

### **New Hampshire BET and BPT Partnership Test Case 3 - 2025**

This test case is of a partnership Business Enterprise Tax and Business Profits Tax Return for a business organization doing business within NH only. Furthermore, the taxpayer utilizes credits other the BET Credits, which will require Form DP-160, Schedule of Credits to be included. Additionally, the taxpayer has elected to file as a 52/53 week filer with a tax period ending on the Saturday closest to the end of December. The amounts reported are carried over from the Federal Form 1065 (not included in test scenario). The tax due is \$2,438 prior to application of payments in the amount of \$3,500 resulting in an over payment of \$1,062.

Federal Forms: Not included

New Hampshire Form(s): BT-SUMMARY, BET, BET Credit Worksheet, NH-1065, and DP-160

Taxpayer:

JKL LLC

52 STATE ST

CONCORD, NH 03301

FEIN: TAXPAYER: 41-1111191

Filing Status/Entity Type: PARTNERSHIP

Other: Overpayment of \$1,062 – \$500 credit to next year's tax liability and a requested refund of \$562. Electronic funds transfer available.

DO NOT STAPLE



New Hampshire  
Department of  
Revenue Administration

2025  
BT-SUMMARY



0BTSUM2511862

BUSINESS TAX RETURN SUMMARY

STEP 1 - PRINT OR TYPE

MMDDYYYY

For the CALENDAR year **2025** or other taxable period beginning:

1 2 2 9 2 0 2 4

and ending:

MMDDYYYY

0 1 0 3 2 0 2 6

☐ Check box if there has been a name change since last filing. List former name.

Proprietor's Last Name

First Name

MI

Social Security Number

If issued a DIN,  
use the DIN in the  
appropriate taxpayer  
identification box.  
DO NOT enter SSN or FEIN if  
you have a DIN

Corporate, Partnership, Estate, Trust, Non-Profit or LLC Name

JKL LLC

Taxpayer Identification Number

4 1 1 1 1 1 1 9 1

Principal Business Activity Code (Federal)

1 2 3 4 5 6

Number & Street Address

52 STATE ST

Address (continued)

Unit Type

Unit #

City / Town

CONCORD

State

NH

Zip Code + 4 (or Canadian Postal Code)

0 3 3 0 1

STEP 2 - Return Type and Federal Information

If you checked "yes" to one or both of the first two questions, you must file the completed corresponding return(s) with this BT-Summary.

Are you required to file a BET Return (Gross Business Receipts over \$298,000, or Enterprise Value Tax Base over \$298,000)?

☒ Yes ☐ No

Are you required to file a BPT Return (Gross Business Income over \$109,000)?

☒ Yes ☐ No

Do you file a Form 990/990T?

☐ Yes ☒ No

Do you file a Federal Form 8023, Federal Form 8883 and/or have checked box 10b on Schedule B of Federal Form 1065?

☐ Yes ☒ No

Is the business organization filing its return on an IRS approved 52/53 week tax year?

☒ Yes ☐ No

OR

☐ CORPORATION

☐ COMBINED GROUP

☒ PARTNERSHIP

☐ NON-PROFIT

☐ PROPRIETORSHIP

☐ FIDUCIARY

☐ AMENDED RETURN

☐ FINAL RETURN

☒ LLC

☐ DAO

☐ This submission is the result of an IRS Adjustment for this form year. A complete federal Revenue Agent Report (RAR) with all applicable Schedules must be included with a complete amended NH tax return. For taxable periods ending on or before December 31, 2020, you must use Form DP-87 - (entity specific) to report IRS adjustments.



