Schedule 3

Form IT-40 State Form 52703 R2 / 8-07

Schedule 3: Partnership and S Corporation Disclosure

2007

Attachment Sequence No. 13

Enter your first name, middle initial	and last name and spouse's full nan	ne if filing a joint return	A Your Soci Security Numb						
Part 1: Schedule K-1 Tota	ıls		1						
	r of federal Schedule K-1s you re the number of spouse's federal S	•	•	·					
Note: You also must complete	e Schedule 3A if you have more to	han six federal Sched	lule K-1s entered i	n Box 1.					
Attach completed schedule to	Form IT-40.								
Part 2: Partnership and S	Corporation Information								
Provide the following information if you are reporting partnership and/or S corporation income (loss) on federal Schedule E, Part II.*									
Column A – Enter from each	federal Schedule K-1 the employ	er identification numb	er (EIN).						
Column B – Enter the ordinary business income (loss) from each corresponding federal Schedule K-1, Part III, line 1.									
Column A – Enter partnership	le K-1 from Form 1065-B, enter too's employer I.D. number. of federal Schedule K-1 (from Fo	, and the second		from passive activities.					
COLUMN A	COLUMN B	COL	-UMN A	COLUMN B					
Employer ID Number	Line 1 Income (loss)		er ID Number	Line 1 Income (loss)					

	COLUMN A		COLUMN B	COLUMN A		COLUMN B				
	Employer ID Number n federal Sch. K-1, Part I)	(from	Line 1 Income (loss) refederal Sch. K-1, Part III)	Employer ID Number (from federal Sch. K-1, Part I)		Line 1 Income (loss) (from federal Sch. K-1, Part				
1A		1B		4A		4B				
2A		2B		5A		5B				
ЗА		3B		6A		6B				

Schedule 3A

Form IT-40 State Form 52704 R2 / 8-07

Schedule 3A: Continuation of Partnership and S Corporation Disclosure

2007

Attachment Sequence No. 14

inter your first name, middle initial and last name and spouse's full name if filing a joint return	Α	Your Social □			
3 .,.	1 ' '				
		Security Number L			

Complete Schedule 3A if you have information from additional K-1s to report after completing Schedule 3. Use additional pages if necessary. Attach to Form IT-40.

COLUMN A	COLUMN B	COLUMN A	COLUMN B		
Employer ID Number (from federal Sch. K-1, Part I)	Line 1 Income (loss) (from federal Sch. K-1, Part III)	Employer ID Number (from federal Sch. K-1, Part I)	Line 1 Income (loss) (from federal Sch. K-1, Part III		
7A	7B	45A	45B		
8A	8B	46A	46B		
9A	9B	47A	47B		
10A	10B	48A	48B		
11A	11B	49A	49B		
12A	12B	50A	50B		
13A	13B	51A	51B		
14A	14B	52A	52B		
15A	15B	53A	53B		
16A	16B	54A	54B		
17A	17B	55A	55B		
18A	18B	56A	56B		
19A	19B	57A	57B		
20A	20B	58A	58B		
21A	21B	59A	59B		
22A	22B	60A	60B		
23A	23B	61A	61B		
24A	24B	62A	62B		
25A	25B	63A	63B		
26A	26B	64A	64B		
27A	27B	65A	65B		
28A	28B	66A	66B		
29A	29B	67A	67B		
30A	30B	68A	68B		
31A	31B	69A	69B		
32A	32B	70A	70B		
33A	33B	71A	71B		
34A	34B	72A	72B		
35A	35B	73A	73B		
36A	36B	74A	74B		
37A	37B	75A	75B		
38A	38B	76A	76B		
39A	39B	77A	77B		
40A	40B	78A	78B		
41A	41B	79A	79B		
42A	42B	80A	80B		
43A	43B	81A	81B		
44A	44B	82A	82B		