





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

C Kentucky Corporation/LLET

A Entity Type	B _{FEIN/SSN}	C Kentucky Corporation/LLET Account Number (Required)	
 Partnership S Corporation General Partnership 	Name of Pass-Through Entity	Name Telephone Number	
D LLET Exemption Code	Number and Street		State of Organization
	City	State ZIP Code	Date of Organization
E Income Tax Exemption Code	G Check applicable boxes □ Publicly traded partnership □ Initial r □ Qualified investment partnership □ Change	eturn e of accounting period	Principal Business Activity in KY
	LLC Amend	ed return (<i>Complete Part V</i>) beriod return (<i>Complete Part IV</i>) turn (<i>Complete Part IV</i>)	NAICS Code Number in KY
F Provider 3-Factor Apportionment Code	H K-1 and Owner Information		
	Schedule(s) K-1 Issued	Other Type of Owners	
	Resident Owners	Schedule(s) K-1 Received	
	Nonresident Owners		

PART I-ORDINARY INCOME (LOSS) COMPUTATION

1	Federal ordinary income (loss)	▶1	0 0			
A	DDITIONS TO FEDERAL ORDINARY INCOME					
2	State taxes based on net/gross income	▶2	0 0			
3	Federal depreciation (do not include IRC § 179 expense deduction)	▶3	0 0			
4	Related party expense (attach Schedule RPC)	▶4	0 0			
5	(Loss) from Form 4797 found on federal Form 1120S, line 4 or federal Form 1065, line 6	▶5	0 0			
6	Gain from Kentucky Form 4797, line 17	▶6	0 0			
7	Federal allowable depletion from Form 1120S, line 15 or Form 1065, line 17	▶7	0 0			
8	Enter additions to federal taxable income from Kentucky Schedule(s) K-1.	▶8	0 0			
0	FFICIAL USE ONLY					
P W 2		V A L				

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PART I-ORDINARY INCOME (LOSS) COMPUTATION-continued

9	Internal Revenue Code adjustments (see instructions)	▶9	0 0
10	Other additions (attach explanation)	▶ 10	0 0
11	Total (add lines 1 through 10)	▶ 11	0 0
รเ	BTRACTIONS FROM FEDERAL ORDINARY INCOME		
12	Federal work opportunity credit	▶12	0 0
13	Kentucky depreciation (do not include IRC § 179 expense deduction)	▶13	0 0
14	Gain from Form 4797 found on federal Form 1120S, line 4 or federal Form 1065, line 6	▶ 14	0 0
15	(Loss) from Kentucky Form 4797, line 17	▶15	0 0
16	Kentucky allowable depletion	▶16	0 0
17	Enter subtractions from federal taxable income from Kentucky Schedule(s) K-1.	▶ 17	0 0
18	Internal Revenue Code adjustments (see instructions)	▶18	0 0
19	Other subtractions (attach explanation)	▶19	0 0
20	Total subtractions (add lines 12 through 19)	▶20	0 0
21	Kentucky ordinary income (loss) (line 11 less line 20)	▶21	0 0

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PART II-LLET COMPUTATION

1	Schedule L, Section E, line 1 (Page 11)	▶ 1	0 0
2	Tax credit recapture	▶2	0 0
3	Total (add lines 1 and 2)	►3	0 0
4	Nonrefundable LLET credit from Kentucky Schedule	e(s) K-1 ►4	0 0
5	Nonrefundable tax credits (attach Schedule TCS)	▶5	0 0
6	LLET liability (greater of line 3 less lines 4 and 5 of \$175 minimum)	or ►6	0 0
7	Estimated tax payments	▶7	0 0
8	Certified rehabilitation tax credit	▶8	0 0
9	Film industry tax credit	▶9	0 0
10	Extension payment	▶10	0 0
11	Prior year's tax credit	▶ 11	0 0
12	Income tax overpayment from Part III, line 13	▶12	0 0
13	LLET paid on original return	▶13	0 0
14	LLET overpayment on original return	▶14	0 0
15	Estimated Tax Penalty (attach Form 2220-K)	▶15	0 0
16	LLET and Estimated Tax Penalty due (lines 6,14, and 15 less lines 7 through 13)	OWE ► 16	0 0
17	LLET overpayment (lines 7 through 13 less lines 6, and 15)	14, ▶17	0 0
18	Credited to 2020 income tax	▶18	0 0
19	Credited to 2020 interest	▶19	
20	Credited to 2020 penalty	▶20	
21	Credited to 2021 LLET	▶21	0 0
22	Amount to be refunded (line 17 less lines 18 through 21)	REFUND ► 22	



PART III-INCOME TAX COMPUTATION (For S-Corporations or Partnerships)

By checking the box, the Partnership elects to pay the tax on behalf of its partners due to an IRS audit per KRS 141.211(4).