**BUSINESS TAX RETURN SUMMARY (continued)**

**STEP 3 - Complete the BET and / or BPT return(s) and then complete the BT-Summary and attach return(s)**

**STEP 4 - Calculate Your Balance Due or Overpayment**

ROUND TO THE NEAREST WHOLE DOLLAR

1 (a) Business Enterprise Tax Net of Statutory Credits	1(a)	<input type="text"/>	7	8	9		
(b) Business Profits Tax Net of Statutory Credits	1(b)	<input type="text"/>	1	6	4	9	
(c) Subtotal of Business Tax Due (Line 1(a) plus Line 1(b))	1(c)	<input type="text"/>	2	4	3	8	
<b>2 PAYMENTS</b>							
(a) Tax paid with application for extension	2(a)	<input type="text"/>	3	5	0	0	
(b) Total of taxable period's estimated tax payments	2(b)	<input type="text"/>					
(c) Credit carryover from prior tax period	2(c)	<input type="text"/>					
(d) Tax paid with original return (Amended returns only)	2(d)	<input type="text"/>					
(e) Total of Lines 2(a) through 2(d)	2(e)	<input type="text"/>	3	5	0	0	
3 TAX DUE: (Line 1(c) minus Line 2(e))	3	<input type="text"/>	-	1	0	6	2
<b>4 ADDITIONS TO TAX</b>							
(a) Interest (See instructions)	4(a)	<input type="text"/>					
(b) Failure to Pay (See instructions)	4(b)	<input type="text"/>					
(c) Failure to File (See instructions)	4(c)	<input type="text"/>					
(d) Underpayment of Estimated Tax (See instructions)	4(d)	<input type="text"/>					
(e) Total of Lines 4(a) through 4(d)	4(e)	<input type="text"/>					
5 (a) Subtotal of Amount Due (Line 3 plus Line 4(e))	5(a)	<input type="text"/>	-	1	0	6	2
(b) Return Payment Made Electronically	5(b)	<input type="text"/>					
(c) <b>BALANCE DUE:</b> Line 5(a) minus 5(b). Make your payment online at <a href="https://gtc.revenue.nh.gov/TAP">gtc.revenue.nh.gov/TAP</a> or make check payable to: <b>STATE OF NEW HAMPSHIRE</b> <b>PAY THIS AMOUNT</b>							
5(c)		<input type="text"/>					
6 <b>OVERPAYMENT:</b> If balance due is less than zero, enter on Line 6	6	<input type="text"/>	1	0	6	2	
(a) Any amount of overpayment in excess of 500% of Line 1(c) shall be refunded (Line 1(c) X 500%).	6(a)	<input type="text"/>					
7 Apply overpayment amount on Line 6 to:							
(a) Credit - Next Year's Tax Liability (amount entered shall not exceed Line 6(a)) <b>(Not available for Federal RAR)</b>	7(a)	<input type="text"/>	5	0	0		
(b) Refund <b>(Only option available for Federal RAR)</b>	7(b)	<input type="text"/>	5	6	2		



**BUSINESS TAX RETURN SUMMARY (continued)**

**STEP 5**

Under penalties of perjury, I declare that I have examined this BT-Summary and the attached returns, and to the best of my belief they are true, correct and complete. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has knowledge. If a combined group, I also certify that all affiliated companies are included in the appropriate group described in this return.

☐ POA: By checking this box and signing below, you authorize us to discuss this return with the preparer listed below.

**TAXPAYER'S SIGNATURE & INFORMATION**

Signature (in ink)

MMDDYYYY

Print Signatory Name & Title

Email Address

Phone Number

**PAID PREPARER'S SIGNATURE & INFORMATION**

Signature of Preparer

MMDDYYYY

Printed Name of Preparer

Email Address

Phone Number

Preparer Identification Number

Preparer's Address

Address (continued)

City / Town

State

Zip Code + 4 (or Canadian Postal Code)

Mail to:  
NH DRA  
PO Box 637  
Concord NH 03302-0637

Make Check Payable to:  
**STATE OF NEW HAMPSHIRE**  
Enclose but DO NOT staple or tape your  
attachments

