

K-120

Rev. 7-18

2018 CORPORATE INCOME TAX

000

151018

Page 1 of 6

For the taxable year beginning

01012018

ending

12312018

BUSINESSNAMEXXXXXXXXXXXXXXXXXXXXX
INCAREOFORADDRESSLINEXXXXXXXXXXXXX
ADDRESSXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
CITYXXXXXXXXXXXXXXXXXX ST XXXXX-XXXX

EIN this entity

134567890

EIN Federal Consolidated Parent

187004320

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: 2018

☒ 7. Common carrier mileage (Enclose mileage apportionment schedule)

☒ 8. Alternative or separate accounting (Enclose letter of authorization and schedule)

B. Business Activity Code

500000

C. Date Business Began in KS

12312018

D. Date Business Discontinued in KS

12312018

E. State and Month/Day/Year of Incorporation

KS 12312018

F. State of Commercial Domicile

KS

G. Type of Federal Return Filed:

☒ 1. Separate

☒ 2. Consolidated

H. Have you submitted Form K-120EL? ☒

I. Enter your original federal due date if other than 15th day of the 4th month after the end of the tax year.

01012018

J. Name or address has changed? ☒

☒ Filing an amended corporate income return. Reason for amended return:
Note: This form cannot be used for tax years prior to 2018.

☒ Amended affects Kansas only

☒ Adjustment by IRS

☒ Amended Federal return

1. Federal taxable income -1999909999.99

2. Total state and municipal interest -9299909999.99

3. Taxes on or measured by income or fees or payments in lieu of income taxes (Part IV, line 2) -9939909999.99

4. Federal net operating loss deduction -9994909999.99

5. Other additions to federal taxable income (Sch. req.) -9999509999.99

6. Total additions to federal taxable income (Add lines 2, 3, 4, & 5) -9999969999.99

7. Interest on U. S. government obligations (Part V, line 2) -9999997999.99

8. IRC Section 78 and 80% of foreign dividends (Sch. req.) -9999909899.99

9. Other subtractions from federal taxable income (Sch. req.) -9999909999.99

10. Total subtractions from federal taxable income (Add lines 7, 8, & 9) -9999909990.99

11. Net income before apportionment (Add line 1 to line 6 and subtract line 10) -9999909999.19

12. Nonbusiness income - Total company (Sch. req.) -9999909999.92

13. Apportionable business income (Subtract line 12 from line 11) -1199909999.99

14. Average percent to Kansas (Part VI, lines A, B, C, & E: if 100% enter 100.0000) 100.0000
A 100.0000 C 100.0000
B 100.0000

