



KENTUCKY CORPORATION INCOMETAX AND LLET RETURN



For calendar year	2021 or tax years beginning (MM-DD-YY)	- 20 <u> </u> ,	and ending (M	M-DD	-YY)	- 20
A LLET Exemption Code	D _{FEIN}	E Kentucky Co Account No	orporation/LLET umber (Required)			_
	Name of Corporation		☐ Change of	Name	Telephone Number	
B Income Tax Exemption Code	Number and Street				State of Incorporation	
					Data di caracteri	
	City	te ZIP	Code		Date of Incorporation	
☐ Elective Consolidat Attach Form 722	-	oration/LLET /	Account Number	Princip	al Business Activity in KY	
C Provider 3-Factor						
Apportionment Code	G Check applicable boxes ☐ Amended return (Complete Part V) ☐ Initial return ☐ Change of accounting period ☐ Final return (Complete Part V) ☐ Short-period	return (Comp	plete Part IV)	NAICS	Code Number in KY	
PART I—TAX	ABLE INCOME COMPUTATION					
1 Federal tax	able income (Form 1120, line 28)	▶ 1				0 0
ADDITIONS:						
2 Interest inc	ome (state and local obligations)	▶2				0 0
3 State taxes	based on net/gross income	▶3				0 0
4 Depreciation	on adjustment	▶4				0 0
5 Deductions (see lines 22	s attributable to nontaxable income	▶5				0 0
•	rty expenses (attach Schedule RPC)	▶6				0 0
7 Dividend p	aid deduction (REIT)	▶7				0 0
8 Revenue A	gent Report (RAR)	▶8				0 0
9 Kentucky c	apital gain from Kentucky Schedule D, line 18	8 ▶9				0 0
10 Loss from	Form 4797 found on federal Form 1120, line S	▶ 10				0 0
11 Gain from	Kentucky Form 4797, line 17	▶ 11	1			0 0
12 Federal allo	owable depletion from Form 1120, line 21	▶ 12	2			0 0
OFFICIAL USE ONLY						
P		V				
W 2 0 4		A L				



PART I—TAXABLE INCOME COMPUTATION—continued

ADDITIONS—continued		
13 Federal contribution deductions from Form 1120, line 19	▶ 13	0 0
14 Terminal Railroad Corporation adjustments	▶14	0 0
15 Federal allowable passive activity loss	▶15	0 0
16 Federal taxable loss of all exempt corporations	▶16	0 0
17 Reserved for future use.	▶ 17 [0 0
18 Enter additions to federal taxable income from Kentucky Schedule(s) K-1	▶ 18 [0 0
19 Internal Revenue Code adjustments (see instructions)	▶19	0 0
20 Other additions (attach explanation)	▶20	0 0
21 Total (add lines 1 through 20)	▶21	0 0
SUBTRACTIONS	r	
22 Interest income (U.S. obligations)	▶22	0 0
23 Dividend income	▶23	0 0
24 Federal work opportunity credit	▶24	0 0
25 Depreciation adjustment	▶25	0 0
26 Revenue Agent Report (RAR)	▶26	0 0
27 Capital gain from Form 1120, line 8	▶ 27	0 0
28 Gain from Form 4797 found on federal Form 1120, line 9	▶28	0 0
29 Loss from Kentucky Form 4797, line 17	▶29	0 0
30 50% of the gross royalty income derived from any disposal of coal with a retained economic interest defined by IRC §631(c) and all IRC §272 expenses if	▶ 30 [0 0
the corporation elects not to use percentage depletion	► 3U [[0 0]

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PART I—TAXABLE INCOME COMPUTATION—continued

