

For the taxable year beginning 01012025 ending 12312025

BUSINESSNAMEXXXXXXXXXXXXXXXXXXXXX
INCAREOFORADDRESSLINEXXXXXXXXXXXXX
ADDRESSXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
CITYXXXXXXXXXXXXXXXXXXXX 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: 2025
- ☒ 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:

12312025

D. Date Business Discontinued in KS:

12312025

E. State and Month/Day/Year of Incorporation:

KS 12312025

F. State of Commercial Domicile: KS

G. Type of Federal Return Filed:

☒ 1. Separate☒ 2. ConsolidatedH. Have you submitted Form K-120EL? ☒

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

01012025

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 2024.

☒ Amended affects Kansas only ☒ Adjustment by IRS ☒ Amended Federal return

1. Federal taxable income	-11099909999.99	13. Contribution to capital exceptions (I.R.C. § 118) (Sch. req.)	910239909999.92
2. Total state and municipal interest	921009909999.99	14. Disallowed business meal expenses (I.R.C. § 274) (Sch. req.)	110314909999.99
3. Taxes on or measured by income or fees or payments in lieu of income taxes (Part IV, line 2)	-92030909999.99	15. Other subtractions from federal taxable income (Sch. req.)	990421509999.99
4. Federal net operating loss deduction	993094009999.99	16. Total subtractions from federal taxable income (Add line 9 - 15)	990599169999.99
5. 250 deduction related to Global Intangible Low-Taxed Income (GILTI) (I.R.C. § 250(a)(1)(B)) (Sch. req.)	994099509999.99	17. Net income before apportionment (Add line 1 to line 8 and subtract line 16)	-90699917499.99
6. Business interest expense carryforward deduction (I.R.C. § 163(j)) (Sch. req.)	995099960999.99	18. Nonbusiness income - Total company (Sch. req.)	-99199901855.99
7. Other additions to federal taxable income (Sch. req.)	996099997099.99	19. Apportionable business income (Subtract line 18 from line 17)	-99299909199.66
8. Total additions to federal taxable income (Add lines 2 - 7)	997099909809.99	20. Average percent to Kansas (Part VI, lines A, B, C, & E: if 100% enter 100.0000)	100.0000
9. Interest on U. S. government obligations (Part V, line 2)	998099909990.99	A 100.0000 C 100.0000	
10. I.R.C. § 78 and 80% of foreign dividends (Sch. req.)	999099909991.09	B 100.0000	
11. Global Intangible Low-Taxed Income (GILTI) (I.R.C. § 951(A)) (Sch. req.)	990099909999.11	21. Amount to Kansas (Multiply line 19 by line 20)	-99188909992.19
12. Disallowed business interest deduction (I.R.C. § 163(j)) (Sch. req.)	120199909999.99	22. Nonbusiness income - Kansas (Sch. req.)	772999099922.22
		23. Kansas Expensing Recapture (Sch. req.)	370799909999.92



TESTMELXXXXX A TESTWATERSXXXXXXXXXXXX

134007890

24. Kansas Expensing Deduction (Sch. req.)	990999099024.99	37. Total of all other refundable credits (Part I, line 46)	190719542112.00
25. Kansas net income before NOL deduction (Add lines 21 - 23, then subtract line 24)	-99199909999.66	38. Payments remitted with original return (See instructions)	310891954211.00
26. Kansas net operating loss deduction (Sch. req.)	772099909999.99	39. Overpayment from original return (see instructions)	220491954222.00
27. Combined report (Schedule K-121) or alternative/separate accounting income (Sch. req.)	-99288909999.99	40. Total prepaid credits (Add lines 34 - 38 and subtract line 39)	220591954222.00
28. Kansas taxable income (Subtract line 26 from line 25 or enter line 27, as applicable)	-99359909999.99	41. Balance due	260691954222.00
29. Normal tax (3.5% of line 28)	310191954233.00	42. Interest	270891954222.00
30. Surtax (3% of line 28 in excess of \$50,000)	110291954234.00	43. Penalty	280991954222.00
31. Total tax (Add lines 29 and 30. If filing combined, use line 30 of K-121.)	110391954236.00	44. Estimated tax penalty	221099195422.00
32. Total nonrefundable credits (Part I, line 38; cannot exceed amount on line 31)	110491954237.00	If annualizing to compute penalty, check this field	X
33. Balance (Subtract line 32 from line 31; cannot be less than zero)	110591954238.00	45. Total tax, interest & penalty due (Add lines 41 - 44) Complete Form K-120V & enclose it with your payment	331119195422.00
34. Estimated tax paid and amount credited forward (Part II, line 4)	110691954231.00	46. Overpayment	331229195422.00
35. Other tax payments (enclose separate schedule)	101919542123.00	47. Refund. Enter the amount of line 46 you wish to be refunded	331339195422.00
36. Amount paid with Kansas extension	111919542114.00	48. Credit Forward. Enter the amount of line 46 (original return only) you wish to apply to 2026 estimated tax. (Line 48 cannot exceed the total of lines 34 - 36)	331449195422.00

