



BUSINESSNAMEXXXXXXXXXXXXXXXXXXXXXXXXX
INCAREOFORADDRESSLINEXXXXXXXXXXXXXXXXX
ADDRESSXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
CITYXXXXXXXXXXXXXXXXXXXX ST XXXXX-XXXX

EIN this entity:

EIN Federal Consolidated Parent:

134567890

187004310

A. Method Used to Determine Income of Corporation in Kansas

B. Business Activity Code:

F. State of Commercial Domicile:

KS

X 1. Activity wholly within Kansas - Single entity

500000

G. Type of Federal Return Filed:

X 2. Activity wholly within Kansas - Consolidated

C. Date Business Began in KS:

X 1. Separate

X 3. Single entity apportionment method (Sch. K-130AS, Part V)

12312023

X 2. Consolidated

X 4. Combined income method - Single corporation filing (Sch. K-121)

D. Date Business Discontinued in KS:

H. Enter your original federal due date if other than the 15th day of the 4th month (C-Corps) or the 15th day of the 3rd month (S-Corps) after the end of the tax year:

X 5. Combined income method - Multiple corporation filing (Sch. K-131)

12312023

X 6. Alternative or separate accounting (Enclose letter of authorization and schedule)

E. State and Date of Incorporation:

01012023

X J. Indicate if a Fiduciary Financial Institution

KS 12312023

I. Name or address has changed? X

X Filing an amended privilege return. Reason for amended return: Note: This form cannot be used for tax years prior to 2023.

X Amended affects Kansas only

X Adjustment by IRS

X Amended Federal return

1. Federal taxable income for Kansas privilege tax purposes -1099909999.99

15. Kansas net interest income received from qualified agricultural real estate loans (enclose schedule) -1559909999.19

2. Total state and municipal interest income -2099909999.99

16. Kansas net interest income received from single family residence loans(enclose schedule) -1669909999.92

3. Taxes on or measured by income or fees or payment in lieu of income taxes (does not include privilege taxes) -3094909999.99

17. Kansas interest earned on loans to qualified taxpayers used for qualified expenses for restoration & preservation of a qualified historic structure (Sch req)) -1779909999.99

4. Federal net operating loss deduction -4039909999.99

18. Other subtractions from federal taxable income (enclose schedule) -1882909999.99

5. Savings & loan bad debt deduction included in federal deductions -5094909999.99

19. Total subtractions from federal taxable income (Add lines 10-18) -1992909999.99

6. 250 deduction related to Global Intangible Low-Taxed Income (GILTI) (I.R.C. § 250(a)(1)(B)) (Sch. req.) -6099509999.99

