2013KANSAS CORPORATION INCOME TAX

150013

DO NOT STAPLE 2 0 1 3 Name Employer's Identification Numbers (EINs) B. Business Activity Code (NAICS) (Enter both if applicable) EIN this entity: Number and Street of Principal Office C. Date Business Began in KS (mm/dd/yyyy) City State Zip Code D. Date Business Discontinued in KS (mm/dd/yyyy) FIN Federal Consolidated Parent: A. Method Used to Determine Income of Corporation in Kansas E. State and Month/Year of Incorporation (mm/yyyy) I. Enter your original federal due date if other than the 15th day of the 3rd 1. Activity wholly within Kansas - Single entity month 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) 4. Combined income method - Single corporation filing (Sch. K-121) G. Type of Federal Return Filed J. If any taxpayer information has 5. Combined income method - Multiple corporation filing (Sch. K-121) changed since the last return was 1. Separate 2. Consolidated 6. Qualified elective two-factor (K-120AS) Year qualified: _____ filed, please check this box. 7. Common carrier mileage (Enclose mileage apportionment schedule) H. Check the 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 2013 Kansas return: AMENDED 2013 Kansas return. Amended affects Amended federal Adjustment by NOTE: This form cannot be used for tax years prior to 2013. Kansas only the IRS tax return Taxes on or measured by income or fees or payments in lieu of income taxes (Part IV, line 2)..... 5. Other additions to federal taxable income (Schedule required) 7. Interest on U.S. government obligations (Part V, line 2) 8. IRC Section 78 and 80% of foreign dividends (schedule required) . . 9. Other subtractions from federal taxable income (schedule required) 12. Nonbusiness income -- Total company (schedule required)..... 14. Average percent to Kansas (Part VI, lines A, B, C and E; if 100% enter 100.0000) 15. Amount to Kansas (multiply line 13 by line 14)..... 17. Kansas expensing recapture (see instructions for Schedule K-120EX and enclose applicable schedules) . . 18. Kansas expensing deduction (see instructions for Schedule K-120EX and enclose applicable schedules) . . 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).....

21.	Combined report (Schedule K-121) or alternative/separate accounting income (separate schedule)	21						
22.	Kansas taxable income (subtract line 20 from line 19 or enter line 21, as applicable)	22						
23.	Normal tax (4% of line 22)							
24.	Surtax (3% of line 22 in excess of \$50,000)							
25.	Total tax (Add lines 23 and 24. If filing combined, use line 24 of K-121.).	25						
26.	Total nonrefundable credits (Part I, line 27; cannot exceed amount on line 25)	26						
27.	Balance (subtract line 26 from line 25; cannot be less than zero)	27						
28.	Estimated tax paid and amount credited forward (Part II, line 4) 28		If this is your <u>ORIGINAL</u>					
	Other tax payments (enclose separate schedule and any applicable K-19 forms)		Kansas return, skip lines 32 and 33 and					
30.	Amount paid with Kansas extension		continue to line 34.					
31.	Total of all other refundable credits (Part I, line 34)		If this is your AMENDED					
32.	Payment remitted with original return; see instructions		Kansas return, complete lines 32 and 33 before					
33.	Overpayment from original return (this figure is a subtraction; see instructions)		continuing to line 34.					
34.	Total prepaid credits (add lines 28 through 32 and subtract line 33)	34						
35.	BALANCE DUE (if line 27 exceeds line 34).	35						
36.	nterest							
37.	Penalty							
38.	Estimated tax penalty If annualizing to compute penalty, check this box							
39. ·	Total tax, interest & penalty due (add lines 35 through 38). Complete Form K-120V and enclose it with your payment.	39						
40.	OVERPAYMENT (if line 27 plus line 38 is less than line 34)	40						
41.	REFUND. Enter the amount of line 40 you wish to be refunded	41						
42. (CREDIT FORWARD. Enter the amount of line 40 (original return only) you wish to be applied to 2014 estimated tax. (Line 42 cannot exceed the total of lines 28, 29 and 30.)	42						
	I authorize the Director of Taxation or the Director's designee to discuss my K-120 and e	nele	neuros with my proparer					
	I declare under the penalties of perjury that to the best of my knowledge this is a true, correct		,					
		, -	·					
sig he			Date					
	Individual or firm signature of preparer Address and Phone Number	er	Date					
	Tax preparer's EIN (Employer Identification Number) or SSN (Social Security Number)							
	NOTE: You are not required to send a copy of your entire federal return. See							
	instructions for the list of federal forms required to accompany the state return.							

