KANSAS CORPORATION INCOME TAX

D	O NOT STAPLE For the taxable year beginning / / /	2 _0 _1 _2 ; ending /	_/
	Name	B. Business Activity Code (NAICS)	Employer's Identification Numbers (EINs) (Enter both if applicable)
	Number and Street of Principal Office	C. Date Business Began in KS (mm/dd/yyyy)	EIN this entity:
NOL	City State Zip Code	D. Date Business Discontinued in KS (mm/dd/yyy	y) EIN Federal Consolidated Parent:
TAXPAYER INFORMAT	A. Method Used to Determine Income of Corporation in Kansas 1. Activity wholly within Kansas - Single entity 2. Activity wholly within Kansas - Consolidated 3. Single entity apportionment method (K-120AS) 4. Combined income method - Single corporation filing (Sch. K-121) 5. Combined income method - Multiple corporation filing (Sch. K-121) 6. Qualified elective two-factor (K-120AS) Year qualified: 7. Common carrier mileage (Enclose mileage apportionment schedule) 8. Alternative or separate accounting (Enclose letter of authorization & schedule)	E. State and Month/Year of Incorporation (mm/yy) F. State of Commercial Domicile G. Type of Federal Return Filed 1. Separate 2. Consolidated H. Check the box if you have submitted a Kansas Form K-120EL?	J. If any taxpayer information has changed since the last return was filed, please check this box.
	Mark this box if you are filing this as an AMENDED 2012 Kansas return. NOTE: This form cannot be used for tax years prior to 2012.	Reason for amending your 2012 Amended affects Kansas only Adjutted	istment by Amended federal
1.	Federal taxable income		1
2.	Total state and municipal interest	2	
	Taxes on or measured by income or fees or payments in lieu of income taxes (Part IV, line 2)	3	
4.	Federal net operating loss deduction	4	
5.	Other additions to federal taxable income (Schedule required)	5	
6.	Total additions to federal taxable income (Add lines 2, 3, 4 & 5)		
7.	Interest on U.S. government obligations (Part V, line 2)	7 -	
8.	IRC Section 78 and 80% of foreign dividends (Schedule required)	8	
9.	Other subtractions from federal taxable income (Schedule required)	9	
10.	Total subtractions from federal taxable income (Add lines 7, 8 & 9)		10 _
11.	Net income before apportionment (Add line 1 to line 6. then subtract li	ne 10)	11 -
12.	Nonbusiness income Total company (Schedule required)		12 .
13.	Apportionable business income (Subtract line 12 from line 11)		13
14.	Average percent to Kansas (Part VI, lines A, B, C, & E; if 100% enter 100.0000)	cc	14
15.	Amount to Kansas (Multiply line 13 by line 14)		15 .
16.	Nonbusiness income - Kansas (Schedule required)		16 _
17.	Kansas expensing deduction (See instructions for Schedule K-120EX	and enclose applicable schedules)	17 -
18.	Kansas net income before NOL deduction (Add lines 15 & 16, then so	ubtract line 17)	18
19.	Kansas net operating loss deduction (Schedule required)		19
20	Combined report (Schodule K 121) or alternative/congrete accounting	income (Separate schedule)	30

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21.	. Kansas taxable income (Subtract line 19 from line 18 or enter line 20, as applicable)	21	
22.	. Normal tax (4% of line 21)		
23.	. Surtax (3% of line 21 in excess of \$50,000)		
24.	. Total tax (Add lines 22 and 23. If filing combined, use line 23 of K-121.)	24	
25.	. Total nonrefundable credits (Part I, line 27; cannot exceed amount on line 24)	25	
26.	Balance (Subtract line 25 from line 24; cannot be less than zero).	26	
27.	. Estimated tax paid and amount credited forward (Part II, line 4) 27		If this is your <u>ORIGINAL</u>
28.	Other tax payments (Enclose separate schedule and any applicable K-19 forms)		Kansas return, skip lines 31 and 32 and continue
29.	. Amount paid with Kansas extension		to line 33.
