2016 KANSAS CORPORATION INCOME TAX

150016

6 B. Business Activity Code (NAICS) Employer's Identification Numbers (EINs) (Enter both if applicable) EIN this entity: C. Date Business Began in KS (mm/dd/yyyy) D. Date Business Discontinued in KS (mm/dd/yyyy) EIN Federal Consolidated Parent: E. State and Month/Year of Incorporation (mm/vvvv) I. Enter your original federal due date if A. Method Used to Determine Income of Corporation in Kansas other than the 15th day of the 4th month 1. Activity wholly within Kansas - Single entity after the end of the tax year. 2. Activity wholly within Kansas - Consolidated F. State of Commercial Domicile 3. Single entity apportionment method (K-120AS) _ ෆ 4. Combined income method - Single corporation filing (Sch. K-121) G. Type of Federal Return Filed J. If any taxpayer information has changed 5. Combined income method - Multiple corporation filing (Sch. K-121) since the last return was filed, please 2. Consolidated 1. Separate mark this box 6. Qualified elective two-factor (K-120AS) Year qualified: 7. Common carrier mileage (Enclose mileage apportionment schedule) H. Mark this box if you have submitted a Kansas Form K-120EL 8. Alternative or separate accounting (Enclose letter of authorization & schedule) Mark this box if you are filing this as an Reason for amending your 2016 Kansas return: AMENDED 2016 Kansas return. Amended federal Amended affects Adjustment by NOTE: This form cannot be used for tax years prior to 2016. the IRS tax return Kansas only 1. Federal taxable income...... 2. Total state and municipal interest..... 3. Taxes on or measured by income or fees or payments in lieu of 3 income taxes (Part IV, line 2)..... 4. Federal net operating loss deduction 5 5. Other additions to federal taxable income (Schedule required)....... 6. Total additions to federal taxable income (add lines 2, 3, 4 and 5) 7. Interest on U.S. government obligations (Part V, line 2) 8 8. IRC Section 78 and 80% of foreign dividends (schedular garden).... 9 9. Other subtractions from federal taxable income schedule required) 10. Total subtractions from federal taxable income (add lines 7, 8 and 9)...... 11 11. Net income before apportionment (add line 1 to line 6, then subtract line 10)..... 12 12. Nonbusiness income -- Total company (schedule required) 13. Apportionable business income (subtract line 12 from line 11)...... 14. Average percent to Kansas (Part VI. lines A. 14 B, C and E; if 100% enter 100.0000)..... 15 15. Amount to Kansas (multiply line 13 by line 14) 16 16. Nonbusiness income - Kansas (schedule required)..... 17 17. Kansas expensing recapture (see instructions for Schedule K-120EX and enclose applicable schedules).... 18 18. Kansas expensing deduction (see instructions for Schedule K-120EX and enclose applicable schedules) ... 19 19. Kansas net income before NOL deduction (add lines 15, 16 and 17, then subtract line 18) 20. Kansas net operating loss deduction (schedule required)......

Tax preparer's EIN (Employer Identification Number) or SSN (Social Security Number)		
Individual or firm signature of preparer Address/Telephone Nu	ımher	Date
gn Signature of officer Title		Date
I declare under the penalties of perjury that to the best of my knowledge this is a true, correct, ar	nd complete	e return.
I authorize the Director of Taxation or the Director's designee to discuss my return and end		,
42. CREDIT FORWARD. Enter the amount of line 40 (original return only) you wish to be applied to 20 estimated tax. (Line 42 cannot exceed the total of lines 28, 29 and 30)		
41. REFUND. Enter the amount of line 40 you wish to be refunded	41	
40. OVERPAYMENT (if line 27 plus line 38 is less than line 34)	40	
39. Total tax, interest & penalty due (add lines 35 through 38). Complete Form K-120V and enclose it with your pa	ayment. 39	
If annualizing to compute penalty, mark this box		
37. Penalty		
36. Interest		
	35	
34. Total prepaid credits (add lines 28 through 32 and subtract line 33)		
see instructions	34	
33. Overpayment from original return (this figure is a subtraction;		continuing to line 34.
32. Payment remitted with original return; see instructions		Kansas return, complete lines 32 and 33 before
31. Total of all other refundable credits (Part I, line 34)		If this is your AMENDED
30. Amount paid with Kansas extension		Kansas return, skip lines 32 and 33 and continue to line 34.
29. Other tax payments (enclose separate schedule)		If this is your ORIGINAL
28. Estimated tax paid and amount credited forward (Part II, line 4)		
27. Balance (subtract line 26 from line 25; cannot be less than zero)		
26. Total nonrefundable credits (Part I, line 27; cannot exceed amount on line 25)		
25. Total tax (Add lines 23 and 24. If filing combined, use line 24 of K-121.)	25	
24. Surtax (3% of line 22 in excess of \$50,000)		
23. Normal tax (4% of line 22)		
22. Kansas taxable income (subtract line 20 from line 19 or enter line 21, as applicable)		
21. Combined report (Schedule K-121) or alternative/separate accounting income (separate schedule)	21	

