



For calendar year 2020 or tax years beginning (MM-DD-YY) ___ - ___ - 20___, and ending (MM-DD-YY) ___ - ___ - 20___

A LLET Exemption Code <div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px;"></div>	B FEIN/SSN _____ Name of LLC _____ <input type="checkbox"/> Change of Name Telephone Number _____	C Kentucky Corporation/LLET Account Number (Required) _____ State of Organization _____ Principal Business Activity in KY _____ Date of Organization _____ / _____ / _____ NAICS Code Number in KY _____
D Provider 3-Factor Apportionment Code <div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px;"></div>	Number and Street _____ City _____ State _____ ZIP Code _____	
E Check applicable boxes <input type="checkbox"/> Initial return <input type="checkbox"/> Change of accounting period <input type="checkbox"/> Qualified investment partnership <input type="checkbox"/> Final return (Complete Part IV) <input type="checkbox"/> Short-period return (Complete Part IV) <input type="checkbox"/> Amended return (Complete Part V)		

F Single Member is a: Kentucky Resident Non-Resident **If non-resident, LLC must also file Form 740NP-WH**

PART I – KENTUCKY NET DISTRIBUTABLE INCOME

1 Ordinary income (loss)	▶ 1	00
2 Net income (loss) from rental real estate activities	▶ 2	00
3 Net income (loss) from other rental activities	▶ 3	00
4 Interest income	▶ 4	00
5 Dividend income	▶ 5	00
6 Royalty income	▶ 6	00
7 Net short-term and long-term capital gain (loss). If net loss, do not include more than \$3,000.	▶ 7	00
8 IRC §1231 net gain (loss)	▶ 8	00
9 Other income (attach schedule)	▶ 9	00
10 Other deductions (attach schedule)	▶ 10	00
11 Total net distributable income (lines 1 through 9 less line 10)	▶ 11	00
12 Enter 100% or the apportionment fraction from Schedule A.	▶ 12	____ . ____ %

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PART II—LLET COMPUTATION

1	Schedule L, Section E, line 1 (Page 6)	▶ 1		00
2	Tax credit recapture	▶ 2		00
3	Total (add lines 1 and 2)	▶ 3		00
4	Nonrefundable LLET credit from Kentucky Schedule(s) K-1	▶ 4		00
5	Nonrefundable tax credits (attach Schedule TCS)	▶ 5		00
6	LLET liability (greater of line 3 less lines 4 and 5 or \$175 minimum)	▶ 6		00
7	Estimated tax payments	▶ 7		00
8	Certified rehabilitation tax credit	▶ 8		00
9	Film industry tax credit	▶ 9		00
10	Extension payment	▶ 10		00
11	Prior year's tax credit	▶ 11		00
12	LLET paid on original return	▶ 12		00
13	LLET overpayment on original return	▶ 13		00
14	Estimated Tax Penalty (attach Form 2220-K)	▶ 14		00
15	LLET and Estimated Tax Penalty due (lines 6, 13, and 14 less lines 7 through 12) OWE	▶ 15		00
16	LLET overpayment (lines 7 through 12 less lines 6,13, and 14)	▶ 16		00
17	Credited to 2020 interest	▶ 17		
18	Credited to 2020 penalty	▶ 18		
19	Credited to 2021 LLET	▶ 19		00
20	Amount to be refunded (line 16 less lines 17 through 19) REFUND	▶ 20		

PART III—LLET CREDIT FOR MEMBER

1	LLET liability (Part II, the total of lines 4 and 6)	▶ 1		00
2	Minimum tax	2		1 7 5 .00
3	Member's LLET credit (line 1 less line 2)	▶ 3		00



SCHEDULE Q—SINGLE MEMBER LIMITED LIABILITY COMPANY QUESTIONNAIRE

IMPORTANT: Questions 1 and 2 must be answered if this is the single member LLC's initial return or if a return was not filed under the same name and same federal I.D. number for the preceding year. **Failure to do so may result in a request for a delinquent return.**

1 Single member's (owner) name, address, and Social Security number or federal I.D. number

Name
FEIN ___-_____
Address

2 If a foreign limited liability company, enter the date qualified to do business in Kentucky.

___ / ___ / _____

Questions 3–7 must be completed by all single member limited liability companies (LLC).

