Arizo	na	Form
1	6	5

Arizona Partnership Income Tax Return

2022

		Form 165 is due on or before the 15 th day of the 3 rd month following					
	For the 🗌 calend	lar year 2022 or 🔲 fiscal year beginning 🕅 MLD, DL2,	0,2,	2 and ending	g (M, M)	$D_1D_12_0$	Υ.Υ.
	ness Telephone Number	Name			CHECK	ONE:	
(with	area code)				🗌 Origi	nal 🛛 A	Amended
		Address – number and street or PO Box			Employer	Identification N	lumber (EIN)
	ness Activity Code						
(from	federal Form 1065)	City, Town or Post Office		State	ZIP Code		
68	Check box if: A	This is a first return B Name change C Address change		Check box if re	eturn file	d under exte	nsion:
A		make the Pass-Through Entity (PTE) election to pay tax on its		82 82E			
	• •	ne at the entity level? (See instructions)	No	REVENUE USE C	ONLY. DO	NOT MARK IN	THIS AREA.
в				88			
С		nenced	Y				
D		n Arizona-only partnership?	No				
Е		p's final return under this EIN?					
F		ment for multistate partnerships only (check one box):					
				81 PM		66 RCVD)
G	Check if Multistat	e Service Provider Election and Computation (Arizona Schedule MSI	P)				
		the year of the election cycle: \Box Yr 1 \Box Yr 2 \Box Yr 3 \Box Yr 4 \Box Y	,				
н		d 2021 Arizona partnership returns? ☐Yes ☐No If "No", state rea					
1	•	nded federal partnership returns for prior years?					
	•	MM/DD/YYYY format:					
J		venue Service (IRS) made any adjustments in any federal income tax		filed by the part	nership n	ot previously	reported to
		Yes No If "Yes", indicate year(s) in MM/DD/YYYY format:		• •		•	·,
	Submit a copy of the						
)16 through 2022, if you received a federal imputed underpayment as	ssessm	ent, or you filed	an Admin	istrative Adjus	stment
		d in a federal imputed underpayment assessment, you must file Arizo		-		-	
κ	The partnership boo	ks are in care of:					
	Located at:						
	Nur	nber and street or PO Box City			State	e Zl	P Code
L	Will a composite ret	urn be filed on Form 140NR? (See Instructions)			🗖 Ye	es 🔲 No	
М	Marijuana Establish	ments only: 1 Adult Use only 2 Dual Lic. elected for-profit 3	Dual	Lic. did not elect	for-profit		only
Ν	ADHS Registry Iden	tification Number:					
Parl	1 - Adjustment	of Partnership Income From Federal to Arizona Bas	eie				
	. i - Aujustinent		515				
1	Federal ordinary but	siness and rental income (loss) from Form 1065, Schedule K. See ins	st <u>ruction</u>	s	1		00
	SCHEDULE A: Ad	ditions to Partnership Income					
	A1 Total federal dep	preciation	A1		00		
	A2 Non-Arizona mu	nicipal bond interest	A2		00		
	A3 Additions relate	d to Arizona tax credits. See instructions	A3		00		
	A4 Other additions	to partnership income. See instructions	A4		00	1	
2	Total additions to pa	rtnership income: Add lines A1 through A4. Enter the total			1	2	00
3	Subtotal: Add lines 1	and 2. Enter the total.	··· ······		3	8	00
	SCHEDULE B: Su	btractions From Partnership Income					
	B1 Recalculated Ar	zona depreciation. See instructions	B1		00		
	B2 Basis adjustmer	t for property sold or otherwise disposed of during the taxable year.					
	See instructions		B2		00		
	B3 Interest from U.	S. government obligations	B 3		00		
	B4 Agricultural crop	s charitable contribution. See instructions	B 4		00		
	B5 Other subtraction	ns from partnership income. See instructions	B5		00	1	
4	Total subtractions fro	om partnership income: Add lines B1 through B5. Enter the total			4	L	00
5	Partnership income	adjusted to Arizona basis: Subtract line 4 from line 3. Enter the difference.			5	5	00
6	Net adjustment of pa	artnership income from federal to Arizona basis: Subtract line 1 from line	e 5. Ente	er the difference	E	6	00
Per	nalty						
		or incomplete filing. Cas instruction-				,	00
1	renaity for late filling	or incomplete filing. See instructions			[7		