ı	PA	ART I - NONREFUNDABLE AND REFUNDABLE CREDITS (see instructions)
NONREFUNDABLE CREDITS		
	1.	Center for Entrepreneurship Credit (Enclose Schedule K-31)
	2.	Agritourism Liability Insurance Credit (Enclose Schedule K-33)
	3.	Business and Job Development Credit for carry forward use only (Enclose Schedule K-34)
	4.	Historic Preservation Credit (Enclose Schedule K-35).
	5.	Disabled Access Credit (Enclose Schedule K-37).
	6.	Swine Facility Improvement Credit (Enclose Schedule K-38).
	7.	Oil and Gas Well Plugging Credit (Enclose Schedule K-39).
	8.	Assistive Technology Contribution Credit (Enclose Schedule K-42)
	9.	Research and Development Credit (Enclose Schedule K-53).
	10.	Venture Capital Credit (Enclose Schedule K-55)
	11.	Seed Capital Credit (Enclose Schedule K-55).
	12.	High Performance Incentive Program Credit (Enclose Schedule K-59)
	13.	Community Service Contribution Credit (Enclose Schedule K-60)
Ì	14.	Alternative-Fuel Motor Vehicle Property Credit (Enclose Schedule K-62)
Ē	15.	Law Enforcement Training Center Credit for carry forward use only (Enclose Schedule K-72)
NONRE	16.	Petroleum Refinery Credit for carry forward use only (Enclose Schedule K-73)
	17.	Kansas National Guard and Reserve Employer Credit (Enclose Schedule K-74)
	18.	Single City Port Authority Credit (Enclose Schedule K-76)
	19.	Qualifying Pipeline Credit for carry forward use only (Enclose Schedule K-77)
	20.	BioMass-to-Energy Credit for carry forward use only (Enclose Schedule K-79)
	21.	Environmental Compliance Credit (Enclose Schedule K-81)
	22.	Storage and Blending Equipment Credit for carry forward use only (Enclose Schedule K-82)
	23.	Electric Cogeneration Facility Credit for carry forward use only (Enclose Schedule K-83)
	24.	Film Production Credit for carry forward use only (Enclose Schedule K-86)
	25.	Declared Disaster Capital Investment Credit for carry forward use only (Enclose Schedule K-87)
	26.	Farm Net Operating Loss (Enclose Schedule K-139F)
	27.	Total nonrefundable credits (Add lines 1 through 26. Enter total here and on line 26, page 2)
TS	28.	Telecommunications and Railroad Credit (Enclose Schedule K-36)
	29.	Child Day Care Assistance Credit (Enclose Schedule K-56)
FUNDABLE CREDITS	30.	Small Employer Healthcare Credit (Enclose Schedule K-57)
3LE	31.	Community Service Contribution Credit (Enclose Schedule K-60)
DAE	32.	Individual Development Account Credit (Enclose Schedule K-68)
N D	33.	Farm Net Operating Loss (Enclose Schedule K-139F)
出	34	Total refundable credits (Add lines 28 through 33. Enter total here and on line 31, page 2)