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
(Required)Preparer
Phone NumberPreparer PTIN, EIN or SSN
(Required)

P03465080

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 Page 2 of 6 2025CORPORATE INCOME TAX 000
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8	TESTMELXXXXX A TESTWATERSXXXXXXXXXXXX 134007890
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12	24. Kansas Expensing Deduction (Sch. req.) 990999099024.99 37. Total of all other refundable credits (Part I, line 46) 190719542112.00
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14	25. Kansas net income before NOL deduction (Add lines 21 - 23, then subtract line 24) -99199909999.66 38. Payments remitted with original return (See instructions) 310891954211.00
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18	26. Kansas net operating loss deduction (Sch. req.) 772099909999.99 39. Overpayment from original return (This figure is a subtraction; see instructions) 220491954222.00
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20	27. Combined report (Schedule K-121) or alternative/separate accounting income (Sch. req.) -99288909999.99 40. Total prepaid credits (Add lines 34-38 and subtract line 39) 220591954222.00
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23	28. Kansas taxable income (Subtract line 26 from line 25 or enter line 27, as applicable) -99359909999.99 41. Balance due 260691954222.00
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27	29. Normal tax (3.5% of line 28) 310191954233.00 42. Interest 270891954222.00
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30	30. Surtax (3% of line 28 in excess of \$50,000) 110291954234.00 43. Penalty 280991954222.00
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33	31. Total tax (Add lines 29 and 30. If filing combined, use line 30 of K-121.) 110391954236.00 44. Estimated tax penalty 221099195422.00
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36	32. Total nonrefundable credits (Part I, line 36; cannot exceed amount on line 31) 110491954237.00 If annualizing to compute penalty, check this field X
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39	33. Balance (Subtract line 32 from line 31; cannot be less than zero) 110591954238.00 45. Total tax, interest & penalty due (Add lines 41-44) Complete Form K-120V & enclose it with your payment 331119195422.00
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42	34. Estimated tax paid and amount credited forward (Part II, line 4) 110691954231.00 46. Overpayment 331229195422.00
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45	35. Other tax payments (enclose separate schedule) 101919542123.00 47. Refund. Enter the amount of line 46 you wish to be refunded 331339195422.00
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48	36. Amount paid with Kansas extension 111919542114.00 48. Credit Forward. Enter the amount of line 46 (original return only) you wish to apply to 2026 estimated tax. (Line 48 cannot exceed the total of lines 34 - 36) 331449195422.00
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51	X I authorize the Director of Taxation or the Director's designee to discuss my K-120 and any enclosures with my preparer.
52	I declare under the penalties of perjury that to the best of my knowledge and belief this is a true, correct, and complete return.
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54	Officer Signature (Required) Title Date
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57	Preparer Signature (Required) Preparer Phone Number Preparer PTIN, EIN or SSN (Required) P03465080
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62	CORPORATE INCOME TAX PO BOX 750260 TOPEKA KS 66699-0260 For Office Use Only
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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
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**PART I - NONREFUNDABLE AND REFUNDABLE CREDITS (see instructions)**