		_	
1	Excess net passive income tax	▶1	0 0
2	Built-in gains tax	▶2	0 0
3	Tax installment on LIFO recapture	▶3	0 0
4	Total (add lines 1 through 3, but not less than zero)	►4	0 0
5	Estimated tax payments	▶5	0 0
6	Extension payment	▶6	0 0
7	Prior year's tax credit	▶7	0 0
8	LLET overpayment from Part II, line 18	▶8	0 0
9	Income tax paid on original return	▶9	0 0
10	Income tax overpayment on original return	▶ 10	0 0
11	Income tax due (lines 4 and 10 less	-	
	lines 5 through 9)	OWE ► 11	0 0
12	Income tax overpayment (lines 5 through 9 less	_	
	lines 4 and 10)	▶12	0 0
13	Credited to 2020 LLET	▶13	0 0
14	Credited to 2020 interest	▶14	
15	Credited to 2020 penalty	▶15	
16	Credited to 2021 corporation income tax	▶16	0 0
17	Amount to be refunded (line 10 less line - 10	_	
17	Amount to be refunded (line 12 less lines 13 through 16)	FUND ► 17	





PART IV-EXPLANATION OF FINAL RETURN AND/OR SHORT-PERIOD RETURN

□ Ceased operations in Kentucky

□ Change of ownership

□ Successor to previous business

□ Change in filing status

□ Merger

Other ___

PART V-EXPLANATION OF AMENDED RETURN CHANGES

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of Member Date Sign Title Here Name of Member (Please print) Signature of Preparer Date Paid Name of Preparer or Firm (Please print) ID Number **Preparer** Use May the DOR discuss this return with this preparer? Email and/or Telephone No.

Enclose	All supporting federal forms and schedules, including Federal Schedule(s) C, E, and/or F.		Kentucky Department of Revenue P. O. Box 856905 Louisville, KY 40285-6905		
Payment		With Payment	Kentucky Department of Revenue Frankfort, KY 40620-0021		



SCHEDULE Q-QUESTIONNAIRE

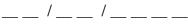
IMPORTANT: Questions 1 and 2 must be answered if this is the pass-through entity's initial return or if a return was not filed under the same name and same federal I.D. number for the preceding year. **Failure to do so may result in a request for a delinquent return.**

- 1 Indicate whether:
 - (a) □ new business
 - (b) □ successor to previously existing business which was organized as:
 - (1) \Box corporation;
 - (2) \Box partnership;
 - (3) \Box sole proprietorship; or,
 - (4) 🗆 other _____

If successor to previously existing business, give name, address, and federal I.D. number of the previous business organization.

Name
FEIN
Address

2 If a foreign pass-through entity, enter the date qualified to do business in Kentucky.



Questions 3–7 must be completed by all pass-through entities.

3 The pass-through entity's books are in care of:

Name			
Address			

Are disregarded entities included in this return?
 □ Yes □ No

If yes, attach Schedule DE.

5 For the taxable period being reported, was the pass-through entity a partner or member in a pass-through entity doing business in Kentucky?
□ Yes □ No

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

A	Name
	FEIN [_]
Б	Name
В	FEIN [_]
С	Name
	FEIN [_]
	Name
D	FEIN [_]
E	Name
	FEIN [_]
F	Name
	FEIN [_]
G	Name
U	FEIN [_]

- 6 For taxable period being reported, was the passthrough entity 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 K-OWNER'S SHARE OF INCOME, CREDITS, DEDUCTIONS, ETC.

SE	CTION A Distributive	Share Items	Total Amount
1	Kentucky ordinary income (loss) from trade or busing activites (Page 2, Part I, line 21)	ess ▶1	0 0
2	Net income (loss) from rental real estate activities (attach federal Form 8825)	▶2	0 0
3	(a) Gross income from other rental activities	►3(a)	0 0
	(b) Less expenses from other rental activities (attach schedule)	► (b)	0 0
	(c) Net income (loss) from other rental activities (line 3(a) less line 3(b))	► (C)	0 0
4	Portfolio income (loss):		
	(a) Interest income	►4(a)	0 0
	(b) Dividend income	► (b)	0 0
	(c) Royalty income	► (C)	0 0
	(d) Net short-term capital gain (loss) (attach federal Schedule D and Kentucky Schedule D, if applicab	le.) ► (d)	0 0
	(e) Net long-term capital gain (loss) (attach federal Schedule D and Kentucky Schedule D, if applicab	le.) ► (e)	0 0
	(f) Other portfolio income (loss) (attach schedule)	► (f)	0 0
5	Partnerships Only: Guaranteed payments to partners	▶5	0 0
6	IRC § 1231 net gain (loss) (other than due to casualty of theft)(attach federal Form 4797 and Kentucky Form 47		0 0
7	Other income (loss) (attach schedule)	▶7	0 0
8	Charitable contributions (attach schedule)	▶8	0 0
9	IRS § 179 expense deduction (attach federal Form 45 and Kentucky Form 4562)	62 ▶9	0 0
10	Deductions related to portfolio income (loss) (attach schedule)	▶10	0 0
11	Other deductions (attach schedule)	▶ 11	0 0
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SCHEDULE K-OWNER'S SHARE OF INCOME, CREDITS, DEDUCTIONS, ETC.-continued

