

Test Scenario 3 uses the Federal Form 1120S Test Scenario 7 (dated 9/25/2020).

**Deviations from Test Package Federal form 1120S:**

- 1120S, page 1: Change the corporation's City, State and Zip to:  
Oklahoma City OK 73110
- 1120S – Schedule K: Number of Shareholders changed from one to three.

**Shareholder Information:**

	<u>Name &amp; Address</u>	<u>SSN</u>	<u>Shareholder's %</u>
1.	Rose B Trim 57 Any Street Anytown PA 17201	514-06-0014	40%
2.	Bobby Sue 98 Backstreet Hot Springs AR 71901	514-06-0015	30%
3.	Billy Bob Trim 78 Boo Street Shawnee OK 73132	514-06-0016	30%

**Form Required:** 512-S

**Binary Attachments:** Form 504-C and a signed Form 512-SA for Rose B Trim. (Scanned Form 512-SA must contain a hand-written signature)

**Misc. Additional Information –**

- An election was made to file a combined corporate income and franchise tax return.
- The area code for the corporation's phone number is 405.
- Incorporated under the laws of – Oklahoma.
- County in which located - Oklahoma
- An extension payment of \$10,500 was made. Of the \$10,500 payment, \$8,000 represents their estimated franchise tax payment and the remainder is for income tax. The Taxpayer applied for an extension from the IRS.
- The interest income is reported as 'other interest income' in Part 3.
- The partnership loss was not from a partnership doing business in Oklahoma.
- For nonresident shareholders, whose income is taxed in Part One, Section One, a deduction is allowed for charitable contributions added as an unallowable deduction on Part 4, line 2b. When calculating the charitable contributions attributable to Oklahoma, the federal 10% limitation applies. For this test, the Oklahoma charitable contribution deduction for Part One, Section One, line 1c is limited to 10% of Bobby Sue's Oklahoma taxable income computed without regard to the deduction for charitable contributions.
- No underpayment of estimated interest (Form OW-8-P) is due. The prior year's tax liability was zero.

Information needed to complete the **Apportionment Formula, Column A** -

- Inventories – 26,276,810
- Depreciable property = 12,762,589
- Rented property (capitalized) = 21,732,126
- Payroll = 77,631,482
- Officer’s salaries = 4,575,125
- Sales shipped to Oklahoma from within Oklahoma = 336,891,527
- Sales shipped from Oklahoma to purchasers where the corporation is not taxable = 76,832,961

Information needed to complete **Part 6: Additional Information** –

- The location of principal accounting records is the paid preparers address.
- The Internal Revenue Service has not redetermined the company’s tax liability for any prior year.
- The statute of limitations was not extended by consent for any prior year.
- The business name is the same as on the tax return.
- The principal location in Oklahoma is the same as on the tax return.
- The date business began in Oklahoma was 11/19/1957.

Information needed to complete the **Franchise Tax Worksheet**

- Account Number is FRX-10012267-03
- The option that will be used to determine the apportionment of Oklahoma assets is Option 2.

Information needed to complete **Schedule A: Current Officer Information** –

- The shareholders are the officers. Rose B Trim is the President, Bobby Sue the Vice President and Billy Bob Trim the Secretary/Treasurer.

Information needed to complete **Schedule B: General Information** –

- The Oklahoma registered agent: Vernon B. Farmer  
9123 N Hudson  
Oklahoma City, OK 73126
- The amount of authorized capital stock or Shares:
  - 10,000 shares of common stock with a par/book value of \$1,000 per share.
- The total capital stock or shares issued and outstanding at the end of the year
  - 8,420 shares of common stock with a par/book value of \$1,000 per share.

Information needed to complete **Schedule D: Details of Current Debt Shown on Balance Sheet** –

Name of Lender	Original Date of Issuance	Maturity Date	Original Amount of Instrument	Balance remaining of amounts payable within 3 years of Date of Issuance
Citibank	9/1/17	4/1/21	1,500,000	500,000

Information needed to complete Column B of the **Schedule E: Balance Sheet**

- Line 3. Inventories – 27,500,400
- Line 9. Building – 14,940,000
- Line 9(a). Less accumulated depreciation – 3,400,000

Information needed to complete **Schedule E: Balance Sheet, lines 21 & 25 –**

- Line 21 – Indebtedness payable three years or less after issuance = \$500,000
- Line 25 – Indebtedness maturing and payable in more than three years from the date of issuance = \$18,300,000

**Additional Schedule: UnallowableDeductionAddSch** (Form 512S, Part 4, Line 2b)**ScheduleName - Unallowable Deduction**

Charitable contributions	500,000
<b>TOTAL</b>	<b>500,000</b>

# Oklahoma Small Business Corporation Income and Franchise Tax Return

Form 512-S  
2020



This form is due 30 days after the due date of the Federal Return

For the year January 1 - December 31, 2020, or other taxable year beginning: 2020 ending:

Corporate name TREE FIXR UPPER, INC.		<b>Extension</b> - If you have applied for an extension from the IRS, place an 'X' here and provide a copy. <input checked="" type="checkbox"/>	
Street address 39 ANY STREET		Date of incorporation 11/19/1957	Under the laws of OKLAHOMA
City, State or Province, Country and ZIP or Foreign Postal Code OKLAHOMA CITY OK 73110		County in which located OKLAHOMA	
Federal Employer Identification Number 00-0000009	Business code number 541320	Type of business ARCHITECTURE	

Place an 'X' if: (1)  Initial return (2)  Final return (3)  Amended return (See Schedule 512-S-X on page 10) (4)  Electing PTE (Form 586 was filed)

**Notice:** Corporations should not complete the franchise tax portion of the return for the following:

- Filing a stand-alone Oklahoma Annual Franchise Tax Return (Form 200).
- Not required to file a franchise tax return.
- Remitted the maximum amount of franchise tax for the preceeding tax year.

**PART ONE, SECTION ONE: INCOME TAX - Tax Computation Schedule for Nonresident Shareholders Who Do Not File Form 512-SA and Electing Pass-through Entities -or- for a Corporation Claiming the Refundable Credits from Form 577 or 578.**

1a	Nonresident share of income from Page 5, Part 5, line 14.....	1a	60,677	00
1b	Nonresident share of Okla. capital gain deduction (provide Form(s) 561S)..	1b		00
1c	Nonresident share of deductions (see instructions) .....	1c	6,068	00
1	Nonresident share of taxable income (line 1a minus lines 1b and 1c) -or- electing pass-through entity's taxable income (587-PTE, Part 3, line 3). If the Oklahoma Capital Gain Deduction (Form 561-PTE) is included on Form 587-PTE, Column C, place an "X" in the box .....		1	54,609 00

**Complete line 2a -or- lines 2b and 2c**

2a	Nonresident Oklahoma tax (6% of line 1).....	2a	3,277	00
2b	Electing Pass-Through Entity Tax (Form 587-PTE, <b>Part 1</b> line 23).....	2b		00
2c	Electing Pass-Through Entity Tax (Form 587-PTE, <b>Part 2</b> line 23).....	2c		00
2	Nonresident Oklahoma tax (line 2a) -or- Electing Pass-Through Entity Tax (total of lines 2b and 2c) (If recapturing the Oklahoma Affordable Housing Tax Credit, add the recaptured credit here and enter a "1" in the box. If making an Oklahoma installment payment pursuant to IRC Section 965(h) and 68 O.S. Sec. 2368(K), add the installment payment here and enter a "2" in the box ) ...	2	3,277	00
3	Other Credits Form (see instructions) (provide Form 511CR).....	3		00
4	Balance of tax due (line 2 minus line 3, but not less than zero).....	4	3,277	00
5	2020 Oklahoma estimated tax payments (i.e. Form(s) OW-8-ESC and prior year overpayment carryforward) .....	5	2,500	00
6	Amount paid with extension request.....	6		00
7	Oklahoma withholding (provide Form 1099, 500-A, 500-B or other withholding statement).....	7		00
8	Refundable Credits from Form ..... a) <input type="checkbox"/> 577 ..... b) <input type="checkbox"/> 578.....	8		00
9	Amount paid with original return and amount paid after it was filed (amended return only) .....	9		00
10	Any refunds or overpayment applied (amended return only) .....	10		00
11	Total of lines 5 through 10 .....	11	2,500	00
12	Overpayment (line 11 minus line 4).....	12		00
13	Tax Due (line 4 minus line 11).....	13	777	00
14	(a) Donation: Support the Oklahoma General Revenue Fund .....	14a		00
	(b) Donation: Public School Classroom Support Fund.....	14b		00
15	Underpayment of estimated tax interest.....	15		00
16	<b>For delinquent payment</b> add penalty of 5%..... plus	16		00
	interest of 1.25% per month .....	16		00
17	Total tax, penalty and interest (add lines 13-16).....	17	777	00

The Oklahoma Tax Commission is not required to give actual notice to taxpayers of changes in any state tax law.



Name shown on Form 512-S: TREE FIXR UPPER, INC.

FEIN 00-0000009

**SECTION TWO: FRANCHISE TAX**

Place an "X" here if filing a combined corporate income and franchise tax return and complete Section Two. Corporations filing a Form 200 will skip Section Two and complete Section Three.

To complete lines 18-25, use the figures from page 6, lines 12-19.

