K-120S 2020

PARTNERSHIP OR S CORPORATION INCOME TAX RETURN

000 154020

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01012020 12312020 For the taxable year beginning endina 187004320 Filing an AMENDED return? Χ FIN INCAREOFORADDRESSLINEXXXXXXXXXXXXXXX C. Business Activity Code G. State of Commercial Domicile KS CITYXXXXXXXXXXXXXXXXX ST XXXXX-XXXX H. Enter number of shareholders / partners 500000 included in Part II. 2. S Corporation 500000 A. This return is being filed for X 1. Partnership D. Date Business Began in KS B. Method Used to Determine Income of Corporation in Kansas L Tax credits schedules are enclosed? Χ 12312020 J. Enter the original federal due date if other than Χ 1. Activity wholly within Kansas or single entity apportionment method 15th day of the 3rd month after the end of the E. Date Business Discontinued in KS tax year. Χ 2. Combined income method (Enclose Sch K-121S) 12312020 12312020 X 3. Common carrier mileage (Enclose mileage apportionment schedule) K. Name or address has changed? Χ F. State and Date of Incorporation 4. Alternative or separate accounting (See instructions under "Definitions' Χ L. Are you filing Form K-40C? Χ and enclose letter of authorization & schedule) KS 122020 Χ 5. Qualified elective two-factor (Part III) Year qualified 2020 M. Have you submitted Form K-120EL? Χ 12. Net income before apportionment (Add line -1999909999.99 -9999909999.19 1. Ordinary income from federal Schedule K 3 to line 7 and subtract line 11) 13. Nonbusiness income - Total Company 2a. Total of all other income from federal Sch K -9299909999.99 -9999909999.92 (Sch. req.) 2b. Total of allowable deductions from federal 14. Apportionable business income (Subtract line 13 from line 12) -9939909999.99 -1199909999.99 Schedule K 15. Average percent to Kansas (Part III, lines A. 3. Total federal income (Add lines 1 to line 2a -9994909999.99 100.0000 and subtract line 2b) 100.0000 _B 100.0000 c.100.0000 4. Total state and municipal interest (Sch Reg) -9999509999.99 16. Amount to Kansas (Multiply line 14 by line 15) -9999339999.99 5. Taxes on or measured by income or fees or -9999969999.99 payments in lieu of income taxes (Sch Reg) -9999904499.99 17. Nonbusiness income - Kansas (Sch Reg) -9999997999.99 6. Other additions to federal income (Sch Reg) -9999909955.99 18. Kansas Expensing Recapture (Sch Reg) 7. Total additions to federal income (Add lines -9999909899.99 4, 5 & 6) 19. Total Kansas income (Add lines 16, 17 -9999909999.66 and 18) 8. Interest on U.S. government obligations -9999909999.99 (Sch Req) 20. Estimated tax paid and amount credited -7799909999.99 forward (Sep. Sch.) 9. IRC Sec. 78 and 80% of foreign dividends -9999909990.99 (Sch Req) 21. Other tax payments (Sep. Sch.) -9988909999.99 10. Other subtractions from federal income -9922909999.99 (Sch Reg) -9988909999.99 22. Refund (Add lines 20 & 21) 11. Total subtractions from federal income (Add -9922909999.99 lines 8, 9 & 10) Χ I authorize the Director of Taxation or the Director's designee to discuss my K-120S 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 Preparer Preparer SSN Preparer Phone or EIN/PTIN Signature Number