SECTION A—continued		Distributive Share Items		Total Amount	
Inv	estment Interest				
12	(a) Interest expense on investment d	lebts	►12(a)		00
	(b)(1) Investment income included on S lines 4(a), 4(b), 4(c), and 4(f)	Section A,	►(b)(1)		00
	(b)(2) Investment expenses included on S	Section A, line 10	► (b)(2)		00
No	n-Refundable Tax Credits (see instructions)				
13	Enter the applicable tax credit:				
	(a)		► 13(a)		00
	(b)		► (b)		00
	(c)		► (C)		00
GE	NERAL PARTNERSHIPS ONLY—Refundable	Tax Credits			
14	Certified rehabilitation tax credit (attac Heritage Council certification(s))	h Kentucky	▶14		00
15	Film industry tax credit (attach Kentuck certification(s))	xy Film Office	▶15		00
Ot	her Items				
16	(a) Type of IRC §59(e)(2) expenditures(b) Amount of IRC §59(e)(2) expenditu		► 16(b)		00
17	Tax-exempt interest income		▶17		00
18	Other tax-exempt income		▶18		00
19	Nondeductible expenses		▶19		00
20	Property distributions (including cash) dividend distributions reported to you o		▶20		0 0
21	Supplemental information required to to each owner (attach schedule)	be reported	▶21		0 0
22	S-corporations only: Total dividend dis from accumulated earnings and profits		▶22		00



SCHEDULE K-OWNER'S SHARE OF INCOME, CREDITS, DEDUCTIONS, ETC.-continued

SECTION B-LLET Pass-through Items (Required)

1	Kentucky gross receipts from Schedule L, Section A,		
	line 2	▶1	0 0
2	Total gross receipts from Schedule L, Section B, line 1	▶2	0 0
3	Kentucky gross profits from Schedule L, Section A, line 5	▶3	0 0
4	Total gross profits from Schedule L, Section B, line 3	▶4	0 0
5	Limited liability entity tax (LLET) nonrefundable credit from page 3, Part II, the total of lines 4 and 6, less \$175	►5	0 0
SE	CTION C—Apportionment Pass-through Items		
1	Kentucky receipts from Schedule A, Part I, line 1	▶1	0 0
2	Total receipts from Schedule A, Part I, line 2	▶2	0 0
SE	CTION D—Apportionment for Providers (KRS 141.121(1)(e))		
1	Kentucky property from Schedule A, Part I, line 5	▶1	0 0
2	Total property from Schedule A, Part I, line 6	▶2	0 0
3	Kentucky payroll from Schedule A, Part I, line 8	▶3	0 0
4	Total payroll from Schedule A, Part I, line 9	▶4	0 0



SCHEDULE L-LIMITED LIABILITY ENTITY TAX COMPUTATION

Check the box and complete Schedule L-C, Limited Liability Entity Tax—Continuation Sheet, if the limited liability passthrough entity 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)	0 0
(b) Kentucky statutory gross receipts reductions	► (b)	0 0
2 Adjusted gross receipts (line 1(a) less line 1(b))	▶2	0 0
3(a) Cost of goods sold (attach Schedule COGS)	►3(a)	0 0
(b) Kentucky statutory cost of goods sold reductions	► (b)	0 0
4 Adjusted cost of goods sold (line 3(a) less line 3(b))	▶4	0 0
5 Gross profits (line 2 less line 4)	▶5	0 0
SECTION B—Computation of TOTAL Gross Receipts a	nd Gross Profits	

1	Adjusted gross receipts	▶1	0 0
2	Cost of goods sold (attach Schedule COGS)	▶2	0 0
3	Gross profits (line 1 less line 2)	▶3	0 0



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 3, Part II, Line 1. Otherwise, continue to Section C on the next page.



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:

(Section A, line 2 x 0.00095) - \$2,850 x (<u>\$6,000,000 - Section A, line 2</u>) \$3,000,000

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

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.

3 Enter the amount from line 1 or line 2.

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:

(Section A, line 5 x 0.0075) – \$22,500 x (<u>\$6,000,000 – Section A, line 5</u>) \$3,000,000

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

 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.

3 Enter the amount from line 1 or line 2.

SECTION E-Computation of LLET

Enter the lesser of Section C, line 3 or Section D, line 3		
here and on Page 3, Part II, line 1. If less than \$175, enter the minimum of \$175 here and on Page 3, Part II, line 1.	▶1	0 0

▶1

▶2

▶3

▶1

▶2

▶3

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