

Department of Revenue



A

Kentucky Corporation/LLET Account Number

JCKY CORPORATION 201

➤ See instructions.	KENTUCKY CORPORATION
Taxable period beginning, 201, and ending, 201	INCOMETAX AND LLET RETURN

В	Check applicable box(es):	D Federal Identification	n Number	_				Taxable Year Endi	ing	/	—
	Receipts Method Gross Receipts Gross Profits	Name of Corpo	ration							cky Secretary	· .
	\$175 minimum  Nonfiling Status Code	Number and St	reet						0	10. (1	
	Enter Code	City		State	ZIP Co	ode	Tele	phone Number	State	and Date of I	ncorporation
С	Income Tax Return  Separate	E Name of Co	mmon Parent	<u> </u> :	l k	Kentucky Corpora	l tion/LLI	ET Account Number	Princi	pal Business	Activity in KY
	☐ Mandatory NEXUS  Nonfiling Status Code  Enter Code	☐ Short-perio	olicable: od return (Con accounting per	nplete Part IV)	_	Final return (Con Change of name	,	Part IV) Change of address	NAICS Code Number (Relating to Kentucky Activity) (See www.census.gov)		
			lanation of ch	anges in Part V		Amended returnation of Amend		ırn Changes.			
_	PART	I-LLET CON	/IPUTATION	N .		F	PART	I-INCOMETAX CO	OMP	UTATION	
1.	. Schedule LLET, Sec	tion D, line 1.	1		00			instructions)		1	00
	. Tax credit recapture				00			ture		2	00
3	. <b>Total</b> (add lines 1 ar	nd 2)	3		00			on LIFO recapture. 1 through 3)		3	00
4	. Nonrefundable LLE	T credit from				5. Nonrefun			.		
	Kentucky Schedule	s) K-1	4		00	from the					
5	. Nonrefundable tax							rksheet(s) s)		5	00
	(attach ScheduleTC				00			LLET credit (Part I,	.		
6	. LLET liability (great					line 6 less	\$175	)		6	00
_	lines 4 and 5 or \$17	=			00	7. Nonrefun				7	00
	Withholding tax (Fo				00			eTCS) : <b>liability</b> (line 4 less		/	00
	<ul> <li>Estimated tax paym</li> <li>Certified rehabilitat</li> </ul>				00			7, but not less than			
	. Film industry tax cr				00					8	00
	Extension payment				00	9. Estimated		oayments n 2220-K attached		a	00
	. Prior year's tax cred				00			nent		10	00
	. Income tax overpay					11. Prior year	's tax	credit		11	00
	Part II, line 17		13		00			ent from Part I,		10	00
14	. LLET paid on origin	al return	14		00			come tax paid on		12	00
	. LLET overpayment									13	00
	return		15		00	14. Corporati	on inc	ome tax overpaym	ent		
16	. <b>LLET due</b> (lines 6 ar							rn		14	00
	7 through 14)		16		00			(lines 8 and 14 less 13)		15	00
17.	LLET overpayment							payment (lines 9			
40	through 14 less line				00			lines 8 and 14)		16	00
	. Credited to 2015 inc . Credited to 2015 int				00			5 LLET 5 interest		17 18	00
	. Credited to 2015 int				00			5 penalty		19	00
	. Credited to 2015 pe . Credited to 2016 LL				00			6 corporation			
	. Amount to be refun				00			efunded		20 21	00
_						Z1. Amount t	.o be i		_		00
	TAX PAYMENT SUMMARY (Round to nearest dollar)  LLET  INCOME  P  OFFICIAL USE ONLY  P										
			INCOME			w					
	LLET due (Part I, Line 16)       \$	.00	1. Income ta (Part II, Li			.00 2					
2.	Interest \$	.00	2. Interest	\$		.00 4					
3.	Penalty \$	.00_	3. Penalty	\$		.00 V					
4.	Subtotal \$	.00	4. Subtotal	\$		<u>.00</u>					
TO	TAL PAYMENT (Add Subto	otals)	> \$		.00	#					