18	Tax.....	18	7,584	00
19	Registered Agents Fee.....	19		00
20	Interest.....	20		00
21	Penalty.....	21		00
22	Reinstatement Fee.....	22		00
23	Previous Payment.....	23	( 8,000 )	00
24	Overpayment..... Franchise Tax Overpayment →	24	416	00
25	Total Due..... Franchise Tax Balance →	25		00

**SECTION THREE: TOTAL**

All corporations complete Section Three. Combine Income Tax and Franchise Tax. If there is a net balance due, complete line 26. If there is a net overpayment, complete lines 27-31.

**Balance Due**

26 Total Balance Due..... Balance Due → 26 361 00

**Overpayment**

27 Total Overpayment..... 27 00  
 28 Amount of line 27 to be credited to 2021 estimated income tax (original return only)..... 28 00

Line 29 provides you the opportunity to make a financial gift from your refund to a variety of Oklahoma organizations. Place the line number of the organization from the line 29 instructions in the box below and enter the amount you are donating. If giving to more than one organization, put a "99" in the box and provide a schedule showing how you would like your donation split.

29 Donations from your refund.....  \$2  \$5  \$ \_\_\_\_\_ 29 \_\_\_\_\_ 00  
 30 Total (add lines 28 and 29)..... 30 \_\_\_\_\_ 00  
 31 Amount of line 27 to be refunded to you (line 27 minus line 30)..... Refund → 31 \_\_\_\_\_ 00

**Direct Deposit Note:**

All refunds must be by direct deposit. See Direct Deposit Information on page 18 of the 512-S Packet for details.

Is this refund going to or through an account that is located outside of the United States?  Yes  No

Deposit my refund in my:  checking account  savings account

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

If the Oklahoma Tax Commission may discuss this return with your tax preparer, place an 'X' here:

Under penalties of perjury, I declare I have examined this return, including any accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete. If prepared by person other than the taxpayer, this declaration is based on all information of which preparer has any knowledge.

Make check payable to the Oklahoma Tax Commission

<b>Corporate Seal</b>	Signature of Officer Date	Signature of Preparer Date
	Printed Name of Officer TALBERT OAKS	Printed Name of Preparer JOHNNY APPLESEE
	Title OFFICER	Phone Number 405-555-1212
	Phone Number 512-555-1212	Preparer's PTIN P66666666



Name shown on Form 512-S: TREE FIXR UPPER, INC.

FEIN 00-0000009

**PART 2: ORDINARY INCOME FROM TRADE OR BUSINESS**

Complete Column A. Column B should be completed by S Corporations whose income is all within Oklahoma and/or by those whose income is partly within and partly without Oklahoma (not of a unitary nature). CAUTION: Include only trade or business income and expenses on lines 1a through 21 below.

		Column A As reported on Federal Return	Column B Total applicable to Oklahoma
1	a. Gross receipts or sales	\$ 1,900,670.400	
	b. Minus returns and allowances		
2	Cost of goods sold and/or operations	1860100750.00	
3	Gross profit (subtract line 2 from line 1)	40,569,650.00	
4	Net gain (loss) (Form 4797 Part II, line 17)	.00	
5	Other income (loss) (provide schedule)	420,200.00	
6	<b>Total income</b> (loss) (add lines 3 through 5)	40,989,850.00	
7	Compensation of officers	8,500,400.00	
8	Salaries and wages	6,372,055.00	
9	Repairs and maintenance	500,101.00	
10	Bad debts	.00	
11	Rent	6,650,188.00	
12	Taxes and licenses	13,980,990.00	
13	Interest	120,100.00	
14	Depreciation	26,234.00	
15	Depletion (do not deduct oil and gas depletion)	.00	
16	Advertising	890,700.00	
17	Pension, profit-sharing, etc. plans	1,300,000.00	
18	Employee benefit programs	.00	
19	Other deductions (provide schedule)	20,140,029.00	
20	<b>Total deductions</b> (add lines 7 through 19)	58,480,797.00	
21	<b>Ordinary Income (Loss) from trade or business:</b>		
	Subtract line 20 from line 6. Enter here and below on Part 3, line 1	(17490947).00	

**PART 3: SHAREHOLDERS' PRO RATA SHARE ITEMS**

		Column A As reported on Federal Return	Column B Total applicable to Oklahoma
<b>INCOME (LINES 1 THROUGH 11)</b>			
1	Ordinary income (loss) from trade or business (from above on Part 2, line 21)	(17490947).00	00
2	Net income (loss) from rental real estate activity(ies) (provide schedule)	.00	00
3	Net income (loss) from other rental activity(ies) (provide schedule)	.00	00
4	Interest income		
	a: Interest on loans, notes, mortgages, bonds, etc.	.00	4a
	b: Interest on obligations of a state or political subdivision		4b
	c: Interest on obligations of the United States	.00	4c
	d: Other interest income	2,500,000.00	4d
5	Dividend income	2,480,000.00	00
6	Royalties	.00	00
7	Net short-term capital gain (loss) (Schedule D, 1120-S)	.00	00
8	Net long-term capital gain (loss) (Schedule D, 1120-S)	.00	00
9	Net gain (loss) under Section 1231 (other than due to casualty or theft)	.00	00
10	Other (provide schedule)	.00	00
11	<b>Total income</b> (add lines 1 through 10)	(12510947).00	00
<b>DEDUCTIONS (LINES 12 THROUGH 17)</b>			
12	Section 179 deduction (provide schedule)	.00	12
13	Contributions	500,000.00	00
14	Deductions related to portfolio income	340.00	00
15	Intangible drilling costs	.00	00
16	Other deductions authorized by law (provide schedule)	320,210.00	00
17	<b>Total Deductions</b> (add lines 12 through 16)	820,550.00	00
<b>TOTAL (LINE 18)</b>			
18	Net distributable income (line 11 minus line 17)	(13331497).00	00
			202,255.00

