



# Florida Partnership Information Return

**F-1065**  
**R. 01/14**

Rule 12C-1.051  
Florida Administrative Code  
Effective 01/14



For the taxable year  
beginning \_\_\_\_\_, \_\_\_\_\_ and ending \_\_\_\_\_, \_\_\_\_\_.

Name of Partnership _____	<input type="text"/> <input type="text"/> <input type="text"/>	-	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Federal Employer Identification Number (FEIN)				
Street Address _____				
City _____	State _____	ZIP _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Principal Business Activity Code				

## Part I. Florida Adjustment to Partnership Income

A. Additions to federal income:			
1. Federal tax exempt interest			
Total interest excluded from federal ordinary income			
Less associated expenses not deductible in computing federal ordinary income	(                    )		
	<b>Net Interest</b>		
2. State income taxes deducted in computing federal ordinary income			
3. Other additions			
		<b>Total</b>	A.
B. Subtractions from federal income			B.
C. Sub-total (Line A less Line B)			C.
D. Net adjustment from other partnerships or joint ventures			D.
E. Partnership income adjustment			
1. Increase (total of Lines C and D)			E. 1.
2. Decrease (total of Lines C and D)			2.(                    )

## Part II. Distribution of Partnership Income Adjustment

Partner's name and address (Include FEIN)	(a) Amount shown on Line E, Part I, above	(b) Partner's percentage of profits	(c) Column (a) times Column (b) = partner's share of Line E. Enter here and on Florida Form F-1120, Schedule I, Line 20 (if decrease, Schedule II, Line 11)
A.			
B.			
C.			

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 taxpayer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of partner or member (Must be an original signature.) _____	Date _____	
<b>Paid Preparer Only</b>	Preparer's Signature _____	Date _____	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed) and address _____		Preparer's Tax Identification Number (PTIN) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
			FEIN <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
		ZIP _____	

**Mail To: Florida Department of Revenue, 5050 W. Tennessee St., Tallahassee FL 32399-0135**



**NOTE: Please read instructions (Florida Form F-1065N) before completing the schedules below.**

<b>Part III. Apportionment Information</b>				
<b>III-A. For use by partnerships doing business both within and without Florida</b>	(a) Within Florida		(b) Total Everywhere	
1. Average value of property per Schedule III-C (Line 8)				
2. Salaries, wages, commissions, and other compensation paid or accrued in connection with trade or business for the period covered by this return				
3. Sales				
<b>III-B. For use by partnerships providing transportation services within and without Florida</b>	(a) Within Florida		(b) Total Everywhere	
1. Transportation services revenue miles (see instructions)				
<b>III-C. For use in computing average value of property</b>	Within Florida		Total Everywhere	
	a. Beginning of Year	b. End of Year	c. Beginning of Year	d. End of Year
1. Inventories of raw material, work in process, finished goods				
2. Buildings and other depreciable assets (at original cost)				
3. Land owned (at original cost)				
4. Other tangible assets (at original cost) and intangible assets (financial organizations only). Attach schedule				
5. Total (Lines 1 through 4).				
6. Average value of property in Florida ( <b>Within Florida</b> ), add Line 5, Columns (a) and (b) and divide by 2. For average value of property everywhere ( <b>Total Everywhere</b> ), add Line 5, Columns (c) and (d) and divide by 2.				
7. Rented property - (8 times net annual rent)				
8. Total (Lines 6 and 7). Enter on Part III-A, Line 1, Columns (a) and (b)	Average Florida		Average Everywhere	

<b>Part IV. Apportionment of Partners' Share</b>							
Partner (Name and Address)	Percent of Interest In Partnership	Property Data		Payroll Data		Sales Data	
		Within Florida	Everywhere	Within Florida	Everywhere	Within Florida	Everywhere
A.							
B.							
C.							

**NOTE: Transfer data to Schedule III - A, Florida Form F-1120.**