SUBTRACTIONS—continued		
31 Terminal Railroad Corporation adjustments	▶31	0 0
32 Kentucky allowable passive activity loss	▶32	0 0
33 Kentucky allowable depletion	▶33	0 0
34 Kentucky contribution deductions	▶34	0 0
35 Reserved for future use.	▶35	0 0
36 Federal taxable income of all exempt corporations	▶36	0 0
37 Enter subtractions from federal taxable income from Kentucky Schedule(s) K-1	▶37	0 0
38 Internal Revenue Code adjustments (see instructions)	▶38	0 0
39 Other subtractions (attach explanation)	▶39	0 0
40 Net income (line 21 less lines 22 through 39)	▶40	0 0
41 Taxable net income (see instructions)	▶41	0 0
42 Net operating loss deduction (NOLD)	▶ 42	0 0
43 Taxable net income after NOLD (line 41 less line 42)	▶43	0 0

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PART II—LLET COMPUTATION

1	Schedule L, Section E, line 1 (Page 9)	▶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(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 or \$175 minimum)	▶6	0 0
7	Withholding Tax (Form PTE-WH)	▶7	0 0
8	Estimated tax payments	▶8	0 0
9	Certified rehabilitation tax credit	▶9	0 0
10	Film industry tax credit	▶10	0 0
11	Extension payment	▶11	0 0
12	Prior year's tax credit	▶12	0 0
13	Income tax overpayment from Part III, line 17	▶13	0 0
14	LLET paid on original return	▶14	0 0
15	LLET overpayment on original return	▶15	0 0
16	Estimated Tax Penalty (attach Form 2220-K)	▶16	0 0
17	LLET and Estimated Tax Penalty Due (lines, 6, 15, and 16 less lines 7 through 14).	TAX DUE ▶ 17	0 0
18	LLET overpayment (lines 7 through 14 less lines 6, 15	5, and 16) ► 18	0 0
19	Credited to 2021 income tax	▶19	0 0
20	Credited to 2021 interest	▶20	
21	Credited to 2021 penalty	▶21	
22	Credited to 2022 LLET	▶22	0 0
23	Amount to be refunded (line 18 less lines 19 through 22)	REFUND ▶23	

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PART III—INCOMETAX COMPUTATION

1	Income tax (see instructions)	▶1	0 0
2	Tax credit recapture	▶2	0 0
3	Tax installment on LIFO recapture	▶3	0 0
4	Total (add lines 1 through 3)	▶4	0 0
5	Nonrefundable LLET credit from the Corporation LLET Credit Worksheet(s)(see instructions)	▶ 5	0 0
6	Nonrefundable LLET credit (Part II, line 6 less \$175)	▶ 6	0 0
7	Nonrefundable tax credits (attach Schedule TCS)	▶ 7	0 0
8	Net income tax liability (line 4 less lines 5 through 7, but not less than zero)	▶8	0 0
9	Estimated tax payments	▶9	0 0
10	Extension payment	▶10	0 0
11	Prior year's tax credit	▶11	0 0
12	LLET overpayment from Part II, line 19	▶12	0 0
13	Corporation income tax paid on original return	▶13	0 0
14	Corporation income tax overpayment on original return	► 14	0 0
15	Income tax due (lines 8 and 14 less lines 9 through 13)	15 ▶15	0 0
16	Income tax overpayment (lines 9 through 13 less lines 8 and 14)	▶ 16	0 0
17	Credited to 2021 LLET	▶17	0 0
18	Credited to 2021 interest	▶18	
19	Credited to 2021 penalty	▶19	
20	Credited to 2022 corporation income tax	▶20	0 0
21	Amount to be refunded (line 16 less lines 17 through 20)] ▶ 21	

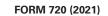




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PART IV_	.ΕΧΡΙ ΔΝΙΔΤΙΩΝΙ ΩΙ	F FINIAL RETLIR!	N AND/OR SHORT	-PERIOD RETURN
FANI IV —	·LAFLAMAHOM OI	FINAL NEI ON	N AND/OR SHORE	-F LNIOD NL I ONIX