3 The limited liability company's books are in care of:

Name
Address

4 Are disregarded entities included in this return?
 Yes **No**

If yes, attach **Schedule DE**.

5 Was the limited liability company a partner in a pass-through entity doing business in Kentucky for the tax year being reported? **Yes** **No**

If yes, list name and federal I.D. of the pass-through entity(ies).

A Name
FEIN ___-_____
B Name
FEIN ___-_____
C Name
FEIN ___-_____
D Name
FEIN ___-_____
E Name
FEIN ___-_____
F Name
FEIN ___-_____
G Name
FEIN ___-_____

6 Was the limited liability company doing business in Kentucky other than through its interest held in a pass-through entity doing business in Kentucky?
 Yes **No**

7 Was this return prepared on:
(a) cash basis
(b) accrual basis
(c) other _____



SCHEDULE L—LIMITED LIABILITY ENTITY TAX COMPUTATION

Check the box and complete Schedule L-C, Limited Liability Entity Tax—Continuation Sheet, if the single member limited liability company filing this tax return is a partner or member of a limited liability pass-through entity or general partnership doing business in Kentucky. Enter the total amounts from Schedule L-C in Section A of this schedule.

SECTION A—Computation of Kentucky Gross Receipts and Gross Profits

1(a) Gross receipts less returns and allowances	▶ 1(a)		00
(b) Kentucky statutory gross receipts reductions	▶ (b)		00
2 Adjusted gross receipts (line 1(a) less line 1(b))	▶ 2		00
3(a) Cost of goods sold (attach Schedule COGS)	▶ 3(a)		00
(b) Kentucky statutory cost of goods sold reductions	▶ (b)		00
4 Adjusted cost of goods sold (line 3(a) less line 3(b))	▶ 4		00
5 Gross profits (line 2 less line 4)	▶ 5		00

SECTION B—Computation of TOTAL Gross Receipts and Gross Profits

1 Adjusted gross receipts	▶ 1		00
2 Cost of goods sold (attach Schedule COGS)	▶ 2		00
3 Gross profits (line 1 less line 2)	▶ 3		00



If Section B, Line 1 or 3 is \$3,000,000 or less, SKIP Sections C and D and enter \$175 in Section E, Line 1 and then enter \$175 on page 2, Part II, Line 1. Otherwise, continue to Section C on the next page.



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SCHEDULE L—LIMITED LIABILITY ENTITY TAX COMPUTATION—continued

SECTION C—Computation of Gross Receipts LLET

1 If gross receipts from all sources (Section B, line 1) are greater than \$3,000,000, but less than \$6,000,000, enter the following:

$$\text{(Section A, line 2} \times 0.00095) - \left[\frac{\$2,850 \times (\$6,000,000 - \text{Section A, line 2})}{\$3,000,000} \right]$$

but in no case shall the result be less than zero.

▶ 1 00

2 If gross receipts from all sources (Section B, line 1) are \$6,000,000 or greater, enter the following: Section A, line 2 x 0.00095.

▶ 2 00

3 Enter the amount from line 1 or line 2.

▶ 3 00

SECTION D—Computation of Gross Profits LLET

1 If gross profits from all sources (Section B, line 3) are greater than \$3,000,000, but less than \$6,000,000, enter the following:

$$\text{(Section A, line 5} \times 0.0075) - \left[\frac{\$22,500 \times (\$6,000,000 - \text{Section A, line 5})}{\$3,000,000} \right]$$

but in no case shall the result be less than zero.

▶ 1 00

2 If gross profits from all sources (Section B, line 3) are \$6,000,000 or greater, enter the following: Section A, line 5 x 0.0075.

▶ 2 00

3 Enter the amount from line 1 or line 2.

▶ 3 00

SECTION E—Computation of LLET

1 Enter the lesser of Section C, line 3 or Section D, line 3 here and on Page 2, Part II, line 1. If less than \$175, enter the minimum of \$175 here and on Page 2, Part II, line 1.

▶ 1 00