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(Rev. September 2018) Department of the Treasury

## **Amended Return or Administrative Adjustment Request (AAR)**

(For use by filers of Forms 1065, 1065-B, and 1066)

OMB No. 1545-0123 For tax year ending (Enter month and year.)

Internal Revei	nue Service	► Go to www.irs.gov/Form1065X for instructions and the latest information.	(Enter month and years)		
Please	Name		Employer identification number		
Type or	Number, street	t, and room or suite no. (If a P.O. box, see instructions.)			
Print	City or town, s	tate, and ZIP code	Telephone number (optional)		
Enter name a	nd address used	d on original return (If same as above, write "Same.")			
		ce Center where original return lly filed, enter "e-filed."	112		
		ng large partnerships (ELPs), enter the number of Schedules K-1 being filed with the of Schedules Q being filed with this return	is return		
Part I	Check th	e appropriate box (Choose only 1. See instructions.)			
		rs beginning <b>before</b> January 1, 2018 (unless electing into BBA)  Section 1	go to Section 1		
	rship tax yea January 1, 2	ers beginning <b>after</b> December 31, 2017 (or that elected into BBA for tax years begin 2018)	ining after November 2, 2015		
☐ BBA A	AR—go to S	ection 2			
Partner underp	rship-Partner ayment durir	nended Return Related to Modification of Another Partnership's Imputed Underpay Amended Return (filed as part of modification of the imputed ag a BBA audit)—go to Section 3  NonTEFRA Determination (for partnership tax years beginning before Jan			
	e partnership	made an election to be treated as an electing large partnership (ELP) under the pr	ovisions of section 775?		
If "Yes	" the partner	rship is not subject to TEFRA. Enter the date of the election ▶Complete items E through G and then go to Part III.	Do not complete		
You must	determine if t	the partnership is subject to the rules for consolidated audit proceedings (TEFRA p in effect for tax years beginning before January 1, 2018). See instructions for detail			
<b>B</b> Did the	partnership	have 10 or fewer partners at all times during the tax year? ( <b>Note:</b> A husband and wourposes.)   Yes   No			
C At all ti	At all times during the partnership's tax year, were all partners U.S. citizens, resident aliens, C corporations, or estates of deceased partners?   Yes No				
		ions B and C are "Yes," the partnership is not subject to TEFRA proceedings. A pan Administrative Adjustment Request. See instructions for details.	rtnership that is not subject		
		not otherwise subject to TEFRA, has the partnership filed Form 8893, Election of F pulvalent, to make an election to be treated as a TEFRA partnership? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			
If the answ	•	ions B and C are "Yes" and the answer to D is "No," then the partnership is not suon D is "Yes," enter the tax year that the election to be treated as a TEFRA partne			
-	rtnership is	☐ Subject to TEFRA ☐ Not subject to TEFRA			
F Check G If you a	the applicab are a Tax Mat ting substitut	le box (see instructions): Amended Return Administrative Adjustment tters Partner (TMP) or a Partner With Authority (PWA) filing an AAR on behalf of the ted return treatment? (See instructions.) Yes No			

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## Form 1065X (Rev. 9-2018) Section 2—BBA AAR Is the partnership revoking the immediately preceding partnership representative (and/or designated individual, if applicable) and appointing a successor (including the designated individual, if applicable) at the same time that this AAR is being filed? Yes (Attach Form 8979.) □ No Do the adjustments on the AAR result in an imputed underpayment for the reviewed year? ☐ Yes (If "Yes," go to Question C.) ☐ No (If "No," go to Question D.) C Is the partnership making an election under section 6227(b)(2) to have the adjustments taken into account by the reviewed year partners? Yes (If "Yes," go to Question D.) ☐ No (If "No," go to Question E.) D The partnership is required to provide statements to the reviewed year partners containing the partners' share of the adjustments. By signing below, the partnership representative declares, under penalties of perjury, that all statements have been provided to the reviewed year partners as required by the instructions. Partnership Representative (or Designated Individual, if applicable) **E** Is the partnership applying modifications to the imputed underpayment? ☐ Yes (If "Yes," attach Form 8980.) □ No Go to Part II Section 3-Partnership-partner amended return filed as part of modification of the imputed underpayment during a BBA audit. See instructions. Audited partnership name EIN of audited partnership Reviewed year of audited partnership \_\_\_ Audit control number \_\_\_ Go to Part II Fill in applicable items and use Part V to explain any changes

Pa	art II	Amended or Administrative Adjustment Request (AAR) Items for Partnerships Filing Form 1065 Only (ELPs and REMICs, use Part III)	/	(a) As originally reported on Schedule K or as previously adjusted	(c) Correct amount
	1	Ordinary business income (loss)	1		
Income (Loss)	2	Net rental real estate income (loss)	2		
	3	Other net rental income (loss) (see instructions)	3		
	4	Guaranteed payments	4		
	5	Interest income	5		
	6a	Ordinary dividends	6a		
	b	Qualified dividends	6b		
	С	Dividend equivalents	6с		
	7	Royalties	7		
	8	Net short-term capital gain (loss)	8		
	9a	Net long-term capital gain (loss)	9a		
	b	Collectibles (28%) gain (loss)	9b		
	С	Unrecaptured section 1250 gain (see instructions)	9с		
	10	Net section 1231 gain (loss)	10		
	11	Other income (loss) (see instructions)	11		

