Schedule K-1

## Other Information

| 1 |  | Control number | 3 <br> Signs return <br>  <br>  <br> 2 |
| :--- | :--- | :--- | :--- |
| Rounding Partner |  | 4 | PTR REP |

## Schedule B-1

Country of incorporation/organization Max percentage owned

Select Applicable Box
Final K-1
Amended K-1

## Partner's Name and Address Information



## Type of Partner

G
 General or LLC member-manager Domestic partner
12 TIN of disregarded entity


| J. Partner's \% | Beginning of Year | OWN Override |  | Check if decrease is due to sale or exchange of partnership interest |
| :---: | :---: | :---: | :---: | :---: |
| Profit | 38 | 41 | 58 |  |
| Loss | 39 | 42 | Part II, Item K |  |
|  |  |  |  |  |  |
| Capital | 40 | 43 | ${ }^{57}$ | Check this box if Item K includes liability amounts from lower tier partnerships |

## Partner's Capital Account Analysis

L Beginning capital account

## Capital contributed during the year:

Gain recognized on contributed property
Cash contributed
Adjusted basis of property contributed
Other increase (decrease) (including redistribution of capital)
Current year net income (loss)
Withdrawals/Distributions


|  | 45 |
| :--- | :--- |
|  | 46 |
|  | 47 |
|  | 48 |
|  | 49 |
|  | 50 |

M Did the partner contribute property with built-in gain or loss?
Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

| N | Beginning | 53 | Ending | 54 |
| :---: | :---: | :---: | :---: | :---: |
| Part III: K-1 Direct Entries |  |  |  |  |
| 4 | Guaranteed Payments subject to self-employment tax |  |  |  |
| 13M | Health insurance distribution reduction |  |  |  |

Health insurance distribution reduction

