

K-120S 2018

(Rev. 7-18)

Page 1 of 4

PARTNERSHIP OR
S CORPORATION INCOME TAX RETURN

000

154018

For the taxable year beginning 01012018 ending 12312018

BUSINESSNAMEXXXXXXXXXXXXXXXXXXXXX
INCAREOFORADDRESSLINEXXXXXXXXXXXXX
ADDRESSXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
CITYXXXXXXXXXXXXXXXXXXXX ST XXXXX-XXXX

Filing an AMENDED return? X EIN 187004320

A. This return is being filed for X 1. Partnership X 2. S Corporation

C. Business Activity Code G. State of Commercial Domicile KS

500000 H. Enter number of shareholders/partners included in Part II. 500000

B. Method Used to Determine Income of Corporation in Kansas

D. Date Business Began in KS I. Tax credits schedules are enclosed? X

X 1. Activity wholly within Kansas or single entity apportionment method

12312018

X 2. Combined income method (Enclose Sch K-121S)

E. Date Business Discontinued in KS 12312018

X 3. Common carrier mileage (Enclose mileage apportionment schedule)

12312018

X 4. Alternative or separate accounting (See instructions under "Definitions" and enclose letter of authorization & schedule)

F. State and Date of Incorporation KS 122018

X 5. Qualified elective two-factor (Part III) Year qualified 2018

K. Name or address has changed? X

L. Are you filing Form K-40C? X

M. Have you submitted Form K-120EL? X

1. Ordinary income from federal Schedule K -1999909999.99

12. Net income before apportionment (Add line 3 to line 7 and subtract line 11) -9999909999.19

2a. Total of all other income from federal Sch K -9299909999.99

13. Nonbusiness income - Total Company (Sch. req.) -9999909999.92

2b. Total of allowable deductions from federal Schedule K -9939909999.99

14. Apportionable business income (Subtract line 13 from line 12) -1199909999.99

3. Total federal income (Add lines 1 to line 2a and subtract line 2b) -9994909999.99

15. Average percent to Kansas (Part III, lines A, B, C & E) 100.0000

4. Total state and municipal interest (Sch Req) -9999509999.99

A 100.0000 B 100.0000 C 100.0000

5. Taxes on or measured by income or fees or payments in lieu of income taxes (Sch Req) -9999969999.99

16. Amount to Kansas (Multiply line 14 by line 15) -9999339999.99

6. Other additions to federal income (Sch Req) -9999997999.99

17. Nonbusiness income - Kansas (Sch Req) -9999904499.99

7. Total additions to federal income (Add lines 4, 5 & 6) -9999909899.99

18. Kansas Expensing Recapture (Sch Req) -9999909955.99

8. Interest on U.S. government obligations (Sch Req) -9999909999.99

19. Total Kansas income (Add lines 16, 17 and 18) -9999909999.66

9. IRC Sec. 78 and 80% of foreign dividends (Sch Req) -9999909990.99

20. Estimated tax paid and amount credited forward (Sep. Sch.) -7799909999.99

10. Other subtractions from federal income (Sch Req) -9922909999.99

21. Other tax payments (Sep. Sch.) -9988909999.99

11. Total subtractions from federal income (Add lines 8, 9 & 10) -9922909999.99

22. Refund (Add lines 20 & 21) -9988909999.99

X I authorize the Director of Taxation or the Director's designee to discuss my K-120S and any enclosures with my preparer.
I declare under the penalties of perjury that to the best of my knowledge and belief this is a true, correct, and complete return.

Officer Signature (Required) Title Date

Preparer Signature Preparer Phone Number Preparer SSN or EIN/PTIN Date

S-CORPORATION
PO BOX 758571
TOPEKA KS 66675-8571

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K-120S 2018

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H. Enter number of shareholders/partners included in Part II. 500000

B. Method Used to Determine Income of Corporation in Kansas

D. Date Business Began in KS

I. Tax credits schedules are enclosed? X

X 1. Activity wholly within Kansas or single entity apportionment method

12312018

J. Enter the original federal due date if other than 15th day of the 3rd month after the end of the tax year.

X 2. Combined income method (Enclose Sch K-121S)

E. Date Business Discontinued in KS

12312018

X 3. Common carrier mileage (Enclose mileage apportionment schedule)

12312018

K. Name or address has changed? X

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KS 122018

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A 100.0000 B 100.0000

C 100.0000

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X I authorize the Director of Taxation or the Director's designee to discuss my K-120S and any enclosures with my preparer.
I declare under the penalties of perjury that to the best of my knowledge and belief this is a true, correct, and complete return.

Officer
Signature
(Required)

Title

Date

Preparer
Signature

Preparer
Phone
Number

Preparer SSN
or EIN/PTIN

Date

S-CORPORATION
PO BOX 758571
TOPEKA KS 66675-8571

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PART I

ADDITIONAL INFORMATION

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. _____

2. Enter the address of the corporation's principal location in Kansas.

3. The corporation's books are in care of:

Name _____

Address _____

Telephone _____

4. Has your corporation been involved in any reorganization during the period covered by this return? ____ No ____ Yes If "yes", enclose a detailed explanation.

