PTIN/ License No.

Date