**FILE & PAY ONLINE AT GRANITE TAX  
CONNECT [gtc.revenue.nh.gov/TAP](https://gtc.revenue.nh.gov/TAP)**

**THIS RETURN MUST BE ACCOMPANIED BY COMPLETE AND LEGIBLE COPIES OF THE APPROPRIATE FEDERAL FORMS AND SCHEDULES.**



BUSINESS ENTERPRISE TAX RETURN

Taxpayer Name

JKL LLC

Taxpayer Identification Number

4 1 1 1 1 1 1 9 1

For the CALENDAR year **2025** or  
other taxable period beginning:

MMDDYYYY

MMDDYYYY

and ending:

You are required to file this return if the gross business receipts were greater than **\$298,000** or the enterprise value tax base is greater than **\$298,000**.

☐ Check here if required to file Form BET-80.

ROUND TO THE NEAREST WHOLE DOLLAR

Total Gross Business Receipts for this business organization

1 6 5 4 8 1 1

1. Dividends Paid

1

2. Compensation and Wages Paid or Accrued

2

1 2 7 5 0 0

3. Interest Paid or Accrued

3

1 6 0 0 0

4. Taxable Enterprise Value Tax Base (Sum of Lines 1, 2, and 3)

4

1 4 3 5 0 0

5. New Hampshire Business Enterprise Tax (BET) (Line 4 multiplied by .0055) before credits

5

7 8 9

6. Enter credits against BET. Use DP-160 to determine credits against BET

6

7. Enter Tax Due (Line 5 minus 6). If negative, enter Zero. Report on BT-SUMMARY Line 1(a)

TAX DUE

7

7 8 9



BUSINESS ENTERPRISE TAX CREDIT WORKSHEET

Taxpayer Name

JKL LLC

Taxpayer Identification Number

4 1 1 1 1 1 1 9 1

For the CALENDAR year **2025** or  
other taxable period beginning:

MMDDYYYY

and ending: MMDDYYYY

1. Business Profits Tax (BPT) from BPT Return, Line 19 NH-1120-WE, Line 12 all other forms.	1	1 0 3 3 8
2. Sum the amounts from Column B, Lines 3 through 13, and include on Line 20(a) of NH-1120-WE or on Line 13(a) on other BPT forms. If DP-160 credits exist, instead include DP-160, Part B, Line 10 amount and apply on Line 20(b) of NH-1120-WE or on Line 13(b) on other BPT forms.	8 6 8 9	
Use carry forward amounts in the following order for this taxable period	A Available Credits	B Credit Applied to BPT
3. BET tax paid amount from Line 7 BET Return plus Line 4 of DP-160, Part A.	7 8 9	7 8 9
4. Carry over BET from tenth prior taxable period		
5. Carry over BET from ninth prior taxable period		
6. Carry over BET from eighth prior taxable period		
7. Carry over BET from seventh prior taxable period		
8. Carry over BET from sixth prior taxable period		
9. Carry over BET from fifth prior taxable period		
10. Carry over BET from fourth prior taxable period	1 2 0 0	1 2 0 0
11. Carry over BET from third prior taxable period		
12. Carry over BET from second prior taxable period		
13. Carry over BET from first prior taxable period		



PARTNERSHIP BUSINESS PROFITS TAX RETURN

Business Organization Name

JKL LLC

Taxpayer Identification Number

MMDDYYYY

MMDDYYYY

4 1 1 1 1 1 1 9 1

For the CALENDAR year **2025** or  
other taxable period beginning:

and ending:

1 - GROSS BUSINESS PROFITS

ROUND TO THE NEAREST WHOLE DOLLAR

1(a) Enter the amount of ordinary business income (loss) reported on Federal Form 1065, Schedule K, Line 1	1(a)							1	9	7	8	4	6
1(b) Enter the amount of net rental real estate income (loss) reported on Federal Form 1065, Schedule K, Line 2	1(b)												
1(c) Enter the amount of other net rental income (loss) reported on Federal Form 1065, Schedule K, Line 3(c)	1(c)												
1(d) Enter the amount of guaranteed payments reported on Federal Form 1065, Schedule K, Line 4(c)	1(d)												
1(e) Enter the amount of interest income reported on Federal Form 1065, Schedule K, Line 5	1(e)												
1(f) Enter the amount of dividend income reported on Federal Form 1065, Schedule K, Line 6(a)	1(f)												
1(g) Enter the amount of royalty income reported on Federal Form 1065, Schedule K, Line 7	1(g)												
1(h) Enter the amount of net short-term capital gain reported on Federal Form 1065, Schedule K, Line 8, less amount of net long-term capital loss reported on Federal Form 1065, Schedule K, Line 9(a), but not less than zero	1(h)												
1(i) Enter the amount of net long-term capital gain reported on the Federal Form 1065, Schedule K, Line 9(a), less the amount of net short-term capital loss reported on Federal Form 1065, Schedule K, Line 8, but not less than zero	1(i)												
If the sum of Federal Form 1065, Schedule K, Lines 8 and 9(a) gains and losses is less than zero, enter net loss													
1(j) Enter the amount of net §1231 gain (loss) reported on Federal Form 1065, Schedule K, Line 10	1(j)												
1(k) Enter the amount of other income (loss) reported on Federal Form 1065, Schedule K, Line 11	1(k)												
1(l) Enter the amount of any other item of income (loss) not reported on Federal Form 1065, Schedule K, that should be included in gross business profits, including global intangible low-taxed income	1(l)												
1(m) Enter the amount of Section 179 deduction reported on Federal Form 1065, Schedule K, Line 12	1(m)												
1(n) Enter the amount of contributions reported on Federal Form 1065, Schedule K, Line 13(a) and 13(b), but only to the extent that the contributions are made for the benefit of the partnership to enhance the goodwill of the partnership, and not for the benefit of a partner	1(n)												
1(o) Enter the amount of investment interest expense reported on Federal Form 1065, Schedule K, Line 13(c)	1(o)												
1(p) Enter the amount of IRC §59(e)(2) expenditures reported on Federal Form 1065, Schedule K, Line 13(d)(2)	1(p)												
1(q) Enter the amount of other deductions reported on Federal Form 1065, Schedule K, Line 13(e)	1(q)												
1(r) Enter the amount of foreign taxes paid or accrued as reported on Federal Form 1065, Schedule K, Line 21	1(r)												
1(s) Combine Lines 1(a) through 1(l) and from the result subtract Lines 1(m) through 1(r)	1(s)							1	9	7	8	4	6



PARTNERSHIP BUSINESS PROFITS TAX RETURN

Business Organization Name

JKL LLC

Taxpayer Identification Number

4 1 1 1 1 1 1 9 1

For the CALENDAR year **2025** or  
other taxable period beginning:

MMDDYYYY

MMDDYYYY

and ending:

NH-1065 (continued)

2 - INCREASE or DECREASE TO GROSS BUSINESS PROFITS TO RECONCILE WITH IRC

ROUND TO THE NEAREST WHOLE DOLLAR

2(a) Add amount of IRC §179 expense taken on federal return in excess of the amount permitted pursuant to RSA 77-A:3-b, IV, including carryover amounts deducted in this taxable period

2(a)

1 5 0 0 0

2(b) Add the amount of bonus depreciation taken on the federal return for assets placed in service this period pursuant to RSA 77-A:3-b, I.