Nam	e (as shown on page 1) EIN				
	t 2 - Calculation of Partnership Tax to be Paid at the Entity Level				
Con	nplete only if the Partnership answered "Yes" to Question A on page 1.				
Cal	culation of the income attributable to partners:				
8	Enter the amount from line 5.	[8		00
9	Add lines E1 and E4 in column (c) of Schedule E. Enter the total. This is the total of the ownership shares for all		-		100
	resident individual partners and all resident estate and trust partners that did not opt out of the partnership's				
	election to pay tax at the entity level. (See Instructions)				
10	Multiply line 8 by line 9. Enter the result. This is the partnership income attributable to				
	resident individual partners and resident trust and estate partners that did not opt out of the partnership	s _			
	election to pay tax at the entity level.	10	3		00
11	Add lines E2 and E5 in column (c) of Schedule E Enter the total. This is the total of the ownership shares for all				
	nonresident individual partners and all nonresident estate and trust partners that did not opt out of the			 	
	partnership's election to pay tax at the entity level. (See Instructions)				
12	Multiply line 8 by line 11. Enter the result. This is the partnership income attributable to				
	nonresident individual partners and nonresident trust and estate partners that did not opt out of the	_			
	partnership's election to pay tax at the entity level.	12	2		00
13	Enter the amount from line E3, column (c) of Schedule E. This is the total of the ownership shares for all				
	part-year resident partners that did not opt out of the partnership's election to pay tax at the	— ———————————————————————————————————			
	entity level. (See Instructions)				
14	Multiply line 8 by line 13. Enter the result. This is the partnership income attributable				
	to part-year resident partners that did not opt out of the partnership's election to pay tax at the				
	entity level	00			
	14A Enter the portion of line 14 that all part-year residents earned while residents of Arizona.				00
	14B Enter the portion of line 14 that all part-year residents earned while nonresidents of Arizona	14	'B		00
4 5	NOTE: The total of lines 14A and 14B must equal the amount reported on line 14.				
15	Enter the amount from line E7, column (c) of Schedule E. This is the total of the ownership shares for all				
	partners that opted out of the partnership's election to be taxed at the entity level and entity partners that are not eligible to make the election. (See Instructions)				
16	5				
10	Multiply line 8 by line 15. Enter the result. This is the partnership income attributable to partners that opted out of the partnership's election to pay tax at the entity level and to entities that are				
	not eligible to make that election.	1	6		 00
		🗖	0		 100
Cald	culation of the tax attributable to partners that did not opt out of the PTE election:				
	Add line 10 and line 14A. Enter the total.	1	7		00
	Multiply the amount on line 17 by the PTE tax rate, 2.98% (0.0298) Enter the result. This is the amount of the				100
	tax attributable to resident partners and part-year resident partners (during the period of residency) that				
	did not opt out of the partnership election to pay tax at the entity level	1	8		00
19	Add line 12 and line 14B. Enter the total.		9		00
20	Enter the Arizona apportionment ratio from Schedule C or Schedule ACA 20				
21	Multiply the amount on line 19 by 20. Enter the result.	2	1		00
22	Multiply the amount on line 21 by the PTE tax rate, 2.98% (0.0298). Enter the result. This is the amount of the	tax			
	attributable to nonresident partners and part-year resident partners (during the period of nonresidency)	_			
	that did not opt out of the partnership election to pay tax at the entity level	2	22		00
Calo	culation of the Partnership's PTE Tax, Interest and Penalties:	_			
23	Add line 18 and line 22. Enter the total. This is the total amount of tax owed by the Partnership	2	23		00
24	Extension payment made with Form 120/165EXT	2	24		00
25	Estimated Tax Payments	2	25		00
26	Total tax payments. Add line 24 and line 25. Enter the total. For amended returns, see the instructions.	2	26		00
27	Balance of tax due. If line 23 is greater than line 26, subtract line 26 from line 23.Enter the difference. Skip line 28	2	27		00
28	Overpayment of PTE Tax: If line 26 is greater than line 23, subtract line 23 from line 26. Enter the difference		28		00
29	Penalty and interest		.9		00
30	Estimated tax underpayment penalty. If Form 220/PTE is included, check box 30A		80		00
31	Total Tax and Penalties Due: See instructions	3	81		00
32	OVERPAYMENT of Tax See instructions		32		00