PART I

ADDITIONAL INFORMATION

 Did the corporation file a Kansas Income Tax return under the sa year? Yes No If "no", enter previous name and E 	· · · · · · · · · · · · · · · · · · ·	Has your corporation been involved in any reorganization during the period covered by this return?NoYes If "yes", enclose a detailed explanation.						
Enter the address of the corporation's principal location in Kansa		5. 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 federa Forms 1139, 1120X, or Revenue Agent's Report along with the Kansas amended return.						
3. The corporation's books are in care of:			Rev	enue Agent's Report		Net Operating	Loss	
NameAddress			Ame	ended Return	Years	ended		
Telephone		Die I	DI G	STRIBUTION O	NE INI	COME		
PART II This schedule is to be completed for all partners or shareholders. If return. Individual partners or shareholders complete columns 1 thro	•	areholder	s, yo	u must complete a schedule s			w and submit it with your	
(1) Name and address of partner or shall	(Check box	x if	(2) SSN or EIN		(3) or shareholder's of ownership	(4) Partner's profit percent or shareholder's applicable percentage	
(a)		П						
(b)		Ħ						
(c)		Ħ						
(d)		Ħ						
(e)		Ħ						
(f)		╗						
(g)								
(h)								
(i)								
(j)								
(k)								
(1)								
See instructions for Nonresident Partner's or S	hareholder's Computation	of Col	umr	ns 6, 7 and 8.				
(5) Income from Kansas sources. Kansas resident individuals: Multiply column 4 by line 12. Nonresident individuals: If income is earned only from Kansas sources multiply column 4 by line 12. If earned from inside and outside of Kansas, multiply column 4 by sum of lines 16 and 17. All other partners or shareholders: Multiply column 4 by sum of lines 16 and 17.	(6) Partner's or shareholder's portice federal ordinary and other inco (losses) and deductions. Multiply the percentage in colun by line 3.	me	(7) Partner's or shareholder's portion of total Kansas income. Multiply the percentage in column 4 by line 12. (8) Partner's or shareho modification. See instructions. Enter Part A of Schedule S, Fo		nodification. ctions. Enter result in			
(a)								
(b)								
(c)								
(d)								
(e)								
(f)								
(g)								
(h)								
(i)								
(j)								
(k)								
	i							

Name as shown on Form K-120

KANSAS Corporation Apportionment Schedule

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Employer Identification Number (EIN)

154220

FOR USE BY CORPORATIONS APPORTIONING INCOME

(Corporations using the combined income method must use Schedule K-121S)

For the taxable year beginning

, ending

PART III	1		NT FORMULA		1	
A. Property	WITHIN	KANSAS	TOTAL C	OMPANY	PERCE	ENT
(1) Value of owned real and tangible personal	Beginning	End	Beginning	End	WITH	
property used in business at original cost:	of Year	of Year	of Year	of Year	KANS	AS
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 15A, page 1)					А	%
B. Payroll (Those corporations qualified and utilizing the e	elective two-factor formula mus	t complete this area only				
during the first year of qualifying. After the 10th y	rear, the business must re-qualit	fy.)	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 15B, page 1) (If quali	fied and utilizing the elective tw	vo-factor formula, do not				
carry this percentage to page 1)					В	%
Sales (Gross receipts, less returns and allowances)			1			
(1) Sales delivered or shipped to purchasers in Kansa						
(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				-		
(3) Dividends	, •	,			-	
Interest					-	
Rents					_	
Royalties					-	
Gains/losses from intangible asset sales					-	
Gross proceeds from tangible asset sales					_	
Other income (Enclose schedule)					-	
TOTAL RECEIPTS (Enter on line 15C, Page 1).					С	%
					LD(4)	
D(1). Total percent (Sum of lines A, B & C if qualified and utili D(2). Total percent (Sum of lines A & C if qualified and utilizin	,				D(1)	%

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PART IV - KANSAS PASS-THROUGH SCHEDULE

The distributions from the entities listed below 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 of Services of Pass-through Entity	Kansas Operations (Y / N)

PART V KANSAS QSUB - DISREGARDED ENTITY SCHEDULE

The disregarded entities listed below are included in this return.

QSub or Disregarded Entity Name	EIN of Disregarded Entity	Your Entity to which income of QSUB or Disregarded Entity is included	EIN to which income of QSub or Disregarded Entity is included	Principal Product of Services of Disregarded Entity	Kansas Operations (Y / N)