15. Amount to Kansas (Multiply line 13 by line 14) -9922909999.99

16. Nonbusiness income - Kansas (Sch. req.) -9999339999.99

17. Kansas Expensing Recapture (Sch. req.) -9999904499.99

18. Kansas Expensing Deduction (Sch. req.) -9999909955.99

19. Kansas net income before NOL deduction (Add lines 15, 16 and 17, then subtract line 18) -9999909999.66

20. Kansas net operating loss deduction (Sch. req.) -7799909999.99

21. Combined report (Schedule K-121) or alternative/separate accounting income (Sch. req.) -9988909999.99

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | 6 | 8 | 10 | 12 | 14 | 16 | 18 | 20 | 22 | 24 | 26 | 28 | 30 | 32 | 34 | 36 | 38 | 40 | 42 | 44 | 46 | 48 | 50 | 52 | 54 | 56 | 58 | 60 | 62 | 64 | 66 | 68 | 70 | 72 | 74 | 76 | 78 | 80 | 84 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | K-120 | | | | | | | | | | | | | | | | | | | | 2018 | | | | | | | | | | | | | | | | | | | | CORPORATE INCOME TAX | | | | | | | | | | | | | | | | | | | | 000 | | | | | | | | | | 151018 | | | | | | | | | | | 4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | Rev. 7-18 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 5 | | | | | | | | | | | | | | | | | | | | |
| 6 | Page 1 of 6 | | | | | | | | | | | | | | | | | | | | For the taxable year beginning | | | | | | | | | | | | | | | | | | | | 01012018 | | | | | | | | | | ending | | | | | | | | | | 12312018 | | | | | | | | | | | | | | | | | | | | 6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 | BUSINESSNAMEXXXXXXXXXXXXXXXXXXXXXXX | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | EIN this entity | | | | | | | | | | | | | | | | | | | | EIN Federal Consolidated Parent | | | | | | | | | | | | | | | | | | | | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9 | INCAREOFORADDRESSLINEXXXXXXXXXXXXXXXXXX | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 9 |
| 10 | ADDRESSXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | K34567890 | | | | | | | | | | | | | | | | | | | | K87004320 | | | | | | | | | | | | | | | | | | | | 10 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11 | CITYXXXXXXXXXXXXXXXXXX ST XXXXX-XXXX | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 11 |
| 12 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 12 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13 | A. Method Used to Determine Income of Corporation in Kansas | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | B. Business Activity Code | | | | | | | | | | | | | | | | | | | | G. Type of Federal Return Filed: | | | | | | | | | | | | | | | | | | | | 13 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 14 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15 | <input checked="" type="checkbox"/> 1. Activity wholly within Kansas - Single entity | | | | | | | | | | | | | | | | | | | | 500000 | | | | | | | | | | | | | | | | | | | | <input checked="" type="checkbox"/> 1. Separate | | | | | | | | | | | | | | | | | | | | 15 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 16 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17 | <input checked="" type="checkbox"/> 2. Activity wholly within Kansas - Consolidated | | | | | | | | | | | | | | | | | | | | C. Date Business Began in KS | | | | | | | | | | | | | | | | | | | | <input checked="" type="checkbox"/> 2. Consolidated | | | | | | | | | | | | | | | | | | | | 17 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 18 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19 | <input checked="" type="checkbox"/> 3. Single entity apportionment method (K-120AS) | | | | | | | | | | | | | | | | | | | | 12312018 | | | | | | | | | | | | | | | | | | | | H. Have you submitted Form K-120EL? <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | 19 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21 | <input checked="" type="checkbox"/> 4. Combined income method - Single corporation filing (Sch. K-121) | | | | | | | | | | | | | | | | | | | | D. Date Business Discontinued in KS | | | | | | | | | | | | | | | | | | | | I. Enter your original federal due date if other than 15th day of the 4th month after the end of the tax year. | | | | | | | | | | | | | | | | | | | | 21 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 22 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23 | <input checked="" type="checkbox"/> 5. Combined income method - Multiple corporation filing (Sch. K-121) | | | | | | | | | | | | | | | | | | | | 12312018 | | | | | | | | | | | | | | | | | | | | 01012018 | | | | | | | | | | | | | | | | | | | | 23 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 24 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 25 | <input checked="" type="checkbox"/> 6. Qualified elective two-factor (K-120AS) Year qualified: 2018 | | | | | | | | | | | | | | | | | | | | E. State and Month/Day/Year of Incorporation | | | | | | | | | | | | | | | | | | | | J. Name or address has changed? <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | 25 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 26 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 26 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 27 | <input checked="" type="checkbox"/> 7. Common carrier mileage (Enclose mileage apportionment schedule) | | | | | | | | | | | | | | | | | | | | KS 12312018 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 27 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 28 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 28 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 29 | <input checked="" type="checkbox"/> 8. Alternative or separate accounting (Enclose letter of authorization and schedule) | | | | | | | | | | | | | | | | | | | | F. State of Commercial Domicile | | | | | | | | | | | | | | | | | | | | KS | | | | | | | | | | | | | | | | | | | | 29 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 32 | <input checked="" type="checkbox"/> Filing an amended corporate income return. Reason for amended return: Note: This form cannot be used for tax years prior to 2018. | | | | | | | | | | | | | | | | | | | | <input checked="" type="checkbox"/> Amended affects Kansas only | | | | | | | | | | | | | | | | | | | | <input checked="" type="checkbox"/> Adjustment by IRS | | | | | | | | | | | | | | | | | | | | <input checked="" type="checkbox"/> Amended Federal return | | | | | | | | | | | | | | | | | | | | 32 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 33 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 33 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 