20. Net income before apportionment (Add line 1 to line 9 and subtract line 19) -2019339999.99

7. Business interest expense carryforward deduction (I.R.C. § 163(j)) (Sch. req.) -7099969999.99

21. Nonbusiness income - Total company (Sch. req.) -2119339999.99

8. Other additions to federal taxable income (Sch. req.) -8099997999.99

22. Apportionable business income (Subtract line 21 from line 20) -2229904499.99

9. Total additions to federal taxable income (Add lines 2 - 8) -9099909899.99

23. Average percent to Kansas (Part V, lines A, B, C, & E; if 100% enter 100.0000) 100.0000

10. Disallowed FDIC Premiums (I.R.C. § 162 (r)) (Sch. req.) -1009909999.99

A 100.0000 B 100.0000 C 100.0000

11. Global Intangible Low-Taxed Income (GILTI) (I.R.C. § 951a)) (Sch. req.) -1119909990.99

24. Amount to Kansas (Multiply line 22 by line 23) -2449909999.66

12. Disallowed business interest deduction (I.R.C. § 163(J)) (Sch. req.) -1229909899.99

25. Nonbusiness income - Kansas (Sch. req.) -2539909955.99

13. Contributions to capital exceptions (I.R.C. § 118) (Sch. req.) -1339909999.99

26. Kansas expensing recapture -2639909955.99

14. Disallowed business meal expenses (I.R.C. § 274) (Sch. req.) -1449909990.99

27. Kansas expensing deduction -2739909955.99



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28. Kansas net income before NOL deduction (Add lines 24 - 26, then subtract line 27)	-2859909899.99	42. Community Service Contribution Credit Refund (Enclose Sch. K-60)	-4291954222.00
29. Kansas net operating loss deduction (Sch. req.)	-2969909999.99	43. Payment remitted with original return	-4301954222.00
30. Kansas net income before bad debts (Subtract line 29 from line 28)	-3079909990.99	44. Overpayment from original return. (This figure is a subtraction)	44111954222.00
31. Savings & loan bad debt deduction for Kansas (Sch. req.)	-3189909999.99	45. Total prepaid credits (Add lines 39 - 43 and subtract line 44)	45291954222.00
32. Combined report (Sch. K-131) or alternative / separate accounting income (Sep. sch.)	-3291954233.00	46. Balance due (If line 38 exceeds line 45, subtract line 45 from line 38 and enter result)	-4631954222.00
33. Kansas taxable income (Subtract line 31 from line 30 or enter line 32, as applicable)	-3301954234.00	47. Interest	-4741954222.00
34. Normal tax - Banks & Savings and Loan (2.25% of line 33)	-3411954236.00	48. Penalty	-4851954222.00
35a. Surtax - Banks (2.125% of line 33 in excess of \$25,000)	-3521954237.00	49. Estimated tax penalty	-4969195422.00
35b. Surtax - Savings & Loans and trust companies (2.25% of line 33 in excess of \$25,000)	-3531954238.00	Are you annualizing to compute penalty?	X
36. Total tax (Add lines 34 & 35a or 35b. If filing combined, use line 35 of K-131)	-3631954231.00	50. Total tax, interest & penalty due (Add lines 46-49) Complete K-130V & enclose with payment/return	-5079195422.00
37. Nonrefundable credits (Part III, line 17; cannot exceed amount on line 36)	-3741954212.00	51. Overpayment (If line 38 plus line 49 is less than line 45, subtract the sum of lines 38 and 49 from line 45, enter here)	-5189195422.00
38. Balance (Subtract line 37 from line 36; cannot be less than zero)	-3851954211.00	52. Refund. Enter amount of line 51 to be refunded	-5299195422.00
39. Estimated tax paid and amount credited forward (Part I, line 4)	-3969542112.00	53. Credit Forward. Enter amount of line 51 (original return only) to apply to 2025 estimated tax. (Line 53 cannot exceed total of lines 39 & 40.)	-5309195422.00
40. Other tax payments (Enclose separate schedule)	-4071954211.00		
41. Child Day Care Assistance Credit (Enclose Sch. K-56)	-4181954211.00		

X I authorize the Director of Taxation or the Director's designee to discuss my K-130 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 Number _____ Preparer PTIN, EIN or SSN P03465080



PART I

ADDITIONAL INFORMATION

1. Did the corporation file a Kansas Privilege 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. Telephone:

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.

Table with 2 columns: Date, Amount

TOTAL (Enter on line 39, Form K-130)

5. Has your corporation been involved in any reorganization during the period covered by this return? No Yes 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.

- Revenue Agent's Report, Amended Return, Net Operating Loss, Other State's Adjustment

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:

- Sales Tax, Compensating Use Tax, Withholding Tax, Other (specify)

PART II

AFFILIATED CORPORATIONS DOING BUSINESS IN KANSAS

(Enclose separate sheet(s) for additional corporations)

Name of Corporation or Financial Institution

Employer ID Number

PART III

SCHEDULE OF NONREFUNDABLE CREDITS (See instructions)

- Affordable Housing Tax Credit, Housing Investor Tax Credit, Center for Entrepreneurship Credit, Business and Job Development Credit, Historic Preservation Credit, Disabled Access Credit, Eisenhower Foundation Contribution Credit, Friends of Cedar Crest Association Contribution Credit, Technology Enabled Fiduciary Financial Institutions Credit, Venture Capital Credit, High Performance Incentive Program Credit, Community Service Contribution Credit, Targeted Employment Credit, Low Income Student Scholarship Credit, Community College and Technical College Distributions Credit, Commercial Restoration and Preservation Credit, Total nonrefundable credits

Table for recording credit amounts



1. (a) Gross receipts/sales _____ (b) Less: Returns and allow _____ Balance			1(c)	
2. Less: Cost of goods sold and/or operations			2	
3. Gross profit			3	
4. Dividends			4	
5. Interest			5	
6. Gross rents			6	
7. Gross royalties			7	
8. Capital gain net income			8	
9. Net gain or (loss) from Form 4797, Part III			9	
10. Other income			10	
11. Total income - Add lines 3 through 10			11	
DEDUCTIONS				
12. Compensation of officers			12	
13. (a) Salaries and wages _____ (b) Less empl. credit _____ Balance			13	
14. Repairs and maintenance			14	
15. Bad debts			15	
16. Rents			16	
17. Taxes and licenses			17	
18. Interest			18	
19. Charitable contributions (not over 10% of taxable income as adjusted)			19	
20. Depreciation	20			
21. Less depreciation claimed elsewhere on return	21a		21b	
22. Depletion			22	
23. Advertising			23	
24. Pension, profit-sharing, etc. plans			24	
25. Employee benefit programs			25	
26. Other deductions			26	
27. Total deductions - Add lines 12 through 26			27	
28. Taxable income before net operating loss deduction and special deductions (subtract line 27 from line 11)			28	
29. Less: a. Net operating loss deduction	29a			
b. Special Deductions	29b		29c	
30. Taxable income - Subtract line 29c from line 28			30	



(Financial Institutions using the combined income method must use Schedule K-131)

For the taxable year beginning _____, ending _____

Name as shown on Form K-130

Employer Identification Number (EIN)

PART V 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:					
Value of taxpayer's loans and credit card receivables					
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 23, 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 23, page 1).....			B %

C. Receipts

(1) Receipts from:			
(a) Lease of real property.....			
(b) Lease of tangible personal property.....			
(c) Credit card receivable.....			
(d) Merchants discount.....			
(e) Services.....			
(f) Investment and trading assets and activities.....			
(g) Other.....			
(2) Interest from loans:			
(a) Secured by real property.....			
(b) Not secured by real property.....			
(3) Net gains from sale of			
(a) Loans.....			
(b) Credit card receivable.....			
(4) Fees:			
(a) Loan servicing.....			
(b) Credit card issuers reimbursement.....			
(5) Attribution of certain receipts to commercial domicile			
TOTAL RECEIPTS (Enter on line 23, Page 1).....			C %

D. Total percent (Sum of lines A, B & C)..... **D** %

E. Average percent of D (Enter on line 20, page 1)..... **E** %

