

IRM PROCEDURAL UPDATE

DATE: 09/19/2025

NUMBER: ts-03-0925-3605

SUBJECT: Form 1065 Editorial Changes

AFFECTED IRM(s)/SUBSECTION(s): 3.11.15

CHANGE(s):

IRM 3.11.15.5.7(5) - Amended Returns - Restricted the note referencing Tribal Tax Credit Scheme.

(5) Detach Schedules K-1 for current year (TY2024), two preceding years (TY2023 and TY2022) and future Schedules K-1. Process according to IRM 3.0.101, General - Schedule K-1 Processing.

Note: # [REDACTED] **#**

IRM 3.11.15.5.9 - Tribal Tax Credit Scheme - Restricted the entire subsection procedures.

(1) # [REDACTED]

[REDACTED]

(2) # [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] #

(3) # [REDACTED]

- I [REDACTED]
- I [REDACTED]

IRM 3.11.15.17(3) - Restricted note referencing Tribal Tax Credit Scheme.

(3) Only a Schedule K-1 (Form 1065) or an attachment to Form 1065 that has the information required on Schedule K-1 is acceptable. Refer to IRM 3.0.101 for complete instructions to edit and process Schedules K-1.

Note: # [REDACTED] #

Note: After editing Line I, detach current year (TY2024), two preceding years (TY2023 and TY2022) and future Schedules K-1.

DRAFT		U.S. Return of Partnership Income	OMB No. 1545-0123
Form 1065	For calendar year 2024, or tax year beginning _____, 2024, ending _____, 20____		2024
Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form1065 for instructions and the latest information.		
A Principal business activity <i>Farming</i>	Name of partnership <i>Falcon Farms</i>	D Employer identification number <i>00-4961123</i>	
B Principal product or service <i>Grain</i>	Number, street, and room or suite no. If a P.O. box, see line 10 <i>Rt. 2 Box 943</i>	E Date business started <i>6/30/1953</i>	
C Business code number <i>111191</i>	City or town, state or province, country, and ZIP or foreign ZIP code <i>Fargo, ND 58102</i>	F Total assets (see instructions) <i>\$ 391644</i>	
G Check applicable boxes: (1) ☐ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change		Number of Schedules K-1 (# of Partners)	
H Check accounting method: (1) ☐ Cash (2) ☐ Accrual (3) ☐ Other (specify): _____			
I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year: _____ 3			
J Check if Schedules C and M-3 are attached ☐		Number of Schedules K-1 (# of Partners)	
K Check if partnership: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes			
Caution: Include only trade or business income and expenses on lines 1a through 23 below. See instructions for more information.			

IRM 3.11.15.24.6(4) - Restricted procedures regarding Tribal Tax Credit Scheme.

(4) #

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] #

IRM 3.11.15.38(2) - Restricted procedures regarding Tribal Tax Credit Scheme.

(2) # [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]