

For taxable year beginning _____, and ending _____

Mail to: Arizona Department of Revenue, PO Box 29079, Phoenix AZ 85038-9079

CHECK ONE: Calendar year <input type="checkbox"/> Fiscal year <input type="checkbox"/>	
CHECK ONE: Original <input type="checkbox"/> Amended <input type="checkbox"/>	
Employer identification number (EIN)	
AZ transaction privilege tax number	

Business telephone number	Please Type or Print	Name
		Number and street or PO Box
		City, or town, state, and ZIP code
Business activity code number (from federal Form 1065)		

68 Check box if: This is a first return Name change Address change

- A DBA _____
- B Will a composite return be filed on Form 140NR? Yes No
- C Total number of nonresident individual partners _____
- D Total number of resident individual partners _____
- E Total number of entity partners (see instruction page 2) _____
- F Date business commenced _____

82	CHECK BOX IF: Federal extension used to file return. 82 F <input type="checkbox"/>
FOR DOR USE ONLY	
81	66

- G Is this the partnership's final return?
- H Did you file 2003 and 2004 Arizona partnership returns? If no, state reason _____
- I Have you filed amended federal partnership returns for prior years?
If yes, list years _____
- J Have you attached a copy of your federal Form 1065 and supporting schedules to this return, including Schedule(s) K-1?
- K Has the Internal Revenue Service made any adjustments in any federal income tax return filed by the partnership not previously reported to the department? If yes, indicate year(s) _____, and submit under separate cover a copy of the IRS report as finally determined
- L The partnership books are in care of: _____ located at: _____

	YES	NO

Adjustment of Partnership Income From Federal to Arizona Basis	1	Federal ordinary business and rental income - from Form 1065, Schedule K. See instructions.....	1		00
	2	Additions to partnership income - from page 2, Schedule A, line A6.....	2		00
	3	Subtotal - add lines 1 and 2.....	3		00
	4	Subtractions from partnership income - from page 2, Schedule B, line B9.....	4		00
	5	Partnership income adjusted to Arizona basis - line 3 minus line 4.....	5		00
	6	Net adjustment of partnership income from federal to Arizona basis - line 5 minus line 1	6		00
Penalty	7	Penalty for late filing or incomplete filing (\$500.00).....	7		00

Certification I, the undersigned partner of the partnership for which this return is made, certify under penalty of perjury, that this return, including the accompanying schedules and statements, has been examined by me and is to the best of my knowledge and belief, a correct and complete return, made in good faith, for the taxable year stated pursuant to the income tax laws of the State of Arizona.

Please Sign Here Partner's signature _____ Date _____ Partner's social security number or EIN _____

Paid Preparer's Use Only Preparer's signature _____ Date _____

Firm's name (or preparer's, if self-employed) _____ Preparer's TIN _____
Firm's address _____ Zip code _____

Attach all schedules to this return including federal Form 1065 and federal Schedule(s) K-1

Schedule A - Additions to Partnership Income

Table with 3 columns: Description, Code (A1-A6), and Amount (00). Rows include Total federal depreciation, Non-Arizona municipal bond interest, Capital investment by qualified defense contractor, Additions related to Arizona tax credits, Other additions to partnership income, and Total additions to partnership income.

Schedule B - Subtractions From Partnership Income

Table with 3 columns: Description, Code (B1-B9), and Amount (00). Rows include Recalculated Arizona depreciation, Basis adjustment for property sold, Interest from U.S. government obligations, Difference in adjusted basis of property, Agricultural crops charitable contribution, Capital investment by qualified defense contractor, Sale of new energy efficient residence(s), Other subtractions from partnership income, and Total subtractions from partnership income.

Schedule C - Apportionment Formula (Multistate Partnerships Only) See instruction pages 5 and 6

C1 Property Factor

NOTE: Qualifying air carriers must use Schedule ACA

Value of real and tangible personal property (by averaging the value of owned property used at the beginning and end of the tax period; rented property at capitalized value)

- a. Owned property (at original cost): Inventories, Depreciable assets, Land, Other assets - (describe)
b. Rented property (capitalize at 8 times net rental paid)
c. Total owned and rented property (section a total plus section b)

Table with 3 columns: Column A (Total Within Arizona), Column B (Total Within and Without Arizona), and Column C (Ratio Within Arizona A ÷ B). Rows correspond to sections C1, C2, C3, C4, and C5.

C2 Payroll Factor

Total wages, salaries, commissions and other compensation to employees (per federal Form 1065 or payroll reports)

C3 Sales Factor

- a. Sales delivered or shipped to Arizona purchasers
b. Other gross receipts
c. Total sales and other gross receipts
d. Double weight Arizona sales and gross receipts
e. Sales factor (for column A - multiply item c by item d; for column B - enter amount from item c)

C4 Total ratio - add C1(c), C2 and C3(e) in column C

C5 Average apportionment ratio - divide C4 by four (4). Enter the result in column C and on the Arizona Schedule K-1(NR) in column (b)

Schedule D - Business Information

Describe briefly the nature and location(s) of the partnership's Arizona business activities:

Describe briefly the nature and location(s) of the partnership's business activities outside of Arizona:

Schedule E - Partner Information Prepare a schedule that lists each partner's name, address, TIN, and pro rata share of the amount shown on line 5. Label the listing as "Schedule E - Partner Information" and attach the schedule immediately after page 2 of the Form 165.