34 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 34 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 35 | 1. Federal taxable income | | | | | | | | | | | | | | | | | | | | -1999909999.99 | | | | | | | | | | | | | | | | | | | | 12. Nonbusiness income - Total company (Sch. req.) | | | | | | | | | | | | | | | | | | | | -9999909999.92 | | | | | | | | | | | | | | | | | | | | 35 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 36 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 36 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 37 | 2. Total state and municipal interest | | | | | | | | | | | | | | | | | | | | -9299909999.99 | | | | | | | | | | | | | | | | | | | | 13. Apportionable business income (Subtract line 12 from line 11) | | | | | | | | | | | | | | | | | | | | -1199909999.99 | | | | | | | | | | | | | | | | | | | | 37 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 38 | 3. Taxes on or measured by income or fees or payments in lieu of income taxes (Part IV, line 2) | | | | | | | | | | | | | | | | | | | | -9939909999.99 | | | | | | | | | | | | | | | | | | | | 14. Average percent to Kansas (Part VI, lines A, B, C, & E: if 100% enter 100.0000) | | | | | | | | | | | | | | | | | | | | 100.0000 | | | | | | | | | | | | | | | | | | | | 38 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 39 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 39 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 40 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | A 100.0000 C 100.0000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 40 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 41 | 4. Federal net operating loss deduction | | | | | | | | | | | | | | | | | | | | -9994909999.99 | | | | | | | | | | | | | | | | | | | | B 100.0000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 41 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 42 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 42 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 43 | 5. Other additions to federal taxable income (Sch. req.) | | | | | | | | | | | | | | | | | | | | -9999509999.99 | | | | | | | | | | | | | | | | | | | | 15. Amount to Kansas (Multiply line 13 by line 14) | | | | | | | | | | | | | | | | | | | | -9922909999.99 | | | | | | | | | | | | | | | | | | | | 43 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 44 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 44 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 45 | 6. Total additions to federal taxable income (Add lines 2, 3, 4, & 5) | | | | | | | | | | | | | | | | | | | | -9999969999.99 | | | | | | | | | | | | | | | | | | | | 16. Nonbusiness income - Kansas (Sch. req.) | | | | | | | | | | | | | | | | | | | | -9999339999.99 | | | | | | | | | | | | | | | | | | | | 45 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 46 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 46 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 47 | 7. Interest on U. S. government obligations (Part V, line 2) | | | | | | | | | | | | | | | | | | | | -9999997999.99 | | | | | | | | | | | | | | | | | | | | 17. Kansas Expensing Recapture (Sch. req.) | | | | | | | | | | | | | | | | | | | | -9999904499.99 | | | | | | | | | | | | | | | | | | | | 47 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 48 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 48 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 49 | 8. IRC Section 78 and 80% of foreign dividends (Sch. req.) | | | | | | | | | | | | | | | | | | | | -9999909899.99 | | | | | | | | | | | | | | | | | | | | 18. Kansas Expensing Deduction (Sch. req.) | | | | | | | | | | | | | | | | | | | | -9999909955.99 | | | | | | | | | | | | | | | | | | | | 49 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 51 | 9. Other subtractions from federal taxable income (Sch. req.) | | | | | | | | | | | | | | | | | | | | -9999909999.99 | | | | | | | | | | | | | | | | | | | | 19. Kansas net income before NOL deduction (Add lines 15, 16 and 17, then subtract line 18) | | | | | | | | | | | | | | | | | | | | -9999909999.66 | | | | | | | | | | | | | | | | | | | | 51 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 52 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 52 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 53 | 10. Total subtractions from federal taxable income (Add lines 7, 8, & 9) | | | | | | | | | | | | | | | | | | | | -9999909990.99 | | | | | | | | | | | | | | | | | | | | 20. Kansas net operating loss deduction (Sch. req.) | | | | | | | | | | | | | | | | | | | | -7799909999.99 | | | | | | | | | | | | | | | | | | | | 53 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 54 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 54 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 55 | 11. Net income before apportionment (Add line 1 to line 6 and subtract line 10) | | | | | | | | | | | | | | | | | | | | -9999909999.19 | | | | | | | | | | | | | | | | | | | | 21. Combined report (Schedule K-121) or alternative/separate accounting income (Sch. req.) | | | | | | | | | | | | | | | | | | | | -9988909999.99 | | | | | | | | | | | | | | | | | | | | 55 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 56 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 56 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 57 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 57 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 58 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 58 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 59 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 59 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 60 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 60 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 61 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 61 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 62 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 62 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 63 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 63 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | 6 | 8 | 10 | 12 | 14 | 16 | 18 | 20 | 22 | 24 | 26 | 28 | 30 | 32 | 34 | 36 | 38 | 40 | 42 | 44 | 46 | 48 | 50 | 52 | 54 | 56 | 58 | 60 | 62 | 64 | 66 | 68 | 70 | 72 | 74 | 76 | 78 | 80 | 84 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 65 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 65 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