If Federal and Oklahoma distributable net incomes are the same, please see instructions on page 7 of packet.



Name shown on Form 512-S: TREE FIXR UPPER, INC.

FEIN 00-0000009

**PART 4: Computation of Oklahoma Taxable Income of a Unitary Enterprise whose Income is Partly within and Partly without Oklahoma**

1	Net distributable income from Page 3, Part 3, Column A, line 18.....		1	(13,331,497)
2	Add: (a) Taxes based on income .....	2a		
	(b) Unallowable deduction (provide schedule) .....	2b	500,000	
	(c) Other income (provide schedule).....	2c		
	(d) Total of lines 2a through 2c.....	2d	500,000	
3	Deduct all items separately allocated:			
	(a) Interest on obligations of the United States.....	3a		
	(b) <u>DIVIDEND &amp; INTEREST INCOME</u> .....	3b	4,980,000	
	(c) <u>PARTNERSHIP LOSS</u> .....	3c	(320,210)	
	(d) Total of lines 3a through 3c.....	3d	4,659,790	
(Note: Items listed in 2 and 3 above must be net amounts supported by schedules showing source, location, expenses, etc.)				
4	Net apportionable income (line 1 plus line 2d, minus line 3d) .....		4	(17,491,287)
5	Oklahoma's portion thereof _____%, from schedule below .....		5	(4,777,745)
6	Add items separately allocated to Oklahoma:			
	(a) <u>DIVIDEND INCOME</u> .....	6a	2,480,000	
	(b) <u>INTEREST INCOME</u> .....	6b	2,500,000	
	(c) .....	6c		
	(d) .....	6d		
	(e) Total of lines 6a through 6d .....	6e	4,980,000	
7	Oklahoma net distributable income (add lines 5 and 6e; enter here and on Page 3, Part 3, Column B, line 18) ...		7	202,255

**APPORTIONMENT FORMULA**

	Column A Total Within Oklahoma	Column B Total Within and Without Oklahoma	Column C (A divided by B) Percent Within Oklahoma	
1	Value of real and tangible personal property used in the unitary business (by averaging the values at the beginning and ending of the tax period).			
	(a) Owned property (at original cost):			
	(i) Inventories .....	1ai	26,276,810 / 91,640,661	
	(ii) Depreciable property.....	1aii	12,762,589 / 40,270,500	
	(iii) Land .....	1aiii	1,100,450	
	(iv) Total of section "a" .....	1aiv	39,039,399 / 133,011,611	
	(b) Rented property (capitalize at 8 times net rental paid) ..	1b	21,732,126 / 53,201,504	
	(c) Total of sections "a" and "b" above.....	1c	\$ 60,771,525 / \$ 186,213,115 = 32.6355 %	
2	(a) Payroll .....	2a	77,631,482 / 273,751,850	
	(b) Less: Officer's salaries .....	2b	4,575,125 / 8,500,400	
	(c) Total (subtract officer's salaries from payroll).....	2c	\$ 73,056,357 / \$ 265,251,450 = 27.5423 %	
3	Sales :			
	(a) Sales delivered or shipped to Oklahoma purchasers:			
	(i) Shipped from outside Oklahoma.....	3ai		
	(ii) Shipped from within Oklahoma .....	3aii	336,891,527	
	(b) Sales shipped from Oklahoma to:			
	(i) The United States Government .....	3bi		
	(ii) Purchasers in a state or country where the corporation is not taxable (i.e. under Public Law 86-272) ...	3bii	76,832,961	
	(c) Total of sections "a" and "b".....	3c	\$ 413,724,488 / \$ 1,900,670,400 = 21.7673 %	
4	If Revenue, Traffic Units or Miles Traveled is used rather than Sales, indicate here: _____			
5	Total percent (sum of items 1, 2 and 3) .....		5	81.9451 %
6	Average percent (1/3 of total percent) (Carry to Part 4, line 5 above).....		6	27.3150 %

**Note: Provide a complete copy of your Federal return.**



Name shown on Form 512-S: TREE FIXR UPPER, INC.