PART II - ADI	DITIONAL INFO	ORMATION			150)318
			inder the same name enter previous name		rn for Kansas, state the reasor ed, state the IRC section unde	
2. Enter the addre	ss of the corporatio	n's principal loca	ation in Kansas.	that have not previous box(es) below and date. You are require	ole income has been redeterm busly been reported to Kansa state the calendar, fiscal, or s ed to submit, under separate of venue Agent's Report along wi	is, check the applicable hort period year ending cover, the federal Forms
3. The corporatio	n's books are in ca	re of:		return.		
Name				☐ Revenue	e Agent's Report	let Operating Loss
Address				Voare anded	☐ Amended Return	
Telephone			 			
			d amount claimed on		d with the Kansas Department act, enter all registration or li	
Date	Amount	Date	Amount	a. Sales Tax		
				b. Compensating U	se Tax	
				c. Withholding Tax		
			anization during the	d. Other (specify)_		
detailed explan	by this return? ation.	Yes No I	it "yes" enclose a			
PART III - AF	FILIATED COR	PORATION	S DOING BUSINE	SS IN KANSAS		
		Name of Corp	ooration		Employer ID	Number
			(Enclose a separate shee	et for additional corporations)		
PART IV - SC	HEDULE OF T	AXES				
`			eral return. See instructi nents in lieu of income ta	ons.) axes (include federal enviro	nmental tax; itemize).	
2. Total (Enter on	line 3, page 1)					
3. Total other taxe	es					
4. Total taxes (Mu	ıst equal line 17 of	the federal retu	ırn)			
PART V - SCI	HEDULE OF IN	ITEREST IN	ICOME			
	est from line 5 of th come (describe typ		n)			
2. Total / [:::4::::	lino 7 mars 4)					
,	, • ,					
3. Iotal other inte	rest income					

4. Total interest income (Must equal line 5 of the federal return).....

K-120AS

KANSASCorporation Apportionment Schedule

FOR USE BY CORPORATIONS APPORTIONING INCOME
(Corporations using the combined income method must use Schedule K-121)

For the taxable year beginning	2	0 1 6 ; end	ling			
Name as shown on Form K-120			Employer Ident	ification Number (EIN)		
PART VI - APPORTIONMENT FORMULA						
A. Property	WITHIN K	ANSAS	TOTAL C	OMPANY	PERC	
(1) Value of owned real and tangible personal property used in the business at original cost Inventory	Beginning of Year	End of Year	Beginning of Year	End of Year	WITH KANS	
Depreciable assets						
Land					_	
Other tangible assets (Enclose schedule)						
Less: Construction in progress					1	
Total property to be averaged					1	
Average owned property (Beg. + End ÷ 2)					-	
(2) Net annual rented property. Multiplied by 8					1	
TOTAL PROPERTY (Enter on line 14A, page 1)					А	%
B. Payroll (Those corporations qualified and utilizing the el this area only during the first year of qualifying. After the			Within Kansas	Total Company		
(1) Compensation of officers						
(2) Wages, salaries and commissions						
(3) Payroll expense included in cost of goods sold						
(4) Payroll expense included in repairs						
(5) Other wages and salaries						
TOTAL PAYROLL (Enter on line 14B, page 1) (If two-factor formula, do not carry this percentage t	qualified and utilizing	the elective			В	%
C. Sales (Gross receipts, less returns and allowances)						
(1) Sales delivered or shipped to purchasers in Kansas						
(a) Shipped from outside Kansas						
(b) Shipped from within Kansas						
(2) Sales shipped from Kansas to:						
(a) The United States Government						
(b) Purchasers in a state where the taxpayer would Public Law 86-272)	not be taxable (e.g., u	nder federal				
(3) Dividends						
Interest						
Rents						
Royalties						
Gains/losses from intangible asset sales						
Gross proceeds from tangible asset sales						
Other income (Enclose schedule)						
TOTAL SALES (Enter on line 14C, page 1)					С	%
				•	D(1)	
D(1). Total percent (Sum of lines A, B & C if qualified and of D(2). Total percent (Sum of lines A & C if qualified and utility	=				D(1)	%
D(2). Total percent (Sum of lines A & C if qualified and utili	-		•••••		E	%

PART VII - ADDITIONAL INFORMATION		1505	518
Does the Kansas sales figure in Part VI include (1) all sales delivered from Kansas where purchaser is the U.S. Government and (2) all sales delivered from Kansas to states in which this corporation is immune from state income taxation under federal Public Law 86-272 (15 U.S.C.§ 381)? If not, please explain	conducted a unitary b	nined that this corporation usiness with any other coves, specify which state(supporations conducting the and location(s) of your Kans	orporation? s) and enclose a e unitary business.
If you claim that part of your net income is assignable to business done outside Kansas:	•	al company column the sa er states under the Uniform is No If no, please exp	Division of Income for
a. Enclose a list of all states in which this corporation is doing business			
a. Enclose a list of all states in which this corporation is doing business and filing state corporation income or franchise tax returns. PART VIII - AFFILIATED CORPORATIONS INCLUDED IN FO	RM K-120AS CORPORAT		
and filing state corporation income or franchise tax returns.	RM K-120AS CORPORAT Employer Identification #	Check if in Total Company Factors	