TESTMELXXXXX A TESTWATERSXXXXXXXXXXXX

134007890

| | | | |
|---|----------------|--|----------------|
| 22. Kansas taxable income (Subtract line 20 from line 19 or enter line 21, as applicable) | -9959909999.99 | 33. Overpayment from original return (This figure is a subtraction; see instructions) | 22491954222.00 |
| 23. Normal tax (4% of line 22) | -3191954233.00 | 34. Total prepaid credits (Add lines 28-32 and subtract line 33) | 22591954222.00 |
| 24. Surtax (3% of line 22 in excess of \$50,000) | -1191954234.00 | 35. Balance due (If line 27 exceeds line 34) | -2691954222.00 |
| 25. Total tax (Add lines 23 and 24. If filing combined, use line 24 of K-121.) | -1191954236.00 | 36. Interest | -2791954222.00 |
| 26. Total nonrefundable credits (Part I, line 27; cannot exceed amount on line 25) | -1191954237.00 | 37. Penalty | -2891954222.00 |
| 27. Balance (Subtract line 26 from line 25; cannot be less than zero) | -1191954238.00 | 38. Estimated tax penalty | -2299195422.00 |
| 28. Estimated tax paid and amount credited forward (Part II, line 4) | -1191954231.00 | If annualizing to compute penalty, check this field | X |
| 29. Other tax payments (enclose separate schedule) | -0191954212.00 | 39. Total tax, interest & penalty due (Add lines 35-38) Complete Form K-120V & enclose it with your payment | -3319195422.00 |
| 30. Amount paid with Kansas extension | -1191954211.00 | 40. Overpayment (If line 27 plus line 38 is less than line 34) | -3329195422.00 |
| 31. Total of all other refundable credits (Part I, line 34) | -1919542112.00 | 41. Refund. Enter the amount of line 40 you wish to be refunded | -3339195422.00 |
| 32. Payments remitted with original return (See instructions) | -3191954211.00 | 42. Credit Forward. Enter the amount of line 40 (original return only) you wish to apply to 2019 estimated tax. (Line 42 cannot exceed the total of lines 28, 29 and 30) | -3349195422.00 |

☒ I authorize the Director of Taxation or the Director's designee to discuss my K-120 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
SignaturePreparer
Phone
NumberPreparer SSN
or EIN/PTIN

P03465080

Date

K-120

2018

CORPORATE INCOME TAX

000

151118

Rev. 7-18

Page 2 of 6

TESTMELXXXXX A TESTWATERSXXXXXXXXXX

K34007890

22. Kansas taxable income (Subtract line 20 from line 19 or enter line 21, as applicable) -9959909999.99

33. Overpayment from original return (This figure is a subtraction; see instructions) 22491954222.00

23. Normal tax (4% of line 22) -3191954233.00

34. Total prepaid credits (Add lines 28-32 and subtract line 33) 22591954222.00

24. Surtax (3% of line 22 in excess of \$50,000) -1191954234.00

35. Balance due (If line 27 exceeds line 34) -2691954222.00

25. Total tax (Add lines 23 and 24. If filing combined, use line 24 of K-121.) -1191954236.00

36. Interest -2791954222.00

26. Total nonrefundable credits (Part I, line 27; cannot exceed amount on line 25) -1191954237.00

37. Penalty -2891954222.00

27. Balance (Subtract line 26 from line 25; cannot be less than zero) -1191954238.00

38. Estimated tax penalty -2299195422.00

28. Estimated tax paid and amount credited forward (Part II, line 4) -1191954231.00

If annualizing to compute penalty, check this field X

29. Other tax payments (enclose separate schedule) -0191954212.00

39. Total tax, interest & penalty due (Add lines 35-38) Complete Form K-120V & enclose it with your payment -3319195422.00