FEIN 00-0000009

**PART 5: SHAREHOLDERS' PRO RATA SHARE OF INCOME**

Enter the information for each shareholder. If there are more than 3 shareholders, use Form 512-S-SUP to enter the additional shareholders. Use as many Forms 512-S-SUP as needed.

	Shareholder 1	Shareholder 2	Shareholder 3
1 Name and address of each shareholder	ROSE B TRIM	BOBBY SUE	BILLY BOB TRIM
Name:			
Address:	57 ANY STREET	98 BACKSTREET	78 BOO STREET
City, State, ZIP:	ANYTOWN, PA 17201	HOT SPRINGS AR 71901	SHAWNEE OK 73132
2 SSN or FEIN	514-06-0014	514-06-0015	514-06-0016
3 Ownership Percentage	40%	30%	30%
4 Distributable Federal Income (Part 3, Column A, line 18 times Part 5 line 3)	(5,332,599)	(3,999,449)	(3,999,449)
5 Distributable Oklahoma Income (Part 3, Column B, line 18 times Part 5 line 3**)	80,902	60,677	60,676
6 Oil and Gas Depletion (Federal)			
7 Oil and Gas Depletion (Oklahoma)			
8 Amount of Credit			
9 Type of Credit			
10 Amount of Withholding			
11 Type of Withholding			

**NONRESIDENT SHAREHOLDER (IF THE ELECTING PTE BOX IS CHECKED ON PAGE 1, LEAVE LINES 12-14 BLANK AND COMPLETE FORM 587-PTE)**

12 Is a signed Form 512-SA provided? If nonresident agreement (Form 512-SA) is NOT provided, the S Corporation will be taxed on the income reported in line 13.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
13 Nonresident Share of Income to Tax if line 12 is NO (enter the distributable Oklahoma income from line 5)		60,677	

**TOTAL: NONRESIDENT SHARE OF INCOME TO TAX**

14 Add amounts shown in line 13 above for all Shareholders, and if applicable, from Form 512-S-SUP. Enter here and on Page 1, Part 1, line 1a.....\$	60,677
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**\*\*NOTE:** The amount shown in Part 3, Column B, line 18, Oklahoma net distributable income, may not be the amount to be entered on the shareholder's Oklahoma income tax return. This amount includes all allowable shareholder's income, losses, and deductions. Some of these items may be limited on the Federal return. If these items are allowed in full or part on your Federal income tax return, they will be allowed to the same extent on your Oklahoma return.

**Notice:** Forms required to compute withholding and credits must be provided with corporate return. Examples of these include: Form 1099 MISC, Form 500A: Non-resident Royalty Withholding, Form 511CR: Other Credits, Form 506: Investment/New Jobs Credit and Form 529: Small Business Guaranty Fee Credit. Schedules or authorization must be furnished.

**Note: Provide a complete copy of your Federal Return.**

**PART 6: ADDITIONAL INFORMATION**

**Location of Principal Accounting Records**

100 EFILE DRIVE ANYTOWN TX 78621  
 Address City State Zip

Has the Internal Revenue Service redetermined your tax liability for prior years?  Yes  No What years? \_\_\_\_\_  
 Did you file amended returns for the years stated above?  Yes  No  N/A  
 Has the statute of limitations been extended by consent for any prior years?  Yes  No What years? \_\_\_\_\_

Business name TREE FIXR UPPER, INC. Date business began in Oklahoma 11/19/1957

Principal location(s) in Oklahoma 39 ANY STREET, OKLAHOMA CITY OK 73110





# Franchise Tax Worksheet

A. Taxpayer FEIN 00-0000009	B. Account Number FRX-10012267-03
-Office Use Only-	

C. Mailing Address Change

C. New Mailing Address

City, State or Province, Country and Postal Code

Name  
TREE FIXR UPPER, INC.

Address  
39 ANY STREET

City, State or Province, Country and Postal Code  
OKLAHOMA CITY OK 73110

D. Balance Sheet Date (MM/DD/YY)  
12/31/20

1. Total net assets in Oklahoma (Franchise Tax Balance Sheet: Line 15, Column B) ..... 1
2. Total net assets (Franchise Tax Balance Sheet: Line 15, Column A)  
If all assets are in Oklahoma, enter "0" ..... 2
3. Total current liabilities (Franchise Tax Balance Sheet: Line 23)  
If line 2 is zero, complete line 4. If line 2 is not zero, complete lines 5-11 ..... 3
4. Capital employed in Oklahoma (line 1 minus line 3)  
Round to next highest \$1,000. If line 4 is completed, skip to line 12 ..... 4
5. Total gross business done by corporation in Oklahoma  
(Franchise Tax Balance Sheet: Line 34) ..... 5
6. Total value of assets and business done in Oklahoma (Total of lines 1 and 5) ..... 6
7. Total gross business done by corporation (Franchise Tax Balance Sheet: Line 33) ..... 7
8. Total value of assets and business done (Total of lines 2 and 7) ..... 8
9. Percentage of Oklahoma assets (See instructions)  
Check appropriate Box:  Option 1  Option 2 ..... 9
10. Value of capital subject to apportionment (Line 2 minus line 3) ..... 10
11. Capital apportioned to Oklahoma (Line 10 multiplied by line 9)  
Round to the next highest \$1,000 ..... 11