Name (as shown on page 1)	EIN	

SCHEDULE C Apportionment Formula (Multistate Partnerships Only)

IMPORTANT: Qualifying air carriers must use Arizona Schedule ACA. Qualifying Multistate Service Providers must include Arizona Schedule MSP. If the <i>"SALES FACTOR ONLY"</i> box on page 1, line F, is checked, <i>complete only Section C3, Sales Factor, lines a through f.</i> See instructions.	COLUMN A Total Within Arizona Round to nearest dollar	COLUMN B Total Everywhere Round to nearest dollar.	COLUMN C Ratio Within Arizona A ÷ B
C1 Property Factor - STANDARD APPORTIONMENT ONLY Value of real and tangible personal property (by averaging the value of owned property at the beginning and end of the tax period; rented property at capitalized value).			
 a Owned Property (at original cost): 1 Inventories			
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 Sales from services or from designated intangibles for qualifying multistate service providers only (see instructions; include Schedule MSP). c Other gross receipts d Total sales and other gross receipts (the sum of lines a through c) e Weight AZ sales: (STANDARD x 2; SALES FACTOR ONLY x 1) f Sales Factor Only (for Column A, multiply line d by line e; for Column B, enter the amount from line d; for Column C, divide Column A by Column B.) Skip line C4 and line C5. STANDARD Apportionment, continue to C4. SALES FACTOR ONLY Apportionment, enter the amount from 			
Column C on Arizona Form 165, Schedule K-1(NR), Part 1, column (b).			
 C4 STANDARD Apportionment Total Ratio: Add Column C of lines C1c C5 Average Apportionment Ratio for STANDARD Apportionment: Div result on Arizona Form 165, Schedule K-1(NR), Part 1, column (b). (If and Column B, see instructions.) 	ide line C4, Column C, by one of the factors is "0" in	four (4). Enter the both Column A	

Name (as shown on page 1)	EIN

SCHEDULE D Partner Information

Complete Schedule D for all partners in the partnership. If the partnership has more than 10 partners, include additional schedules as necessary.

(a) Partner Name	(b) Street Address (c)	(d) Partner Tax Identification Number	(e) Resident (R) Nonresident (N) Part-Yr Res (P)	(f) Partner's Ownership Percentage	(g) Distributive Share of Income Page 1, Line 5
Partner Name	City, State ZIP	Number	Estate & Trust (E) Other Entity (O)	Percentage	Page 1, Line 5
D1					
D2					
D3					
D4					
D5					
D6					
D7					
D8					
D9					
D10					
	Include additional	sheets as necessary			

Include additional sheets as neces

	(a)	(b)	(c)
	Partner Consent to PTE Election	Partner Count	Partners' Ownership Share
E1	Individual resident partners who did not opt out of the election		
E2	Individual nonresident partners who did not opt out of the election.		
E3	Individual part-year resident partners who did not opt out of the election.		
E4	Resident estate and trust partners who did not opt out of the election.		
E5	Nonresident estate & trust partners who did not opt out of the election		
E6	Add lines E1 through E5. Enter the total. These are the totals for the partners who did not opt		
	out of the PTE election.		
E7	Partners that opted out of the election or are excluded from making the election		
E8	Total partner count and total partnership ownership share. Add lines E6 and E7 in columns (b) and (c). Enter the totals. (Column (c) should equal 1.000000.)		