2(b)

2(c) Add any other deductions or exclusions taken on the federal return that need to be eliminated or adjusted pursuant to RSA 77-A:1, XX and 77-A:3-b, III. Complete and attach Schedule IV

2(c)

2(d) Deduct regular depreciation related to IRC §179 and bonus depreciation not allowed for this taxable period or for prior taxable periods

2(d)

2(e) Deduct any other items included on the federal return that need to be eliminated or adjusted pursuant to RSA 77-A:1, XX or RSA 77-A:4, XIX. Complete and attach Schedule IV

2(e)

2(f) Increase or Decrease the net gain or loss on the sale of assets used in the business that have a different state basis from the tax basis reported on the federal return

2(f)

2(g) Net Lines 2(a) through 2(f)

2(g)

1 5 0 0 0

3 Subtotal Line 1(s) adjusted by Line 2(g)

3

2 1 2 8 4 6

4 Separate entity items of income or expense (attach schedule)

4

5 Gross Business Profits (combine Line 3 and Line 4)

5

2 1 2 8 4 6

6 - ADDITIONS AND DEDUCTIONS (RSA 77-A:4)

6(a) Deduct interest on direct US Obligations (RSA 77-A:4, II)

6(a)

6(b) Deduct compensation deduction for personal services (RSA 77-A:4, III)

6(b)

7 5 0 0 0

6(c) Add income taxes or franchise taxes measured by income (attach schedule of taxes by State) (RSA 77-A:4, VII)

6(c)

6(d) Deduct wage adjustment required by IRC §280C (RSA 77-A:4, IX)

6(d)

6(e) Add expenses related to federal constitutionally exempt income (RSA 77-A:4, X)

6(e)

6(f) Deduct research contribution (attach computation) (RSA 77-A:4, XII)

6(f)



PARTNERSHIP BUSINESS PROFITS TAX RETURN

Business Organization Name

JKL LLC

Taxpayer Identification Number

4 1 1 1 1 1 1 9 1

MMDDYYYY

For the CALENDAR year **2025** or  
other taxable period beginning:

MMDDYYYY

and ending:

NH-1065 (continued)

6(g) Adjustments to gross business profits required due to the increase in the basis of assets resulting from the sale or exchange of an interest in the business organization (RSA 77-A:4, XIV).

Add the amount of the increase in the basis of assets federally, due to the sale or exchange of interest in the business organization

6(g) - A

ROUND TO THE NEAREST WHOLE DOLLAR

Check yes if an election is being made to recognize the basis increase for any sale or exchange reported above.

☐ Yes

Multiple Transactions  
(schedule attached)

☐ Yes

If not making an election, deduct the basis increase associated with the sale or exchange(s). If making an election, enter zero. If reporting multiple transactions, please attach a schedule reporting the details for each transaction.

6(g) - B

Add the amount of depreciation/amortization on the federal return attributable to an increase in the basis of assets not recognized for NH purposes

6(g) - C

Upon the sale of assets, adjust the net gain or loss to remove any basis increase recognized for federal income tax purposes that was not recognized for NH purposes.

6(g) - D

Net Lines 6(g) - A through 6(g) - D

6(g)

6(h) Add Qualified Investment Company (QIC) holders proportional share of QIC profits (RSA 77-A:4, XV)

6(h)

6(i) For tax years commencing on or after January 1, 2024:

Deduct current year business interest expense disallowed under IRC §163(j) (RSA 77-A:4, XX).

6(i) - A

Add the amount of disallowed business interest expense carryforward deducted federally under IRC §163(j), and already deducted for NH purposes in prior years under Line 6(i) - A.

6(i) - B

Deduct 1/3 of the total disallowed business interest expense carryforward under IRC §163(j) as of the tax year ending before January 1, 2024 (RSA 77-A:4, XX).

6(i) - C

Net Lines 6(i) - A through 6(i) - C

6(i)

6(j) Net Lines 6(a) through 6(i)

6(j)

- 7 5 0 0 0

7 Adjusted Gross Business Profits (Sum of Lines 5 and 6(j))

7

1 3 7 8 4 6

8 New Hampshire Apportionment (If other than 100%, complete Form DP-80 BPT Apportionment Schedule. Enter percentage from Form DP-80, Line 1(c))