30.	. Total of all other refundable credits (Part I, line 37)		If this is your AMENDED
31.	. Payment remitted with original return; see instructions		Kansas return, complete lines 31 and 32 before
32.	Overpayment from original return (This figure is a subtraction; see instructions)		continuing to line 33.
33.	. Total prepaid credits (Add lines 27 through 31 and subtract line 32)	33	
34.	BALANCE DUE (If line 26 exceeds line 33)	34	
35.	. Interest		
36.	. Penalty		
37.	Estimated tax penalty If annualizing to compute penalty, check this box 37		
38.	. Total tax, interest & penalty due (Add lines 34 through 37). Complete Form K-120V and enclose it with your paymen	nt. 38	
39.	OVERPAYMENT. (If line 26 plus line 37 is less than line 33)	39	
40.	REFUND. Enter the amount of line 39 you wish to be refunded	40	
41.	CREDIT FORWARD. Enter the amount of line 39 (original return only) you wish to be applied to 2013 estimated tax. (Line 41 cannot exceed the total of lines 27, 28 and 29)	1	
	I authorize the Director of Taxation or the Director's designee to discuss my K-120	and encl	osures with my preparer.
	I declare under the penalties of perjury that to the best of my knowledge this is a true,	correct, a	and complete return.
si	gn Signature of officer Title		Date
	ere		
	Individual or firm signature of preparer Address and Phone I	Number	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.		

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	1.	Center for Entrepreneurship Credit (Enclose Schedule K-31; see instructions)	•
	2.	Agritourism Liability Insurance Credit (Enclose Schedule K-33; see instructions)	
	3.	Business and Job Development Credit for carry forward use only (Enclose Schedule K-34; see instructions)	
	4.	Historic Preservation Credit (Enclose Schedule K-35; see instructions)	
	5.	Disabled Access Credit (Enclose Schedule K-37; see instructions)	
	6.	Swine Facility Improvement Credit (Enclose Schedule K-38; see instructions)	
	7.	Oil and Gas Well Plugging Credit (Enclose Schedule K-39; see instructions)	
	8.	Assistive Technology Contribution Credit (Enclose Schedule K-42; see instructions)	
တ	9.	Research and Development Credit (Enclose Schedule K-53; see instructions)	
CREDITS	10.	Venture Capital Credit (Enclose Schedule K-55; see instructions).	•
H H	11.	Seed Capital Credit (Enclose Schedule K-55; see instructions).	
ш	12.	High Performance Incentive Program Credit (Enclose Schedule K-59; see instructions)	•
뒣	13.	Community Service Contribution Credit (Enclose Schedule K-60; see instructions)	
NDA	14.	Alternative-Fuel Motor Vehicle Property Credit (Enclose Schedule K-62; see instructions)	
REFU	15.	Law Enforcement Training Center Credit (Enclose Schedule K-72; see instructions)	
	16.	Petroleum Refinery Credit for carry forward use only (Enclose Schedule K-73; see instructions)	
N O N	17.	Kansas National Guard and Reserve Employer Credit (Enclose Schedule K-74; see instructions)	
	18.	Single City Port Authority Credit (Enclose Schedule K-76; see instructions)	
	19.	Qualifying Pipeline Credit for carry forward use only (Enclose Schedule K-77; see instructions)	
	20.	BioMass-to-Energy Credit for carry forward use only (Enclose Schedule K-79; see instructions)	
	21.	Environmental Compliance Credit (Enclose Schedule K-81; see instructions)	
	22.	Storage and Blending Equipment Credit for carry forward use only (Enclose Schedule K-82; see instructions)	
	23.	Electric Cogeneration Facility Credit for carry forward use only (Enclose Schedule K-83; see instructions)	
	24.	Film Production Credit (Enclose Schedule K-86; see instructions)	
	25.	Declared Disaster Capital Investment Credit for carry forward use only (Enclose Schedule K-87; see instr.)	
	26.	Farm Net Operating Loss (Enclose Schedule K-139F; see instructions)	•
	27.	Total nonrefundable credits (Enter on line 25, page 2)	
	20	Degional Foundation Contribution Credit (Foologe Schedule I/ 22) and instructions)	
	28.	T	•
S	29.	·	•
딢	30.	Child Day Care Assistance Credit (Enclose Schedule K-56; see instructions).	