	Dollars	Cents
1	39,040,400	.00
2	560,500,183	.00
3	473,410,279	.00
4		.00
5	336,891,527	.00
6	375,931,927	.00
7	1,900,670,400	.00
8	2,461,170,583	.00
9	6.9653	%
10	87,089,904	.00
11	6,067,000	.00

12. Tax (See instructions) (If less than \$250, enter 0) ..... 12 =
13. Registered agents fee (\$100.00 - See instructions) ..... 13 +
14. Interest ..... 14 +
15. Penalty ..... 15 +
16. Reinstatement fee (\$150.00 - See instructions) ..... 16 +
17. Previous payment ..... 17 -
18. Overpayment ..... 18 =
19. **Total Due** ..... 19 =

	Dollars	Cents
12	7,583.	75
13		.00
14		
15		
16		.00
17	8,000.	00
18	416.	25
19		



## Franchise Tax Schedule A: Current Officer Information

**NOTE: Inclusion of Officers Is Mandatory.**

Taxpayer Name TREE FIXR UPPER, INC.	FEIN 00-0000009	Account Number FRX-10012267-03
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**Corporate officers effective as of 12/31/20 are as follows:**

(Date)

### Schedule A: Current Officer Information

The officers listed below should be those whose term was in effect as of the close of the income tax year. Be sure to include names, addresses, and **social security numbers**.

1. Name (First, MI, Last) ROSE B. TRIM	Social Security Number 514-06-0014
Home Address (street and number) 57 ANY STREET	Daytime Phone (area code and number)
City, State or Province, Country and Postal Code ANYTOWN, PA 17201	Title PRESIDENT
2. Name (First, MI, Last) BOBBY SUE	Social Security Number 514-06-0015
Home Address (street and number) 98 BACKSTREET	Daytime Phone (area code and number)
City, State or Province, Country and Postal Code HOT SPRINGS, AR 71901	Title VICE-PRESIDENT
3. Name (First, MI, Last) BILLY BOB TRIM	Social Security Number 514-06-0016
Home Address (street and number) 78 BOO STREET	Daytime Phone (area code and number)
City, State or Province, Country and Postal Code SHAWNEE, OK 73132	Title SECRETARY/TREASURER
4. Name (First, MI, Last)	Social Security Number
Home Address (street and number)	Daytime Phone (area code and number)
City, State or Province, Country and Postal Code	Title

**Please include social security numbers of officers.**

**710:1-3-6. Use of Federal Employer Identification Numbers and other identification numbers mandatory**

All returns, applications, and forms required to be filed with the Oklahoma Tax Commission in the administration of this State's tax laws shall bear the **Federal Employer's Identification Number(s)**, the **Taxpayer Identification Number**, and/or other government issued identification number of the person, firm, or corporation filing the item and of all persons required by law or agency rule to be named or listed.

**[Source: Amended at 32 Ok Reg 1330, eff 8-27-15]**

**710:1-3-8. Confidentiality of records**

All Federal Employer's Identification and/or Social Security Account Numbers are deemed to be included in the confidential records of the Commission.

## Franchise Tax Schedules B, C and D



Taxpayer Name TREE FIXR UPPER, INC.	FEIN 00-0000009
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This page contains Schedules B, C, and D for the completion of the Oklahoma Annual Franchise Tax Return. Provide additional pages if further space is needed on Schedules C and D.

### Schedule B General Information (to be completed in detail)

If the business is not a "corporation," list the type of business structure, the date of formation, and county in which filed. \_\_\_\_\_

Name and address of Oklahoma "registered agent" \_\_\_\_\_  
 VERNON B FARMER, 9123 N HUDSON, OKLAHOMA CITY, OK 73126

Name of parent company if applicable: \_\_\_\_\_ FEIN: \_\_\_\_\_

Percent of outstanding stock owned by the parent company, if applicable: \_\_\_\_\_ %

In detail, please list the nature of business: ARCHITECTURE

Amount of authorized capital stock or shares:

(a) Common: 10,000 shares, par/book value of each share \$ 1,000 \$ 10,000,000

(b) First Preferred: \_\_\_\_\_ shares, par/book value of each share \$ \_\_\_\_\_ \$ \_\_\_\_\_

Total capital stock or shares issued and outstanding at the end of fiscal year:

(a) Common: 8,420 shares, par/book value of each share \$ 1,000 \$ 8,420,000

(b) First Preferred: \_\_\_\_\_ shares, par/book value of each share \$ \_\_\_\_\_ \$ \_\_\_\_\_

### Schedule C Related Companies: Subsidiaries and Affiliates

**Subsidiaries** (Companies in which you own 15 percent or more of the outstanding stock)

Name of Subsidiary	FEIN	Percentage Owned (%)	Financial Investment (\$)

**Affiliates** (Companies related other than by direct stock ownership)

Name of Affiliate	FEIN	How related?