30. Amount paid with Kansas extension -1191954211.00

40. Overpayment (If line 27 plus line 38 is less than line 34) -3329195422.00

31. Total of all other refundable credits (Part I, line 34) -1919542112.00

41. Refund. Enter the amount of line 40 you wish to be refunded -3339195422.00

32. Payments remitted with original return (See instructions) -3191954211.00

42. Credit Forward. Enter the amount of line 40 (original return only) you wish to apply to 2019 estimated tax. (Line 42 cannot exceed the total of lines 28, 29 and 30) -3349195422.00

X I authorize the Director of Taxation or the Director's designee to discuss my K-120 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 P03465080 Date

CORPORATE INCOME TAX
PO BOX 758571
TOPEKA KS 66675-8571

For Office Use Only

PART I - NONREFUNDABLE CREDITS

| | |
|---|----------------|
| 1. Center for Entrepreneurship Credit (Enclose Schedule K-31; see instructions)..... | 12491954222.00 |
| 2. Agritourism Liability Insurance Credit (Enclose Schedule K-33; See instructions)..... | 22591954222.00 |
| 3. Business and Job Development Credit - for carry forward use only (Enclose Schedule K-34; See instructions) | 32691954222.00 |
| 4. Historic Preservation Credit (Enclose Schedule K-35; See instructions) | 42791954222.00 |
| 5. Disabled Access Credit (Enclose Schedule K-37; See instructions) | 52891954222.00 |
| 6. Swine Facility Improvement Credit (Enclose Schedule K-38; See instructions)..... | 62299195422.00 |
| 7. Oil and Gas Well Plugging Credit (Enclose Schedule K-39; See instructions)..... | 73319195422.00 |
| 8. Assistive Technology Contribution Credit (Enclose Schedule K-42; See instructions)..... | 83329195422.00 |
| 9. Research and Development Credit (Enclose Schedule K-53; See instructions)..... | 92491954222.00 |
| 10. Venture Capital Credit - for carryforward use only (Enclose Schedule K-55; See instructions) | 10591954222.00 |
| 11. Seed Capital Credit - for carryforward use only (Enclose Schedule K-55; See instructions)..... | 11691954222.00 |
| 12. High Performance Incentive Program Credit (Enclose Schedule K-59; See instructions) | 12791954222.00 |
| 13. Community Service Contribution Credit (Enclose Schedule K-60; See instructions)..... | 13891954222.00 |
| 14. Alternative-Fueled Motor Vehicle Property Credit (Enclose Schedule K-62; See instructions) | 14299195422.00 |
| 15. Low Income Student Scholarship Credit (Enclose Schedule K-70; see instructions)..... | 15319195422.00 |
| 16. Law Enforcement Training Center Credit - for carry forward use only (Enclose Schedule K-72; see instructions)..... | 15319195422.00 |
| 17. Petroleum Refinery Credit - for carry forward use only (Enclose Schedule K-73; see instructions)..... | 16329195422.00 |
| 18. Kansas National Guard and Reserve Employer Credit (Enclose Schedule K-74; see instructions) | 17491954222.00 |
| 19. Single City Port Authority Credit (Enclose Schedule K-76; see instructions) | 18591954222.00 |
| 20. Qualifying Pipeline Credit - for carry forward use only (Enclose Schedule K-77; see instructions)..... | 19691954222.00 |
| 21. BioMass-to-Energy Credit - for carry forward use only (Enclose Schedule K-79; see instructions) | 20791954222.00 |
| 22. Environmental Compliance Credit (Enclose Schedule K-81; see instructions) | 21891954222.00 |
| 23. Storage and Blending Equipment Credit - for carry forward use only (Enclose Schedule K-82; see instructions)..... | 22299195422.00 |
| 24. Electric Cogeneration Facility Credit - for carry forward use only (Enclose Schedule K-83; see instructions)..... | 23319195422.00 |
| 25. Declared Disaster Capital Investment Credit - for carry forward use only (Enclose Schedule K-87; see instructions) | 26591954222.00 |
| 26. Farm Net Operating Loss (Enclose Schedule K-139F; see instructions) | 27691954222.00 |
| 27. Total nonrefundable credits (Enter on line 26, page 2) | 28791954222.00 |