5. If your federal taxable income has been redetermined for any prior years that have not previously been reported to Kansas, check the applicable box(es) below and state the calendar, fiscal, or short period year ending date. You are required to submit, under separate cover, the federal Forms 1139, 1120X, or Revenue Agent's Report along with the Kansas amended return.

☐ Revenue Agent's Report

☐ Net Operating Loss

☐ Amended Return

Years ended _____

PART II

PARTNER'S OR SHAREHOLDER'S DISTRIBUTION OF INCOME

This schedule is to be completed for all partners or shareholders. If there are more than 12 partners or shareholders, you must complete a schedule similar to the schedule below and submit it with your return. Individual partners or shareholders complete columns 1 through 8. All other partners and shareholders complete columns 1 through 5.

| (1) Name and address of partner or shareholder | Check box if nonresident | (2) SSN or EIN | (3) Partner's or shareholder's percent of ownership | (4) Partner's profit percent or shareholder's applicable percentage |
|---------------------------------------------------|-----------------------------|-------------------|-----------------------------------------------------------|------------------------------------------------------------------------------|
| (a) | <input type="checkbox"/> | | | |
| (b) | <input type="checkbox"/> | | | |
| (c) | <input type="checkbox"/> | | | |
| (d) | <input type="checkbox"/> | | | |
| (e) | <input type="checkbox"/> | | | |
| (f) | <input type="checkbox"/> | | | |
| (g) | <input type="checkbox"/> | | | |
| (h) | <input type="checkbox"/> | | | |
| (i) | <input type="checkbox"/> | | | |
| (j) | <input type="checkbox"/> | | | |
| (k) | <input type="checkbox"/> | | | |
| (l) | <input type="checkbox"/> | | | |

See instructions for Nonresident Partner's or Shareholder's Computation of Columns 6, 7 and 8.

| (5) Income from Kansas sources. Kansas resident individuals: Multiply column 4 by line 12. Nonresident individuals: If income is earned only from Kansas sources multiply column 4 by line 12. If earned from inside and outside of Kansas, multiply column 4 by sum of lines 16 and 17. All other partners or shareholders: Multiply column 4 by sum of lines 16 and 17. | (6) Partner's or shareholder's portion of federal ordinary and other income (losses) and deductions. Multiply the percentage in column 4 by line 3. | (7) Partner's or shareholder's portion of total Kansas income. Multiply the percentage in column 4 by line 12. | (8) Partner's or shareholder's modification. See instructions. Enter result in Part A of Schedule S, Form K-40. |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|
| (a) | | | |
| (b) | | | |
| (c) | | | |
| (d) | | | |
| (e) | | | |
| (f) | | | |
| (g) | | | |
| (h) | | | |
| (i) | | | |
| (j) | | | |
| (k) | | | |
| (l) | | | |

KANSAS
Corporation Apportionment Schedule

154218

FOR USE BY CORPORATIONS APPORTIONING INCOME
(Corporations using the combined income method must use Schedule K-121S)

For the taxable year beginning

, ending

Name as shown on Form K-120

Employer Identification Number (EIN)

PART III**APPORTIONMENT FORMULA****A. Property**

| | WITHIN KANSAS | | TOTAL COMPANY | | PERCENT WITHIN KANSAS |
|-------------------------------------------------------------------------------------------|----------------------|----------------|----------------------|----------------|-----------------------------|
| | Beginning of Year | End of Year | Beginning of Year | End of Year | |
| (1) Value of owned real and tangible personal property used in business at original cost: | | | | | |
| 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 15A, page 1)..... | | | | | A % |

B. Payroll (Those corporations qualified and utilizing the elective two-factor formula must complete this area only during the first year of qualifying)

| | WITHIN KANSAS | TOTAL COMPANY | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------|-----|
| (1) Compensation of officers..... | | | |
| (2) Wages, salaries and commissions..... | | | |
| (3) Payroll expense included in cost of goods sold..... | | | |
| (4) Payroll expense included in repairs..... | | | |
| (5) Other wages and salaries..... | | | |
| TOTAL PAYROLL (Enter on line 15B, page 1) (If qualified and utilizing the elective two-factor formula, do not carry this percentage to page 1)..... | | | B % |

Sales (Gross receipts, less returns and allowances).....

| | | | |
|----------------------------------------------------------------------------------------------------------------|--|--|-----|
| (1) 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 taxable (e.g., under 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 RECEIPTS (Enter on line 15C, Page 1)..... | | | C % |

D(1). Total percent (Sum of lines A, B & C if qualified and utilizing three-factor formula)..... D(1) %

D(2). Total percent (Sum of lines A & C if qualified and utilizing two-factor formula)..... D(2) %

E. Average percent of either D(1) or D(2), whichever is applicable (Enter on line 15, page 1)..... E %

[illegible][illegible]