

DELAWARE PARTNERSHIP RETURN
TAX YEAR
2009

DO NOT WRITE OR STAPLE IN THIS AREA

FISCAL YEAR ____/____/____ To ____/____/____

REV CODE 006

NAME			EMPLOYER IDENTIFICATION NUMBER			
ADDRESS			NATURE OF BUSINESS (SEE INSTRUCTIONS)			
CITY	STATE	ZIP CODE				

A. CHECK APPLICABLE BOX: AMENDED RETURN PARTNERSHIP DISSOLVED OR INACTIVE CHANGE OF ADDRESS

IF THE PARTNERSHIP ADDRESS HAS CHANGED, WHICH ADDRESS IS AFFECTED? LOCATION MAILING BILLING

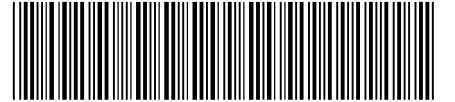
B. DID THE PARTNERSHIP HAVE INCOME DERIVED FROM OR CONNECTED WITH SOURCES IN DELAWARE? YES NO

DID THE PARTNERSHIP HAVE DELAWARE RESIDENT PARTNERS? YES NO HOW MANY? _____

IF THE ANSWER TO EITHER QUESTION ON LINE B IS "YES", A PARTNERSHIP RETURN IS REQUIRED TO BE FILED.

C. TOTAL NUMBER OF PARTNERS: _____

D. YEAR PARTNERSHIP FORMED: _____



ATTACH COMPLETED COPY OF U.S. PARTNERSHIP RETURN OF INCOME FORM 1065 AND ALL SCHEDULES.

SCHEDULE 1 - PARTNERSHIP SHARE OF INCOME AND DEDUCTIONS WITHIN AND WITHOUT DELAWARE

INCOME:

1. Ordinary income (loss) from Federal Form 1065, Schedule K, Line 1.....	1		00	1
2. Apportionment percentage from Delaware Form 300, Schedule 2, Line 16.....	2		%	2
3. Ordinary income apportioned to Delaware. Multiply Line 1 times Line 2.....	3		00	3
		Column A Total	Column B Within Delaware	
4. Enter in Column A the amount from Line 1.....	4		00	4
Enter in Column B the amount from Line 3.....			00	
5. Net income (loss) from rental real estate activities, Federal Form 1065, Schedule K, Line 2.....	5		00	5
6. Net income (loss) from other rental activities, Federal Form 1065, Schedule K, Line 3c.....	6		00	6
7. Guaranteed payments from Federal Form 1065, Schedule K, Line 4.....	7		00	7
8. Interest income from Federal Form 1065, Schedule K, Line 5.....	8		00	8
9. Dividend income from Federal Form 1065, Schedule K, Line 6(a).....	9		00	9
10. Royalty income from Federal Form 1065, Schedule K, Line 7.....	10		00	10
11. Net short term capital gain (loss) from Federal Form 1065, Schedule K, Line 8.....	11		00	11
12a. Net long term capital gain (loss) from Federal Form 1065, Schedule K, Line 9(a).....	12a		00	12a
b. Collectible gain (loss) - Fed Form 1065, Sch. K, Line 9b			00	12b
c. Unrecaptured Section 1250 gain - Fed Form 1065, Sch. K, Line 9c			00	12c
13. Net gain (loss) under Section 1231 from Federal Form 1065, Schedule K, Line 10.....	13		00	13
14. Other income (loss) (Attach schedule) from Federal Form 1065, Schedule K, Line 11.....	14		00	14
15. Total Income (Combine Lines 4 through 12a, Line 13, and Line 14).....	15		00	15

DEDUCTIONS:

16. Charitable contributions from Federal Form 1065, Schedule K, Line 13(a).....	16		00	16
17. Section 179 expense deduction from Federal Form 1065, Schedule K, Line 12.....	17		00	17
18. Expenses related to portfolio income (loss) from Federal Form 1065, Schedule K, Line 13(b) and 13(c).....	18		00	18
19. Other deductions from Federal Form 1065, Schedule K, Line 13(d).....	19		00	19