REFUNDABLE CREDITS

| | |
|---|----------------|
| 28. Telecommunications Credit (Enclose Schedule K-36; See instructions)..... | 12491954222.00 |
| 29. Child Day Care Assistance Credit (Enclose Schedule K-56; See instructions)..... | 22591954222.00 |
| 30. Small Employer Healthcare Credit (Enclose Schedule K-57; See instructions)..... | 32691954222.00 |
| 31. Community Service Contribution Credit (Enclose Schedule K-60; See instructions)..... | 42791954222.00 |
| 32. Individual Development Account Credit (Enclose Schedule K-68; See instructions) | 52891954222.00 |
| 33. Farm Net Operating Loss (Enclose Schedule K-139F; See instructions)..... | 62299195422.00 |
| 34. Total refundable credits (Enter on line 31, page 2) | 73319195422.00 |

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. List each estimated tax payment and credit forward amount claimed on this return.

| Date | Amount | Date | Amount |
|------|--------|------|--------|
| | | | |
| | | | |
| | | | |

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

6. If this is a final return for Kansas, please state the reason. If the corporation was liquidated or dissolved, state the IRC section under which the corporation was liquidated.

7. If your federal taxable income has been redetermined for any prior year(s) 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 (Form K-120 or K-120X, whichever is applicable).

☐ Revenue Agent's Report

□ Net Operating Loss

☐ Amended Return

Years ended

8. If you are registered with the Kansas Department of Revenue under any other Kansas tax act, enter all registration or license numbers on the applicable line:

a. Sales Tax

b. Compensating Use Tax

c. Withholding Tax

d. Other (specify) _____

PART III AFFILIATED CORPORATIONS DOING BUSINESS IN KANSAS

(Enclose a separate sheet for additional corporations)

[illegible]

PART IV SCHEDULE OF TAXES

(Include those taxes deducted on line 17 of the federal return. See instructions.)

1. Taxes on or measured by income or fees or payments in lieu of income taxes. (Include federal environmental tax: itemize)

| | |
|---|--|
| | |
| | |
| | |
| | |
| 2. Total (Enter on line 3, page 1) | |
| 3. Total other taxes | |
| 4. Total taxes (Must equal line 17 of the federal return) | |

PART V SCHEDULE OF INTEREST INCOME

(Include the interest from line 5 of the federal return)

1. U.S. interest income (Describe type):

| | |
|---|--|
| | |
| | |
| | |
| | |
| 2. Total (Enter on line 7, page 1) | |
| 3. Total other interest income | |
| 4. Total interest income (Must equal line 5 of the federal return)..... | |

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

For the taxable year beginning

, ending

Name as shown on Form K-120

Employer Identification Number (EIN)

PART VI

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 14A, 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 14B, page 1) (If qualified and utilizing the elective two-factor formula, do not carry this percentage to page 1) | | | B % |

C. 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 SALES (Enter on line 14C, page 1)..... | | | C % |

| | | |
|---|------|---|
| D(1). Total percent (Sum of lines A, B & C if 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 14, page 1) | E | % |

PART VII Page 6 of 6

ADDITIONAL INFORMATION

151518

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)? _____

If not, please explain: _____

- b. Has any state determined that this corporation conducts or has conducted a unitary business with any other corporation? ☐ No ☐ Yes If yes, specify which state or states and enclose a complete list of the corporations conducting the unitary business.

3. Describe briefly the nature and location(s) of your Kansas business activities. _____

4. Are the amounts in the total company column the same as those reported in returns or reports to other states under the Uniform Division of Income for Tax Purposes Act? ____ Yes ____ No

If no, please explain _____

PART VIII

**AFFILIATED CORPORATIONS INCLUDED IN FORM K-120AS
CORPORATION APPORTIONMENT SCHEDULE**

Check if included

[illegible]

PART IX - KANSAS PASS-THROUGH SCHEDULE

The distributions from the entities listed below have been passed-through and are included in your entity.

[illegible]

PART X - KANSAS DISREGARDED ENTITY SCHEDULE

The disregarded entities listed below are included in this return.

[illegible]