

SCHEDULE FOR PARTNERSHIP INFORMATION RETURN

Tax Year:

PART 1: PARTNERSHIP IDENTIFICATION

PARTNERSHIP NAME

PARTNERSHIP ACCOUNT NUMBER

STREET ADDRESS

CITY / PROVINCE / STATE

POSTAL CODE / ZIP

PART 2: PARTNER INFORMATION & SHARES

Partner Name	Tax Identification Number	Partner Type (e.g., Corp, Indiv)	Ownership %	Share of Income (\$)

PART 3: FINANCIAL SUMMARY

GROSS INCOME

TOTAL EXPENSES

NET INCOME / (LOSS)

PART 4: DECLARATION & SIGNATURE

I declare that the information provided in this return is, to the best of my knowledge and belief, correct, complete, and fully discloses the income of the partnership.

NAME OF AUTHORIZED PARTNER

SIGNATURE

DATE (YYYY-MM-DD)