Exempt under P.L. 86-272 ☐

8

1 . 0 0 0 0 0 0

9 New Hampshire Business Profits before NOL (Line 7 multiplied by Line 8. If negative, enter zero.)

9

1 3 7 8 4 6

10 Deduct New Hampshire Net Operating Loss Deduction (NOLD) (attach Form DP-132) (RSA-77-A:4, XIII)  
NOLD available

10 - A

Less NOLD used this tax period

10



PARTNERSHIP BUSINESS PROFITS TAX RETURN

Business Organization Name

JKL LLC

Taxpayer Identification Number

4 1 1 1 1 1 1 9 1

MMDDYYYY

For the CALENDAR year **2025** or  
other taxable period beginning:

and ending:

MMDDYYYY

NH-1065 (continued)

Line 10 (continued)

ROUND TO THE NEAREST WHOLE DOLLAR

NOLD to be carried forward

10 - B

**11** New Hampshire Taxable Business Profits (Line 9 minus Line 10. If negative, enter zero.)

11

1 3 7 8 4 6

**12** Compute tax (Line 11 multiplied by 7.5%)

12

1 0 3 3 8

**13** (a) BET Credit only (attach BET Credit Worksheet)

13(a)

-OR-

(b) Other credits including BET (attach Form DP-160)

13(b)

8 6 8 9

**14** New Hampshire Business Profits Tax Net of Statutory Credits (Line 12 minus Line 13(a) or 13(b), as applicable, cannot be less than zero) Report on BT-Summary, Line 1(b).

14

1 6 4 9

This return must be accompanied by complete and legible copies of the appropriate federal forms and schedules.



SCHEDULE OF CREDITS

DO NOT COMPLETE FORM DP-160 IF THE ONLY CREDIT AVAILABLE IS THE BET CREDIT

Business Organization Name

JKL LLC

Taxpayer Identification Number

4 1 1 1 1 1 1 9 1

MMDDYYYY

For the CALENDAR year **2025** or  
other taxable period beginning:

MMDDYYYY

and ending:

APPLICATION OF CREDITS TO BET AND BPT

A. BET Summary of Credits

ROUND TO THE NEAREST WHOLE DOLLAR.

1. Coos County Credit (Part F, Line 3)	1								
2. ERZ Credit (Part D, Line 4)	2								
3. ITC (Part E, Line 4)	3								
4. Subtotal (Add Lines 1, 2 and 3)	4								
5. R&D (Part C, Line 3)	5								
6. Education Tax Credit (Part G, Line 3)	6								
7. Granite State Paid Family and Medical Leave Plan Tax Credit (Part J, Line 2)	7								
8. Granite Patron of the Arts Tax Credit (Part K, Line 3)	8								
9. Subtotal (Sum Lines 5 through 8)	9								
10. Paid credits to apply to BET. Add Lines 4 and 9 (Enter on BET Return, Line 6) (BET Credit applicable to BPT, but only if the BET has been paid)	10								

B. BPT Summary of Credits

ROUND TO THE NEAREST WHOLE DOLLAR.

1. R&D (Part C, Line 2)	1										
2. ERZ Credit (Part D, Line 3)	2										
3. ITC (Part E, Line 3)	3										
4. Coos County Credit (Part F, Line 4)	4										
5. Insurance Premium Tax (Part H, Line 2)	5										
6. Education Tax Credit (Part G, Line 2)	6						6	7	0	0	
7. BET credit (Sum of BET Credit Worksheet, Column B)	7						1	9	8	9	
8. CTE Centers Tax Credit (Part I, Line 2)	8										
9. Granite Patron of the Arts Tax Credit (Part K, Line 2)	9										
10. Credits applied to BPT. Add Lines 1 through 9. Not to exceed current period BPT Liability. (Enter on BPT Return, Line 20(b) NH-1120-WE, Line 13(b) all other forms.)	10						8	6	8	9	



