No. <b>L 1878</b> Return to:	1.000000000000000000000000000000000000	Due no later than Oct 31, 2017 Annual Report Form  1. Mailing Address: Correct in this box if needed.  S-SIXTEEN LIMITED PARTNERSHIP RONALD N GRAVES P O BOX 27 ROISE ID 83707		2. Registered Agent and Address (NO PO BOX)  RONALD N GRAVES  1099 W FRONT ST  BOISE ID 83702  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	S-SIXTEEN LIMITE RONALD N GRAVI						
NO FILING FEE IF RECEIVED BY DUE DATE	DOISE ID 03707		5. <u></u> 1.09.00	.o. ou / igo o	g. 14 ta. 61		
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
GENERAL PARTNER S-SIXTEEN MANAGEMENT LLC 1099 W FRONT STREET				ID	USA	83702	
5. Organized Under the Laws of:	6. Annual Report mu	st be signed.*					
ID	Signature: JOHN [	Signature: JOHN DON SIMPLOT Date: 08/18/2017			ć.		
L 1878	Name (type or pri	ne (type or print): JOHN DON SIMPLOT Title: MANAGER					
Processed 08/18/2017	* Electronically provid	* Electronically provided signatures are accepted as original signatures.					