

PINNACLE WEST CAPITAL CORP

Reported by
LOPEZ HUMBERTO S

FORM 5

(Annual Statement of Changes in Beneficial Ownership)

Filed 02/13/97 for the Period Ending 12/31/96

Address	400 NORTH FIFTH STREET MS8695 PHOENIX, AZ 85004
Telephone	602 250 1000
CIK	0000764622
Symbol	PNW
SIC Code	4911 - Electric Services
Industry	Electric Utilities
Sector	Utilities
Fiscal Year	12/31

PINNACLE WEST CAPITAL CORP

FORM 5

(Annual Statement of Changes in Beneficial Ownership)

Filed 2/13/1997 For Period Ending 12/31/1996

Address	400 NORTH FIFTH STREET . PHOENIX, Arizona 85004
Telephone	602-379-2500
CIK	0000764622
Industry	Electric Utilities
Sector	Utilities
Fiscal Year	12/31

U.S. SECURITIES AND EXCHANGED COMMISSION
Washington, D.C. 20549

F O R M 5

OMB APPROVAL

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number 3235-0362
Expires: September 30,1998
Estimated ave. burden
hours per response.....1.0

Check this box if
[] no longer Subject
to Section 16.

[] Form 3 Holdings Rep. Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or
[] Form 4 Trans. Rep. Section 30(f) of the Investment Company Act 1940

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol		6. Relationship of Reporting Person to Issuer (Check all Applicable)	
Lopez	Humberto	S	Pinnacle West Capital Corp (PNW)		X Director 10% Owner	
(Last)	(First)	(MI)	3. IRS or Soc. Sec. No. of Reporting Person (Voluntary)	4. Statement for Month/Year 12/31/1996	--- Officer --- Other (Specify below)	
c/o HSL Properties 1037 S. Alvernon, Suite 200					526-60-4883	5. If Amendment, Date of Original (Month/Year)
(Street)			Tucson	AZ		
(City) (State) (Zip)					--- Form filed by More than One Reporting Person	

TABLE I - Non-Derivative Securities Acquired, Disposed of or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Mon/Day/Yr)	3. Trans. Code (Instr. 8)	4. Security Acquired (A) or Disposed of (D) (Instr. 3, 4 & 5)			5. Amount of Securities Beneficially Owned at End of Fiscal Year (Instr. 3 & 4)	6. Own. Form (D) or (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Amount	(A) (D)	Price			
Common Stock	07/01/1996	A	500	A	\$.0000			
Common Stock	07/01/1996	J (01)	500	D	\$.0000	0		
Common Stock	(02)	R	26.697	A	\$.0000 (02)			
Common Stock	07/01/1996	J (01)	500	A	\$.0000	3046.334	I Family Trust	

Reminder: Report on a separate line for each class securities owned directly or indirectly.
*If the form is filed by more than one reporting person, see Instruction 4(b)(v).

SEC 2270 (7-96)

TABLE II - Derivative Securities Acquired, Disposed of, Beneficially Owned (e.g., puts, calls, warrants, options, convertible security)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans Date (Mon/Day/Year)	4. Tran- saction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 & 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 & 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned at End of Year (Instr. 4)	10. Own. Form or Dir. Ind. (I)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				(A)	(D)	Date Exbl.	Exp. Date					

Explanation of Responses:

- (01) Transfer to a family trust. Change in beneficial ownership.
- (02) Shares acquired between 9/4/96 and 12/31/96 pursuant to Company's Dividend Reinvestment Plan at prices ranging from \$28.655 to \$31.368 per share.

**Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a). /s/Humberto S. Lopez 02/03/1997

**Signature of Reporting Person Date

Note: File three copies of this form, one of which must be manually signed. SEC 2270 (7-96)
If space provided is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMD Number