### Schedule D Details of Current Debt shown on Balance Sheet

Name of Lender	Original Date of Issuance	Maturity Date	Original Amount of Instrument	Balance remaining of amounts payable within 3 years of Date of Issuance
CITIBANK	03/01/17	04/01/21	1,500,000	500,000

# Franchise Tax Balance Sheet



Taxpayer Name <b>TREE FIXR UPPER, INC.</b>	FEIN <b>00-0000009</b>	As of the Last Income Tax Year Ended: (MM/DD/YY) <b>12/31/20</b>
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This page contains the Balance Sheet which completes the Oklahoma Annual Franchise Tax Return.

	<b>Column A</b>	<b>Column B</b>	<b>Liabilities and Stockholders' Equity</b>	<b>Column C</b>
<b>Assets</b>	Total Everywhere as per Books of Account. If all Property is in Oklahoma, Do Not Use this Column.	Total in Oklahoma as per Books of Account.		Total Everywhere as per Books of Account.
1. Cash .....	125,954,114		19. Accounts payable .....	449,809,280
2. Notes and accounts receivable .....	310,294,485		20. Accrued payables .....	
3. Inventories .....	91,180,300	27,500,400	21. Indebtedness payable three years or less after issuance (see schedule D) .....	500,000
4. Government obligations and other bonds.....			22. Other current liabilities.....	23,100,999
5. Other current assets (please provide schedule) .....	2,300,000		23. <b>Total Current Liabilities</b> .....	473,410,279
6. <b>Total Current Assets</b> (add lines 1A-5A and 1B-5B).	529,728,899	27,500,400	(Lines: 19-22)	
7. Mortgage and real estate loans .....			24. Inter-company payables (a) To parent company.....	
8. Other investments (please provide schedule) .....	600,484		(b) To subsidiary company.....	
9. (a) Building .....	40,270,500	14,940,000	(c) To affiliated company.....	
(b) Less accumulated depreciation .....	12,300,600	3,400,000	25. Indebtedness maturing and payable in more than three years from the date of issu- ance.....	18,300,300
10. (a) Fixed depreciable assets .....			26. Loans from stockholders not payable within three years.....	
(b) Less accumulated depreciation .....			27. Other liabilities .....	1,700,900
11. (a) Depletable assets.....			28. Capital Stock (a) Preferred stock.....	
(b) Less accumulated depletion .....			(b) Common Stock.....	8,420,330
12. Land.....	2,200,900		29. Paid-in or capital surplus (provide reconciliation) .....	58,668,374
13. (a) Intangible assets .....			30. Retained earnings .....	
(b) Less accumulated amortization .....			31. Other capital accounts.....	
14. Other assets .....			32. <b>Total Liabilities and Stockholders' Equity</b> .....	560,500,183
15. <b>Net Assets</b> .....	560,500,183	39,040,400	(Lines: 23-31)	
(Lines: 6-14)			33. <b>Total gross business done everywhere (sales and service)</b> .....	1,900,670,400
16. Inter-company receivables: (a) From parent company .....			(from income tax return)	
(b) From subsidiary company .....			34. <b>Total gross business done in Oklahoma (sales and service)</b> .....	336,891,527
(c) From affiliated company .....			(from income tax return)	
17. Bank holding company stock in subsidiary bank .....				
18. <b>TOTAL ASSETS</b> .....	560,500,183	39,040,400		
(Lines: 15-17)				



Name shown on Form 512-S: TREE FIXR UPPER, INC.

Federal Employer Identification Number: 00-0000009

**Schedule 512-S-X: Amended Return Schedule**

**A** Did you file an amended Federal income tax return?  Yes  No

Provide a copy of the amended Federal return and a copy of "Statement of Adjustment," IRS refund check or deposit slip.

**B** If this return is being filed due to a Federal audit, furnish a complete copy of the RAR.

**C** Explanation or Reason for Amended Return (Provide all necessary schedules):

Multiple horizontal lines for providing an explanation or reason for the amended return.

**Instructions for filing an Amended Return**

When filing an amended return, place an "X" in the Amended Return check-box at the top of page 1. Enter any amount(s) paid with the original return plus any amount(s) paid after it was filed on line 9. Enter any refund previously received or overpayment applied on line 10. Complete the Amended Return Schedule, Schedule 512-S-X above.