PART III—TAXABLE INCOME COMPUTATION							
1. Federal taxable income (Form 1120,		14. Federal work opportunity credit	14 00				
line 28) 1	00	15. Depreciation adjustment					
ADDITIONS:		16. Other (attach Schedule O-720)	16 00				
2. Interest income (state and local		17. Revenue Agent Report (RAR)					
obligations)2	2 00	18. <b>Net income</b> (line 11 less lines 12					
3. State taxes based on net/gross		through 17)	18 00				
income3		19. Current net operating loss					
4. Depreciation adjustment 4	00	adjustment (mandatory nexus only)	19 00				
5. Deductions attributable to nontaxable		20. <b>Kentucky net income</b> (add lines 18					
income <u>5</u>	00	and 19)	20 00				
6. Related party expenses (attach		21. Taxable net income	20				
Schedule RPC)		(attach Schedule A if applicable)	21 00				
7. Dividend paid deduction (REIT) 7	00	22. Net operating loss deduction					
8. Domestic production activities		(NOLD)	22 00				
deduction		23. <b>Taxable net income</b> after NOLD	00				
9. Other (attach Schedule O-720)		1	23 00				
10. Revenue Agent Report (RAR)		1	23 00				
11. Total (add lines 1 through 10)	00	activities deduction (KDPAD)	24 00				
SUBTRACTIONS:		l	24 00				
12. Interest income (U.S. obligations) 12 13. Dividend income 13		(line 23 less line 24)	25 00				
			25 00				
PART IV—EXPLANA	ATION OF FINAL RET	TURN AND/OR SHORT-PERIOD RETURN					
☐ Ceased operations in Kentucky		☐ Change in filing status					
☐ Change of ownership		□ Merger					
☐ Successor to previous business		□ Other					
· · · · · · · · · · · · · · · · · · ·							
PART V—	<b>EXPLANATION OF A</b>	MENDED RETURN CHANGES					
OFFICER INFORMATION (Failure to Provide Requ	uested Information Ma	ov Result in a Penalty)					
Attach a schedule listing the name, home address			easurer.				
Has the attached officer information changed fro	om the last return filed	? 🔲 Yes 🔲 No					
President's Name		President's Home Address					
President's Social Security Number							
Date Became President / /							
I, the undersigned, declare under the penalties of	periury, that I have exa	mined this return, including all accompanying so	hedules and statements.				
and to the best of my knowledge and belief, it is		, , , ,	,				
$\mathscr{L}_{\mathbb{D}}$							
Signature of principal officer or chief accounting	g officer	Date					
Printed name of principal officer or chief accoun	nting officer						
Name of person or firm preparing return		SSN, PTIN or FEIN					
Federal Form 1120, all pages and any supporting schedules mu	ust be attached.	May the DOR discuss this return with the prepare	arer?				
		☐ Yes ☐ No					
Make check payable to: Email Address:							
Kentucky State Treasurer							
Telephone No.:							
Mail to: REFUNDS OR NO TAX DUE Kentucky Department of Revenue, Frankfort, KY 40618-0010							
PAYMENTS Kentucky Department of Revenue, Frankfort, KY 40620-0020							
I I I I I I I I I I I I I I I I I I I							
	www.reve	nue.ky.gov					

Commonwealth of Kentucky **DEPARTMENT OF REVENUE** 



## SCHEDULE Q-KENTUCKY CORPORATION/LLET QUESTIONNAIRE

**IMPORTANT**: Questions 4—15 must be completed by all corporations. If this is the corporation's initial return or if the corporation did not file a return under the same name and same federal I.D. number for the preceding year, questions 1, 2 and 3 must be answered. **Failure to do so may result in a request for a delinquent return**.

1.	Indicate whether: (a) $\square$ new business; (b) $\square$ successor to previously existing business which was organized as: (1) $\square$ corporation; (2) $\square$ partnership; (3) $\square$ sole proprietorship; or (4) $\square$ other $\square$ If successor to previously existing business, give name, address and federal I.D. number of the previous business organization.
2.	List the following <i>Kentucky</i> account numbers. Enter N/A for any number not applicable.  Employer Withholding
3.	If a foreign corporation, enter the date qualified to do business in Kentucky / /
4.	The corporation's books are in care of: (name and address)
5.	Are disregarded entities included in this return?  Yes No. If yes, list name, address and federal I.D. number of each entity.
6.	(a) Was the corporation a partner or member in a pass-through entity doing business in Kentucky? ☐ Yes ☐ No. If yes, list name and federal I.D. number of the pass-through entity(ies).
6.	(b) Was the corporation doing business in Kentucky other than through its interest held in a pass-through entity doing business in Kentucky? ☐ Yes ☐ No
7.	Are related party costs as defined in KRS 141.205(1)(I) included in this return?   Yes   No. If yes, attach Schedule RPC, Related Party Costs Disclosure Statement, and enter any related

party cost additions on Part III, Line 6.

8.	Did the corporation at any time during the taxable year do business in Kentucky and own 80 percent or more of the voting stock of another corporation doing business in Kentucky?  Yes No. If yes, list name, address and federal I.D. number of each entity.
9.	Was 80 percent or more of the corporation's voting stock owned by any corporation doing business in Kentucky at any time of the year? ☐ Yes ☐ No. If yes, list name, address and federal I.D. number of each entity.
10.	The federal tax return attached to this Kentucky tax return is: $\square$ a pro forma federal tax return $\square$ a copy of the federal tax return filed with the Internal Revenue Service
11.	Is the entity filing this Kentucky tax return or any entity included in the tax return organized as a limited cooperative association as provided by KRS Chapter 272A?   Yes   No. If yes, and this is a nexus consolidated return, enter each limited cooperative association's name, address and federal I.D. number included in the return:
12.	Is the entity filing this Kentucky tax return or any entity included in this tax return organized as a statutory trust or a series statutory trust as provided by KRS Chapter 386A? $\square$ Yes $\square$ No If yes, is the entity filing this Kentucky tax return or any entity included in this tax return a series within a statutory trust? $\square$ Yes $\square$ No
	If yes, for each series within a statutory trust, enter the name, address and federal I.D. number of the statutory trust registered with the Kentucky Secretary of State:
13.	Was this return prepared on: (a) □ cash basis, (b) □ accrual basis, (c) □ other
14.	Did the corporation file a Kentucky tangible personal property tax return for January 1, 2016? ☐ Yes ☐ No
	If yes, list name and federal I.D. number of entity(ies) filing return(s):
15.	Is the corporation currently under audit by the Internal Revenue Service? $\ \square$ Yes $\ \square$ No
	If yes, enter years under audit
	If the Internal Revenue Service has made final and unappealable

adjustments to the corporation's taxable income which have not been reported to the department, check here □ and file an amended return. See 2015 Kentucky Corporation IncomeTax and LLET Return instructions for information regarding amended returns. Attach a

copy of the final determination to each amended return.