**SCHEDULE OF CREDITS (continued)**

**DO NOT COMPLETE FORM DP-160 IF THE ONLY CREDIT AVAILABLE IS THE BET CREDIT**

Business Organization Name

JKL LLC

Taxpayer Identification Number

4 1 1 1 1 1 1 9 1

**C. Research and Development Credit (R&D)**

**ROUND TO THE NEAREST WHOLE DOLLAR.**

1. R&D credit available	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. R&D must be used against the BPT first	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Unused R&D applied to the BET	3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Total credit used this year (Sum Lines 2 and 3)	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. R&D credit not applied and available for offset in future (Line 1 less Line 4)	5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**D. Economic Revitalization Zone Tax Credit (ERZ)**

**ROUND TO THE NEAREST WHOLE DOLLAR.**

1. ERZ credit available	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Carryover credit from a prior year, use earliest first	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. ERZ credit must be used against the BPT first	3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Amount elected to be applied to the BET	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Total credit used this year (Sum Lines 3 and 4). This amount cannot exceed \$40,000.	5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. ERZ credit available for carry forward (Line 1 plus Line 2 less Line 5)	6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**E. CDFA - New Investment Tax Credit (ITC)**

**ROUND TO THE NEAREST WHOLE DOLLAR.**

1. ITC Credit Available	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Carryover credit from a prior year, use earliest year first	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Amount used for BPT	3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Amount used for BET	4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Amount used for Insurance Premium Tax	5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. Total credit used this year (Sum Lines 3, 4 and 5)	6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7. ITC available for carry forward (Sum Lines 1 and 2, less Line 6)	7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



**SCHEDULE OF CREDITS (continued)**

**DO NOT COMPLETE FORM DP-160 IF THE ONLY CREDIT AVAILABLE IS THE BET CREDIT**

Business Organization Name

JKL LLC

Taxpayer Identification Number

4 1 1 1 1 1 1 9 1

**F. Coos County Tax Credit**

**ROUND TO THE NEAREST WHOLE DOLLAR.**

1. Coos County Tax Credit available	1																			
2. Carryover credit from prior year, use earliest year first	2																			
3. Amount applied against the BET	3																			
4. Unused credit applied to the BPT	4																			
5. Total credit used this year (Sum of Line 3 and 4)	5																			
6. Any unused credit must be carried forward as a priority to other credits (Sum of Lines 1 and 2, less Line 5)	6																			

**G. Education Tax Credit**

**ROUND TO THE NEAREST WHOLE DOLLAR.**

1. Education Tax Credit available	1																		6	7	0	0
2. Amount used for BPT	2																		6	7	0	0
3. Amount used for BET	3																					
4. Total credit used this year (Sum of Lines 2 and 3)	4																		6	7	0	0
5. Education Tax Credit available for carry forward (Line 1 minus Line 4)	5																					

**H. Insurance Premium Tax Credit**

**ROUND TO THE NEAREST WHOLE DOLLAR.**

1. Insurance Premium Tax Credit available	1																					
2. Amount used for BPT	2																					



**SCHEDULE OF CREDITS (continued)**

**DO NOT COMPLETE FORM DP-160 IF THE ONLY CREDIT AVAILABLE IS THE BET CREDIT**

Business Organization Name

JKL LLC

Taxpayer Identification Number

4 1 1 1 1 1 1 9 1

**I. CTE Centers Tax Credit**

**ROUND TO THE NEAREST WHOLE DOLLAR.**

1. CTE Centers Tax Credit available

1

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2. Amount used for BPT (Shall not exceed 25% of BPT before credits)

2

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**J. Granite State Paid Family and Medical Leave Plan Tax Credit**

**ROUND TO THE NEAREST WHOLE DOLLAR.**

1. Premium paid for family and medical leave insurance coverage offered to employees (see instructions)

1

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2. Granite State Paid Family and Medical Leave Plan tax credit used for BET (50% of Line 1)

2

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**K. Granite Patron of the Arts Tax Credit (GPA)**

**ROUND TO THE NEAREST WHOLE DOLLAR.**

1. GPA Credit available

1

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2. GPA must be used against the BPT first

2

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3. Unused GPA applied to the BET

3

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