

IDAHO PARTNERSHIP RETURN OF INCOME

8	TAPLE R EFO00035 06-13-2017	IIILI		1 _	. 1 C	/ I XI \		111		J1V1		20	
•	AMENDED RETURN? Check the box. See page 4 of instructions for reasons to amend and enter the number that applies	For calendar year 2017 or fiscal year beginning	Мо	Day	Year 17	ending	Мо	Day	Year		State	e use o	niy
Busi	ness name	, , , ,		State us	e only			Federa	l Employ	er Iden	tification Num	ber (Ell	N)
Curr	ent business mailing address					L							
City	state, and ZIP Code										NIA	100 (S = -1 =
	Suite, 4.14 ±11 5565						-				NA	ICS (e
1.	Is this a composite return?										□Yes		□No
2.	If a federal audit was finalized this year, enter	the latest year a	udite	d			•						
3.	Is this a final return?										□Yes	•	□No
	If yes, check the proper box below and enter Withdrawn from Idaho Dissolved		nt occ	curred _									
4											□ _{Yes}		\square_{No}
	I. Is this an electrical or telephone utility?									□Yes		□No	
	6. Enter the amount of investment tax credit earned this tax year										• —		
	Enter the amount of broadband equipment investment credit earned this tax year												
	Enter the amount of credit for Idaho research												
	Reserved												
	Did you claim the property tax exemption for										\square_{Yes}		\square_{No}
	OME												
	Ordinary income (loss) from trade or business	s activities. Form	106	5. page	1				•	11			
	Net income (loss) from rental real estate active									12			
	Net income (loss) from other rental activities. Form 1065, Schedule K								13				
	I. Portfolio income (loss). Form 1065, Schedule K								14		-		
15.	5. Other items. See instructions							•	15				
16.	6. Net distributable income. Add lines 11 through 15								16				
AD	DITIONS												
17.	Interest and dividends not taxable under Inter	nal Revenue Co	de						•	17			
18.	State, municipal, and local taxes measured b	y net income							•	18			
19.	Bonus depreciation. Include a schedule								•	19			
20.	Other additions								•	20			
21.	Add lines 16 through 20									21			
SU	BTRACTIONS												
22.	Interest from Idaho municipal securities				. • 2	2							
23.	Interest on U.S. Government obligations. Inc	lude a schedule			. • 2	3							
24.	Interest and other expenses related to lines 2	2 and 23			. • 2	4							
25.	Add lines 22 and 23 then subtract line 24								- 1	25			
	Technological equipment donation								•	26			
	Allocated income. Include a schedule												
	Interest and other expenses related to line 27												
	Subtract line 28 from line 27									29			
30	Ronus denreciation Include a schedule									30			

33. Net business income subject to apportionment. Subtract line 32 from line 21..... MAIL TO: Idaho State Tax Commission, PO Box 56, Boise ID 83756-0056 INCLUDE A COMPLETE COPY OF YOUR FEDERAL FORM 1065.

31. Other subtractions

32. Total subtractions. Add lines 25, 26, 29, 30, and 31.....



31

32

33

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34.	Net business income subject to apportionme	3	34				
35.	Partnerships with all activity in Idaho enter 1						
	complete and include Form 42; enter the app	• 3	35 %				
36.	Net business income apportioned to Idaho. Multiply line 34 by the percent on line 35						36
37.	Income allocated to Idaho. See instructions	• 3	37				
38.	Partnership income from Form PTE-12, Column b						38
39.	Partnership income from Form PTE-12, Colu	ımn c				• 3	39
40.	Composite income from Form PTE-12, Colu	mn e				• 4	10
	Idaho income tax from Form PTE-12, Colum						1
CR	EDITS						
42.	Credit for contributions to Idaho educational	entities		42			
43.	Credit for contributions to Idaho youth and re	ehabilitat	ion facilities	43			
44.	Total business income tax credits from Form	44, Par	t I, line 9.				
	Include Form 44			44			
45.	Total credits. Add lines 42 through 44					4	15
46.	Subtract line 45 from line 41. If line 45 is great	eater tha	n line 41, enter zero			4	16
	HER TAXES						
	Permanent building fund tax. See instruction	ns				• 4	17
	Total tax from recapture of income tax credit					_	18
	Fuels tax due. Include Form 75		-	19			
	Sales/use tax due on internet, mail order,						50
	Tax from recapture of qualified investment ex		•				51
	Total tax. Add lines 46 through 51	_	52				
	Donation to Opportunity Scholarship Program						53
	Total tax plus donations. Add lines 52 and 5					_	54
	MENTS AND OTHER CREDITS						
	Estimated tax payments. If made under other	FIN(s)	provide FIN(s), amount(s	s) an	d rollforward(s)	. 5	55
	Special fuels tax refund						56
	Tax Reimbursement Incentive credit. Include					_	57
	58. Total payments and other credits. Add lines 55 through 57						58
<u></u>	If line 54 is more than line 58, GO TO LIN						· · ·
	FUND OR PAYMENT DUE			,			
							59
	. Tax due. Subtract line 58 from line 54				⊢	60	
00.	i enaity interest non	ii uue ua	ie -	_ '-'	iter total		10
04	TOTAL DUE: Add line 50 and line 60				-		
	TOTAL DUE. Add line 59 and line 60						
62.	2. Overpayment. Subtract line 54 from line 58					• 6	62
63.	REFUND. Amount of line 62 you want refun	ded to y	ou		•		
64.	ESTIMATED TAX. Amount you want credite	d to vou	r 2018 estimated tax.				
	Subtract line 63 from line 62					• le	64
ΔΜ	ENDED RETURN ONLY. Complete this						
	Total due (line 61) or overpayment (line 62)		_			6	65
	Refund from original return plus additional re	<u> </u>	66				
	Tax paid with original return plus additional to	<u> </u>	67				
	Amended tax due or refund. Add lines 65 ar	<u> </u>	68				
00.	Within 180 days of receiving this return, the						
_	Under penalties of perjury, I declare that to the						
SIG	Signature of officer		Date				
HER			Phone number				
Paid	preparer's signature	Preparer's	EIN, SSN, or PTIN				
Add	ess	Phone nu	mber			$\ \ \ $	
				- 1			