Name (as shown on page 1)	FIN	
Name (as shown on page 1)		

SCHEDULE F Schedule of Tax Payments Applied to Partnership PTE Tax Liability

	(a) Payment Date	(b) Estimated Tax Payment	(c) Extension Payment	
F1	MM DD YY	00	00)
F2	MM DD YY	00	00)
F3	MM DD YY	00	00)
F4	MM DD YY	00	00)
F5	MM DD YY	00	00)
F6	MM DD YY	00	00)
F7	Total Tax Payments	00	00)

SCHEDULE G Business Information

G1. Describe briefly the nature and location(s) of the partnership's Arizona business activities:

G2. Describe briefly the nature and location(s) of the partnership's business activities outside of Arizona:

Declaration	I, the undersigned partner of the partnership for which this i the accompanying schedules and statements, has been exa complete return, made in good faith, for the taxable year sta	mined by me a	and is to the best of	my knowledge and belief, a correct and
Please	PARTNER'S SIGNATURE	DATE	TITLE	
Sign				
Here	PARTNER'S PRINTED NAME	_		
Paid Preparer's	PAID PREPARER'S SIGNATURE PAID PREPARER'S PRINTED NAME		DATE	PAID PREPARER'S TIN
Use				
Only	FIRM'S NAME (OR PAID PREPARER'S NAME, IF SELF-EMPLO	DYED)		FIRM'S EIN
	FIRM'S STREET ADDRESS			FIRM'S TELEPHONE NUMBER
	CITY		STATE	ZIP CODE

This form must be e-filed unless the partnership has a waiver or is exempt from e-filing. See instructions for details.

Name (as shown on page 1)	EIN	
		Page

Adjustment of Partnership Income From Federal to Arizona Basis Continued

SCHEDULE A: Additions to Partnership Income A3 Additions related to Arizona tax credits:		
A Agricultural Water Conservation System Credit	Α	00
B Credit for Taxes Paid for Coal Consumed in Generating Electrical Power	в	00
C Credit for Employment of TANF Recipients	С	00
D Agricultural Pollution Control Equipment Credit:		
1 Excess Federal Depreciation or Amortization	D1	00
2 Excess in Federal Adjusted Basis	D2	00
E Total Additions Related to Arizona Tax Credits:		
Enter this amount on page 1, Schedule A, line A3	E	00
A4 Other additions to partnership income:		
A Positive Partnership Income Adjustment	Α	00
B Federal Depreciation of Child Care Facilities	В	00
C Expenditures for the Americans with Disabilities Act	C	00
D Total Other Additions to Partnership Income		
Enter this amount on page 1, Schedule A, line A4	D	00

SCHEDULE B: Subtractions From Partnership Income B5 Other subtractions from partnership income:		
A Negative Partnership Income Adjustment	А	00
B Mine Exploration Expenses	В	00
C Interest on Federally Taxable Arizona Obligations Evidence by Bonds	С	00
D Wood Stoves, Wood Fireplaces or Gas-Fired Fireplaces	D	00
E Expenses Related to Certain Federal Credits:		
1 Work Opportunity Credit	E1	00
2 Empowerment Zone Employment Credit	E2	00
3 Credit for Employer-Paid Social Security Taxes on Employee Cash Tips	E3	00
4 Indian Employment Credit	E4	00
F Expenditures for the Americans with Disabilities Act	F	00
G Marijuana Establishments Only (see instructions)		
Disallowed Federal Expenses	G	00
H Total Other Subtractions from Partnership Income		
Enter this amount on page 1, Schedule B, line B5	н	00

_ of _