NONREFUNDABLE CREDITS

1. Apprenticeship Credit (Enclose Schedule K-24)
2. Affordable Housing Credit (Enclose Schedule K-25).....
3. Aviation/Aerospace Credit (Enclose Schedule K-26)
4. Housing Investor Credit (Enclose Schedule K-27)
5. Attracting Powerful Economic Expansion Tax Credit (Enclose Schedule K-28).....
6. Short Line Railroad Tax Credit (Enclose Schedule K-29).....
7. Center for Entrepreneurship Credit (Enclose Schedule K-31)
8. Agritourism Liability Insurance Credit (Enclose Schedule K-33).....
9. Business and Job Development Credit - **carry forward use only** (Enclose Schedule K-34).....
10. Historic Preservation Credit (Enclose Schedule K-35)
11. Disabled Access Credit (Enclose Schedule K-37).....
12. Swine Facility Improvement Credit (Enclose Schedule K-38)
13. Credit for Plugging An Abandoned Oil or Gas Well (Enclose Schedule K-39).....
14. Assistive Technology Contribution Credit (Enclose Schedule K-42)
15. Eisenhower Foundation Credit (Enclose Schedule K-43)
16. Disability Employment Credit (Enclose Schedule K-44).....
17. Friends of Cedar Crest Association Credit (Enclose Schedule K-46)
18. Technology Enabled Fiduciary Financial Institutions Credit (Enclose Schedule K-48)
19. Research and Development Credit (Enclose Schedule K-53).....
20. Venture Capital Credit - **carry forward use only** (Enclose Schedule K-55).....
21. Seed Capital Credit - **carry forward use only** (Enclose Schedule K-55)
22. High Performance Incentive Program Credit (Enclose Schedule K-59)
23. Community Service Contribution Credit (Enclose Schedule K-60)
24. Alternative-Fuel Tax Credit (Enclose Schedule K-62)
25. Targeted Employment Credit (Enclose Schedule K-69)
26. Low Income Student Scholarship Credit (Enclose Schedule K-70).....
27. Petroleum Refinery Credit - **carry forward use only** (Enclose Schedule K-73)
28. Single City Port Authority Credit (Enclose Schedule K-76)
29. Qualifying Pipeline Credit - **carry forward use only** (Enclose Schedule K-77)
30. BioMass-to-Energy Credit - **carry forward use only** (Enclose Schedule K-79)
31. Environmental Compliance Credit (Enclose Schedule K-81).....
32. Storage and Blending Equipment Credit - **carry forward use only** (Enclose Schedule K-82)....
33. Electric Cogeneration Facility Credit - **carry forward use only** (Enclose Schedule K-83).....
34. Kansas Community College and Technical College Contribution Credit (Enclose Schedule K-84)...
35. Commercial Restoration and Preservation Credit (Enclose Schedule K-92).....
36. Pregnancy Resource Act Credit (Enclose Schedule K-94)
37. Farm Net Operating Loss (Enclose Schedule K-139F).....
38. **Total nonrefundable credits (Add lines 1 through 37. Enter total here and on line 32, page 2)**

REFUNDABLE CREDITS

39. Attracting Powerful Economic Expansion Tax Credit (Enclose Schedule K-28).....
40. Telecommunications Credit (Enclose Schedule K-36)
41. Child Day Care Assistance Credit (Enclose Schedule K-56)
42. Small Employer Healthcare Credit (Enclose Schedule K-57)
43. Community Service Contribution Credit (Enclose Schedule K-60).....
44. Individual Development Account Credit (Enclose Schedule K-68).....
45. Farm Net Operating Loss (Enclose Schedule K-139F).....
46. **Total refundable credits (Add lines 39 through 45. Enter total here and on line 37, page 2)...**

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PART II - ADDITIONAL INFORMATION

K-120
Page 4
Attach
151325



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, 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 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 _____

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

Name of Corporation	Employer ID Number

(Enclose a separate sheet for additional corporations)

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 9, page 1)

3. Total other interest income

4. Total interest income (Must equal line 5 of the federal return)

K-120 AS

KANSAS Corporation Apportionment Schedule

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

K-120 AS
Attach
151425



For the taxable year beginning ____ / ____ / **2 0 2 5** ; 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 the 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 20A, page 1).....					
B. Payroll (Those corporations qualified and utilizing the elective two-factor formula must complete this area only during the first year of qualifying. After the 10th year, the business must re-qualify.)	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 20B, page 1; If qualified and utilizing the elective two-factor formula, do not carry this percentage to page 1)					
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 20C, page 1)					
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 20, page 1)					E %

PART VII - ADDITIONAL INFORMATION

K-120 AS
Part VII
Attach
150525



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?
____ Yes ____ No If yes, specify which state(s) 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 (K-120AS, Part VI) 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. _____

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.

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

Name of Corporation	Employer Identification Number	Check if included:	
		In Total Company factors	Within Kansas factors

PART IX - KANSAS PASS-THROUGH SCHEDULE

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

Pass-through Entity Name	EIN of Pass-through Entity	Your Entity to which income of Pass-through is included	EIN to which income of Pass-through Entity is included	Principal Product or Services of Pass-through Entity	Kansas Operations (Y / N)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

PART X - KANSAS DISREGARDED ENTITY SCHEDULE

The disregarded entities listed below are included in this return.

Disregarded Entity Name	EIN of Disregarded Entity	Your Entity to which income of Disregarded Entity is included	EIN to which income of Disregarded Entity is included	Principal Product or Services of Disregarded Entity	Kansas Operations (Y / N)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					