□ с	eased operations in Kentucky change of ownership successor to previous business	□ Merger		status
PART V	-EXPLANATION OF AMENDED RETURN	N CHANC	GES	
OFFICER	INFORMATION			
Attach a s	schedule listing the name, home address, and Social	Secu	urity numb	er of the vice president, secretary, and treasurer.
	ttached officer information changed from the last return filed		☐ Yes	□ No
President				Address
	's Social Security Number			
Date Beca	ame President / /			
	nalties of perjury, I declare that I have examined this return, including true, correct, and complete. Declaration of preparer (other than taxpa			
	Signature of Officer			Date
Cian				///
Sign Here	Name of Officer (Please print)			Title
	Signature of Preparer			Date
Paid				//
Prepare	Name of Preparer or Firm (Please print)	Name of Preparer or Firm (Please print)		ID Number
Use	Email and/orTelephone No.			May the DOR discuss this return with this preparer? YES NO
Enclose	Include federal Form 1120 with all supporting schedules and statements.	Refund or No Payment		y Department of Revenue t, KY 40618-0010
Payment	Check Payable: Kentucky State Treasurer E-Pay Options: www.revenue.ky.gov	With Payment		y Department of Revenue t, KY 40620-0021



FEIN



SCHEDULE Q-QUESTIONNAIRE

IMPORTANT: Questions 1 and 2 must be answered if this is the corporation'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.**

	Indicate whether: (a) □ new business, (b) □ successor to previously existing business which was organized as: (1) □ corporation (2) □ partnership (3) □ sole proprietorship (4) □ other
	If successor to previously existing business, give name, address, and federal I.D. number of the previous business organization.
1	Name
 -	FEIN
	Address
2	If a foreign corporation, enter the date qualified to do business in Kentucky.
	/ /
Qu	estions 3–10 must be completed by all corporations.
3	
	The corporation's books are in care of:
1	The corporation's books are in care of: Name
H	·
H	Name
H	Name
H	Name
,	Name Address Are disregarded entities included in this return?
,	Address Are disregarded entities included in this return?
4	Address Are disregarded entities included in this return? Yes No If yes, attach Schedule DE. Was the corporation 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.
4	Are disregarded entities included in this return? Yes No If yes, attach Schedule DE. Was the corporation 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).
4	Are disregarded entities included in this return? Yes No If yes, attach Schedule DE. Was the corporation 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). Name FEIN Name

6	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	Did the corporation at any time during the taxable year own more than 50 percent (50%) of the voting stock of another corporation that is part of a unitary business per KRS 141.202(2)(f)?
	If yes, list name and federal I.D. number of the entity.
	Name
	FEIN
8	Was more than 50 percent (50%) of the corporation's voting stock owned by any corporation that is part of a unitary business per KRS 141.202(2)(f)? \Box Yes \Box No
	If yes, list name and federal I.D. number of each entity.
	If more than 3 companies, attach a supporting statement.
A	Name
	FEIN
_	Name
В	FEIN
	Name
С	FEIN
9	The federal tax return attached to this Kentucky tax return is: a pro forma federal tax return a copy of the federal tax return filed with the Internal Revenue Service.
10	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 EntityTax—Continuation Sheet, if the corporation 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.					
SE	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)				
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)				
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			
SE	CTION 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 4, 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 gre \$3,000,000, but less than \$6,000,000, enter the following:	ater tha	า
	(Section A, line 2 x 0.00095) – \$2,850 x (\$6,000,000 – Section A, line 2) \$3,000,000		
	but in no case shall the result be less than zero.	▶1	0 0
2	If gross receipts from all sources (Section B, line 1) are \$6,000,000 or greater, enter the following: Section A,	▶ 2	
	line 2 x 0.00095.	~ 2	0 0
3	Enter the amount from line 1 or line 2.	▶3	0 0
S	ECTION 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 (\$6,000,000 – Section A, line 5) \$3,000,000		
	but in no case shall the result be less than zero.	▶1	0 0
2	If gross profits from all sources (Section B, line 3) are \$6,000,000 or greater, enter the following: Section A,	. 0	
	line 5 x 0.0075.	▶2	0 0
3	Enter the amount from line 1 or line 2.	▶3	0 0
S	ECTION E—Computation of LLET		
1	Enter the lesser of Section C, line 3 or Section D, line 3		
	here and on Page 4, Part II, line 1. If less than \$175, enter the minimum of \$175 here and on Page 4, Part II, line 1.	▶ 1	0 0