S S	31.	· · · · · · · · · · · · · · · · · · ·	
Щ	32.	· · · · · · · · · · · · · · · · · · ·	•
AB	33.	, , , , , , , , , , , , , , , , , , ,	
REFUNDABLE CREDITS	34.	Historic Site Contribution Credit (Enclose Schedule K-75; see instructions)	
<u>Ш</u>	35.	· · · · · · · · · · · · · · · · · · ·	
œ	36.	,	•
	37.	Total refundable credits (Enter on line 30, 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. If your federal taxable income has been redetermined for any years that have not previously been reported to Kansas, cherapplicable box(es) below and state the calendar, fiscal, or period year ending date. You are required to submit, under septover, the federal Forms 1139, 1120X, or Revenue Agent's F						
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 unde					
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 or 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)					
٠.	period covered by this return? Yes No							
	If "yes", enclose a detailed explanation.							
_	ART III - AFFILIATED CORPORATIONS DOING	- DI	ICINITCO IN IZANGAO					
_	ART III - AFFILIATED CORPORATIONS DOING	э БС	JSINESS IN RANSAS					
	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 instructions are considered 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	,, <u></u>					_
Name	as shown on Form K-120			Employer Identification	Number (EIN)		
							_
PAI	RT VI - APPORTIONMENT FORMULA	.					
A Pr	operty	WITHIN K	ANSAS	TOTAL C	OMPANY		_
	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	PERCEN WITHIN KANSAS	
	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)	Net annual rented property. Multiplied by 8	_					
	TOTAL PROPERTY (Enter on line 14A, page 1)					А	%
	nyroll (Those corporations qualified and utilizing the elective s area only during the first year of qualifying)	e two-factor formul	a must complete	Within Kansas	Total Company		
	Compensation of officers						
•	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	ed and utilizing the	elective				_
	two-factor formula, do not carry this percentage to page	1)				В	%
C S:	ales (Gross receipts, less returns and allowances)						
) Sales delivered or shipped to purchasers in Kansas:					•	
(.	(a) Shipped from outside Kansas						
	(b) Shipped from within Kansas						
(2) Sales shipped from Kansas to:						
`	(a) The United States Government						
	(b) Purchasers in a state where the taxpayer would not be	be taxable (e.g., ur	nder federal				
	Public Law 86-272)						
(3) Dividends						
	Interest						
	Rents						
	Royalties						
	Gains/losses from intangible asset sales						
	Gross proceeds from tangible asset sales						
	Other income (Enclose schedule)						
	TOTAL SALES (Enter on line 14C, page 1)					С	%
D(4)	Tatal passant (Cours of lines A. D. O. C. Cours III and A. D. O. C.	dana dana a feeter f				D(1)	%
D(1).	Total percent (Sum of lines A, B & C if qualified and utilizate percent (Sum of lines A, S, C if qualified and utilizing	-				D(2)	%
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	%

Ρ	ART VII - ADDITIONAL INFORMATION		1505	18
1.	Does the Kansas sales figure in Part VI include (1) all sales delivered from Kansas where purchaser is the U.S. Government and (2) all sales delivered from Kansas to states in which this corporation is immune from state income taxation under federal Public Law 86-272 (15 U.S.C.§ 381)?	Yes No I	ined that this corporationsiness with any other corporations, specify which state corations conducting the united that the corporations conducting the united that this corporation is corporated to the corporation that this corporation is corporated to the corporation that the corporation is conducted to the corporation that the corporation is corporated to the corporation that the corporation is conducted to the corporation that the corporation is conducted to the corporation that the corporation is conducted to the corporation that	ooration? e(s) and enclose a
	If not, please explain	Describe briefly the natural activities.		
		Are the amounts in the reported in returns or rule Division of Income for Tax please explain.	eports to other states	under the Uniform
2.	If you claim that part of your net income is assignable to business done outside Kansas: a. Enclose a list of all states in which this corporation is doing business and filing state corporation income or franchise tax returns.			
P	ART VIII - AFFILIATED CORPORATIONS INCL APPORTIONMENT SCHEDULE	UDED IN FORM K-12	20AS CORPORA	TION
			Check if i	ncluded:
	Name of Corporation	Employer Identification #	In Total Company Factors	Within Kansas Factors