For the \Box calendar year 2016 or \Box fiscal year beginning (M, M, D, D, 2, 0, 1, 6) and ending (M, M, D, D, 2, 0, Y, Y).

Business Telephone Number (with area code)	Name		
	Address – number and street or PO Box		Employer Identification Number (EIN)
Business Activity Code			
(from federal Form 1065)	City, Town or Post Office	State	ZIP Code
This form is ONLY for partnerships to amend a previously filed Arizona Form 165PA.			ONLY. DO NOT MARK IN THIS AREA.
Part 1 Required In	formation		
A On the original Form	n 165PA:		
A1 🗌 The tax was	paid by the partnership.	81 PM	66 RCVD
A2 🔲 The Arizona	partnership adjustment was passed through to the partners		
B Enter the date the o	riginal Form 165PA was previously filed: (M,M,D,D,Y,Y,Y,Y)		

Part 2 Amendment to Previously Filed Arizona Partnership Adjustment

1	Amended federal adjustment to items of income or the gain, loss or deduction on which the federal imputed		
	underpayment was based. (DO NOT include changes to federal credits.)	1	00
2	Amended positive change in net Arizona additions and subtractions due to federal adjustments on line 1 (see inst.)	2	00
3	Add line 1 and line 2. Enter the total	3	00
4	Amended negative change in net Arizona additions and subtractions due to federal adjustments on line 1 (see inst.)	4	00
5	Subtract line 4 from line 3. Enter the difference. This is your amended net Arizona adjustment to items of income, or		
	the gain, loss or deduction of your partnership (Amended Arizona partnership adjustment)	5	00

Part 3 Amendment to Tax Liability Paid by the Partnership

Com	plete Part 3 if box A1 is checked. (The previous tax due was paid by the partnership.)		
6	 Amended Arizona partnership adjustment. If the amount from Part 2, line 5 is zero, or greater than zero, enter the amount from Part 2, line 5. Continue to line 7. If the amount from Part 2, line 5 is less than zero, enter zero ("0"). Skip to line 12 and enter zero ("0"). Report the amount on Part 2, line 5 to the partners. 	6	00
7	Enter the nonapportionable or allocable amounts included in line 6 here.	7	00
8	Subtract line 7 from line 6. Enter the difference. This is the amount subject to apportionment	8	00
9	Enter the Arizona apportionment ratio (see instructions)		
10	Multiply the amount on line 8 by the ratio on line 9. Enter the result	10	00
11	Enter the portion of line 7 allocated to Arizona here	11	00
12			00
13	13 Multiply the amount on line 12 by the tax rate, 4.54%. Enter the result.		00
14	Enter the amount of tax previously paid by the partnership.	14	00
15	15 OVERPAYMENT by the partnership: If line 14 is greater than line 13, subtract line 13 from line 14. Enter the difference. Also, enter this amount on Part 5, line 27.		00
16	TAX OWED by the partnership: If line 13 is greater than line 14, subtract line 14 from line 13. Enter the difference. Also, enter this amount on Part 5, line 28	16	00

Continued on page 2 \rightarrow

Name (as shown on page 1)	EIN	
rame (de chemi en page 1)		

Amendment to the Arizona Partnership Adjustment Previously Passed Through to the Partners on Part 4 Form 165PA, Schedule K-1, or Form 165PA, Schedule K-1(NR)

Com	plete Part 4 if box A2 is checked. (The previous Arizona partnership adjustment was passed through to the partners.)		
17	Enter the amended Arizona partnership adjustment amount from Part 2, line 5	17	00
18	Enter the net Arizona partnership adjustment from Part 2, line 5 of the originally filed Form 165PA or from Part 2, line 5 of the previously filed Form 165PA-X	18	00
19		19	00
20	Enter the nonapportionable or allocable amounts included in line 19	20	00
21	Subtract line 20 from line 19. Enter the difference. This is the amount subject to apportionment	21	00
22	Enter the Arizona apportionment ratio (see instructions)		
23	Multiply the amount on line 21 by the ratio on line 22. Enter the result.	23	00
24	Enter the portion of line 20 allocated to Arizona.	24	00
25	Add line 23 and line 24. Enter the total. If less than zero, enter zero ("0")	25	00
26	TAX OWED by the partnership: Multiply the amount on line 25 by the tax rate, 4.54%. Enter the result. Also, enter this amount on Part 5, line 28	26	00

Part 5 Summary of Amended Tax Liability

27	REFUND to the partnership: Enter the amount from Part 3, line 15.	27	C	00
28	TAX DUE. Enter the amount from Part 3, line 16 or Part 4, line 26.	28		00
29	Calculate the interest owed. See instructions	29	0	00
30	TOTAL DUE from the partnership: Add line 28 and line 29. Enter the total.			
	Make check payable to Arizona Department of Revenue	30		00

Part 6 Explanation of Changes to the Previously Filed Form 165PA or Form 165PA-X

Part 7 Certification							
Declaration	I, the undersigned partner of the partnership for which this return is made, declare under penalty of perjury, that this return, i the accompanying schedules and statements, has been examined by me and is to the best of my knowledge and belief, a cor 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		TITLE			
Paid	PAID PREPARER'S SIGNATURE		DATE		PAID PREPARER'S PTIN		
Preparer's					FIRM'S PTIN		
Use	FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLOYED)			FIRM S FTIN		
Only	FIRM'S STREET ADDRESS				FIRM'S TELEPHONE NUMBER		
	CITY		STATE		ZIP CODE		

Include the partnership's notice of federal imputed underpayment assessment with this return. Mail to: Arizona Department of Revenue, PO Box 52153, Phoenix, AZ 85072-2153