Provide the amended Federal return and proof of disposition by the Internal Revenue Service when applicable.

An overpayment on an amended return may not be credited to estimated tax, but will be refunded. The amount applied to estimated tax on the original return cannot be adjusted.



# Nonresident Shareholder Agreement

Not for a shareholder of an electing pass-through entity (PTE)

FORM **512-SA** 2020

I, ROSE B. TRIM, the undersigned, do agree I will file an Oklahoma Income Tax Return for the taxable year ending 12/31/20. I will include, in Oklahoma adjusted gross income, my share of distributable taxable income or net operating loss of the corporation named below to the extent such income, gain or loss, is at the corporate level, derived from sources within Oklahoma. I further state I made and executed this agreement for the purpose of filing it with the following named corporation to be submitted with the Oklahoma Small Business Corporation Income Tax Return, Form 512-S, filed by the corporation for the taxable year indicated above.

Corporation TREE FIXR UPPER, INC.

Street Address or Post Office Box 39 ANY STREET

City OKLAHOMA CITY State OK ZIP 73110

Federal Employer Identification Number 00-0000009

Rose B. Trim  
Signature of Shareholder Executing Agreement

\_\_\_\_\_  
Social Security Number or Federal Employer Identification Number

Dated this 15TH day of MARCH, 2021

### **Corporation Please Note:**

This agreement must be filed with the original Small Business Corporation Income Tax Return, Form 512-S, for each nonresident shareholder. Otherwise, the corporation shall be taxed on that part of the corporation's net taxable income allocable to the shares of stock owned by the nonresident shareholder. Once the agreement has been signed, it is irrevocable for this taxable year. Rule 710:50-21-1

An electing pass-through entity (PTE) is not required to file Form 512-SA because the nonresident shareholder will not be required to file an Oklahoma income tax return on the nonresident shareholder's share of distributable income of the PTE. 68 OS Sec. 2355.1P-1 through 2355.1P-4.

**ITE**  
**Application for Extension**  
**of Time to File an Oklahoma Income Tax Return**  
**For Corporations, Partnerships and Fiduciaries**

(This is NOT an extension of time for payment of tax. Individuals use Form 504-I)  
 (See Instructions)



FORM **504-C** NONO

For the year January 1 - December 31, or other taxable year beginning [ ] , 2020 ending [ ] , [ ] .

Corporate, Partnership, or Fiduciary Name TREE FIXR UPPER, INC.	Federal Employer Identification Number: 00-0000009
Mailing address (number and street) 39 ANY STREET	CHECK THE FORM TYPE FOR THE RETURN THIS APPLICATION IS FOR: <input type="checkbox"/> Form 512 <input type="checkbox"/> Form 513 <input type="checkbox"/> Form 512-E <input checked="" type="checkbox"/> Form 512-S <input type="checkbox"/> Form 513NR <input type="checkbox"/> Form 514
City, State and ZIP OKLAHOMA CITY, OK 73110	

**IMPORTANT: Extension is valid only if 90% of the tax liability is paid by the original due date.**

An **Extension of Time to File** with the IRS has been granted to:                      DATE 09/15/21

**Extension of Time to File** with the Okla. Tax Commission is requested to:                      DATE \_\_\_\_\_

If requesting an extension of time to file beyond the date of the federal extension, state the reason here:  
 \_\_\_\_\_

**OKLAHOMA INCOME TAX COMPUTATION**

1. Total income tax liability (you may estimate this amount)..... <i>Note: You must enter an amount on line 1. If you do not expect to owe tax, enter zero.</i>	1	2,500	00
2. Oklahoma income tax withheld.....	2		00
3. Estimated tax payments (include prior year overpayment allowed as a credit).....	3		00
4. Other payments and credits you expect to claim on your return.....	4		00
5. Add lines 2, 3 and 4.....	5		00
6. Income tax balance due (subtract line 5 from line 1).....	6		00
7. <b>Amount of income tax you are paying. Important:</b> Extension is valid only if 90% of the income tax liability is paid by the original due date..... <b>ITE</b>	7	2,500	00
8. <b>If filing a combined Corporate Income and Franchise Tax return</b> , enter any Estimated Franchise tax you are paying. (Leave blank if filing the stand-alone Franchise Tax return, Form 200.)..... <b>FRX</b>	8	8,000	00
9. <b>Total amount you are paying</b> (add lines 7 and 8).....	9	10,500	00

**SIGNATURE**  
 Under penalty of perjury, I declare that the information contained in this document, attachments and schedules are true and correct to the best of my knowledge and belief.

Signature of Officer, Partner, Member or Fiduciary \_\_\_\_\_ Date \_\_\_\_\_

Paid Preparer's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Return with your payment, if applicable, to: Oklahoma Tax Commission • Income Tax • PO Box 26890 • Oklahoma City, OK 73126-0890.**