Form 1065X (Rev. 9-2018) **Deductions** 12 Section 179 deduction 12 13a 13a Contributions . . . . . 13b Investment interest expense Section 59(e) expenditures . . 13c С Other deductions (see instructions) 13d d Net earnings (loss) from self-employment . . . 14a b Gross farming or fishing income 14b Gross nonfarm income . . . 14c 15a 15a Low-income housing credit (section 42(j)(5)) Low-income housing credit (other) . . . . . . 15b Credits 15c С Qualified rehabilitation expenditures (rental real estate) Other rental real estate credits (see instructions) . . . d 15d 15e Other rental credits (see instructions) 15f Other credits (see instructions) Name of country or U.S. possession ▶ 16a b Gross income from all sources 16b Gross income sourced at partner level . 16c Foreign gross income sourced at partnership level Section 951A category . . . . 16d 16e Foreign branch category Foreign Transactions Passive category . . . . . 16f General category . . . . . 16g h Other (attach statement) . . . . . . . 16h Deductions allocated and apportioned at partner level, 16i Deductions allocated and apportioned at partner level, other . . . . . . . . . . . . 16j Section 951A category 16k 161 Foreign branch category Passive category . . . . . . . . . . . 16m n General category . . . 16n 0 Other (attach statement) . . . . . . . . . . . **160** Total foreign taxes (check one) ▶ Paid ☐ Accrued ☐ 16p Reduction in taxes available for credit (see instructions) 16q q Other foreign tax information (see instructions) . . 16r Post-1986 depreciation adjustment . . . . . . . Other Information | Alternative Minimum Tax (AMT) Items 17a 17a 17b Adjusted gain or loss . . . . . . Depletion (other than oil or gas) . . . . . . 17c Oil, gas, and geothermal properties—gross income. 17d Oil, gas, and geothermal properties-deductions 17e Other AMT items (see instructions) . . . 17f f 18a Tax-exempt interest income . . . . . 18a b Other tax-exempt income . . . 18b 18c 19a 19a Distributions of cash and marketable securities Distributions of other property . . . . . 19b 20a Investment income . . . . . . . . . . . . 20a Investment expenses . . . . . . . . . . . . . 20b Other items and amounts (see instructions) 20c

Note: Amended Schedules K-1: See instructions for when required.

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Part III	A	mended or Administrative Adju	stment Request	(AAR) Items for	r ELPs an	d REMI	Cs Only	/	
		(a) Description of item being amended adjusted (see instructions)	d or	(b) As originally reported or as previou adjusted	usly increas	Net change e or (decrea blain in Part	ise) —	(d) Correct amou	unt
1			1						
2			2						
3			3						
4			4						
5			5						
Tax and	d Pa	yments (see instructions)					_		
6 E	LPs (	ONLY: Tax and other payments	6						
7 R	EMIC	s ONLY: Tax on net income from	n prohibited						
tra	ansa	ctions	7						
8 R	EMIC	S ONLY: Tax on net income from	foreclosure						
рі	roper	ty	8						
9 R	EMIC	S ONLY: Tax on contributions after	the startup						
da	ay .		9		_				
<b>10</b> To	otal t	ax ,	10						
<b>11</b> Ta	ах ра	id with Form 7004	11						
<b>12</b> Ta	ах ра	id with (or after) the filing of the origin	nal return				12		
<b>13</b> A	dd Iir	es 11 and 12, column (d)					13		
<b>14</b> 0	verpa	ayment, if any, as shown on original re	eturn or as later adj	usted			14		
		ct line 14 from line 13					15		
Tax Du	e or	Overpayments (see instructions)							
16 Ta	ax dı	ie. Subtract line 15 from line 10, colu	mn (d). For details o	on how to pay, see	instruction	ns	16		
17 O	verp	<b>ayment.</b> Subtract line 10, column (d),	from line 15				17		
Note: An	nend	ed Schedules K-1 or Schedules Q.	File amended Sche	edules K-1 or Sche	edules Q w	ith Form	1065X. If	the ELP or	
		g Form 1065X for an administrative a							
		ers or residual interest holders. If the							
		under sections 6221 through 6231 (as		er 1, 2015), the REM	MIC must f	urnish the	e amend	ed Schedules	Q to
its residu	iai int	erest holders. See instructions for de	tails.						
Part IV	l Ir	mputed Underpayment Under th	ne Centralized Pa	artnership Audi	t Regime	(see ins	truction	s)	
<b>1</b> In	npute	ed underpayment				. 1			
<b>2</b> To	otal a	mount due				. 2			
		ayment				. 3			
<b>4</b> B	alanc	e due (subtract line 3 from line 2) .				. 4			
		Under penalties of perjury, I declare that I h schedules and statements, and to the best preparer (other than taxpayer) is based on a	of my knowledge and be	elief, this amended retur	rn or AAR is tr	nded return ue, correct,	, or AAR ind and compl	cluding accompa ete. Declaration	nying of
			1						
Sign		Signature of current Partnership Represen	1-4: / D-4-	<b>)</b>					
Here		Designature of current Partnership Represent Designated Individual, if applicable), LLC reartner		<b>▼</b> Tit	ile				
		Print/Type name of Partnership Representativ	re						
		Print/Type preparer's name	Preparer's signature		Date			PTIN	
Paid		Time Type proparer a marine	i ropardi a aigilature		Daio		eck 🔲 if f-employed		
Prepar		Eirm'a nama			1				
Use Or	יין עיי	Firm's address				Firm's EIN Phone no.			
		Firm's address				Frione no.	•		

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Part V	<b>Explanations.</b> Enter the Part II or Part III line number before each item you are changing, and give a reason for the change. For partnerships, show the box number and code used to report the item on Schedule K-1. Show any computation in detail. Also, show how the imputed underpayment was calculated and how modifications were applied. If more space is needed, continue your explanations on additional pages.
	DDAET ACOE
	August 28, 2018