P	ART II - ADDITIONAL INFORMATION		150318				
1.	Did the corporation file a Kansas Income Tax return under the same name for the preceding year? Yes No If "no", enter previous name and EIN.	6.	If this is a final return for Kansas, state the reason. If the corporation was liquidated or dissolved, state the IRC section under which the corporation was liquidated.				
2.	Enter the address of the corporation's principal location in Kansas.	7.	7. If your federal taxable income has been redetermined for any privilegers that have not previously been reported to Kansas, check the applicable box(es) below and state the calendar, fiscal, or shoperiod year ending date. You are required to submit, under separat cover, the federal Forms 1139, 1120X, or Revenue Agent's Report				
3.	The corporation's books are in care of:		along with the Kansas amended return.				
	Name		Revenue Agent's Report Net Operating Loss				
	Address		Amended Return				
			Years ended				
	Telephone	8.	If you are registered with the Kansas Department of Revenue under				
4.	List each estimated tax payment and credit forward amount claimed on this return.		any other Kansas tax act, enter all registration or license numbers o the applicable line.				
	Date Amount Date Amount		a. Sales Tax				
			b. Compensating Use Tax				
			c. Withholding Tax				
5.	Has your corporation been involved in any reorganization during the		d. Other (specify)				
-	period covered by this return? Yes No						
	If "yes", enclose a detailed explanation.						
_ D	ART III - AFFILIATED CORPORATIONS DOING	C DI	ICINECC IN KANCAC				
_	ART III - AIT IEIATED CORT ORATIONS DOING	ОВС	JOINESS IN NANSAS				
_	Name of Corporation		Employer ID Number				
_							
_							
	(Enclose a separate shee	et for a	dditional corporations)				
P	ART IV - SCHEDULE OF TAXES						
•	nclude those taxes deducted on line 17 of the federal return. See instruction Taxes on or measured by income or fees or payments in lieu of income	,	(include federal environmental tax; itemize).				
2.	Total (Enter on line 3, page 1)						
	Total other taxes						
	Total taxes (Must equal line 17 of the federal return)						
_	,						
P	ART V - SCHEDULE OF INTEREST INCOME						
	nclude the interest from line 5 of the federal return)						
	U.S. interest income (describe type):						
2	Total (Enter on line 7, page 1)						
	Total other interest income.						
4.	Total interest income (Must equal line 5 of the federal return)	• • • • •					

K-120AS

KANSAS Corporation 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 3 ; ending				
Name a	as shown on Form K-120			Employer Identification	Number (EIN)		
— PAF	RT VI - APPORTIONMENT FORMULA	<u> </u>					
 Δ Dr	operty	WITHIN KA	ANSAS	TOTAL COMPANY			
	Value of owned real and tangible personal property used in the business at original cost	Beginning of Year	End of Year	Beginning of Year	End of Year	PERC WITH KANS	IIN
	Inventory Depreciable assets Land. Other tangible assets (Enclose schedule). Less: Construction in progress Total property to be averaged Average owned property (Beg. + End ÷ 2).						
2)						A	%
	nyroll (Those corporations qualified and utilizing the elective s area only during the first year of qualifying)	e two-factor formula	a must complete	Within Kansas	Total Company		
(3)	Wages, salaries and commissions Payroll expense included in cost of goods sold. Payroll expense included in repairs. Other wages and salaries. TOTAL PAYROLL (Enter on line 14B, page 1) (If qualified two-factor formula, do not carry this percentage to page	ed and utilizing the	elective			В	%
	de (Occasionalista la continua del Illinois)	<u> </u>					
	ales (Gross receipts, less returns and allowances)						
(2	Sales shipped from Kansas to: (a) The United States Government						
(3	Public Law 86-272)						
	Rents						
	Gross proceeds from tangible asset sales					С	%
				1	l		
D(1).	Total percent (Sum of lines A, B & C if qualified and utiliz	=				D(1)	 %
D(2).	Total percent (Sum of lines A & C if qualified and utilizing Average percent of either D(1) or D(2), whichever is app					E	%

PART VII - ADDITIONAL INFORMATION		150418					
Does the Kansas sales figure in Part VI include (1) all sales deliver from Kansas where purchaser is the U.S. Government and (2) sales delivered from Kansas to states in which this corporation immune from state income taxation under federal Public Law 86-2 (15 U.S.C.§ 381)? If not, please explain	all conducted a unitary busing is Yes No If complete list of the corporation o						
If you claim that part of your net income is assignable to busing done outside Kansas:	reported in returns or returns or reported in returns or	Are the amounts in the total company column the same a reported in returns or reports to other states under the Division of Income for Tax Purposes Act? Yes No please explain.					
 a. Enclose a list of all states in which this corporation is doing busin and filing state corporation income or franchise tax returns. 	ess						
PART VIII - AFFILIATED CORPORATIONS IN APPORTIONMENT SCHEDULE	CLUDED IN FORM K-120	DAS CORPORA	TION				
		Check if					
Name of Corporation	Employer Identification #	In Total Compan ctors	Within Kansas Factors				
	+						