

FORM PR-100 PARTNERSHIP RETURN	PARTNERSHIP INFORMATION RETURN For Calendar Year _____ or Fiscal Year Beginning _____ and Ending _____	Tax Year <div style="border: 1px solid black; width: 80px; height: 30px; margin: 0 auto;"></div>
--	---	---

PART I PARTNERSHIP IDENTIFYING INFORMATION		
A. Partnership Name		B. Employer Identification Number (EIN)
C. Number, Street, and Room or Suite Number		D. Date Business Started
E. City or Town	F. State / Province	G. Postal / ZIP Code
H. Principal Business Activity		I. Principal Product or Service

PART II INCOME AND DEDUCTIONS SUMMARY		
#	Category	Amount (\$)
1	Gross receipts or sales	
2	Cost of goods sold	
3	Gross profit (Subtract line 2 from line 1)	
4	Ordinary income/loss from other partnerships, estates, and trusts	
5	Other income/loss	
6	Total Income/Loss (Combine lines 3 through 5)	
7	Salaries and wages (other than to partners)	
8	Guaranteed payments to partners	
9	Rent expenses	
10	Interest expenses	
11	Other deductions	
12	Total Deductions (Add lines 7 through 11)	
13	Ordinary Business Income/Loss (Subtract line 12 from line 6)	

PART III PARTNERS' SHARE OF INCOME, CREDITS, AND DEDUCTIONS			
Partner Name & Address	Tax Identification Number	Partner Type (General/Limited)	Profit Share %

Partner Name & Address	Tax Identification Number	Partner Type (General/Limited)	Profit Share %

PART IV DECLARATION AND 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. Declaration of preparer (other than partner) is based on all information of which preparer has any knowledge.

Signature of General Partner or Managing Member **Date** **Title**

Signature of Paid Preparer **Date** **PTIN**

Firm Name (or yours if self-employed) and Address **Phone Number**