

SCHEDULE KCR
Form 720

41A720KCR (10-08)

Commonwealth of Kentucky
DEPARTMENT OF REVENUE

KENTUCKY
CONSOLIDATED RETURN SCHEDULE
(Attach All Applicable Schedules)

Taxable Year Ending

____/____
Mo. Yr.

Common Parent Corporation

Kentucky Corporation/LLET Account Number

		Total		Parent		Name _____ _____ FEIN _____ KY Corp./LLET Acct. No. _____		Name _____ _____ FEIN _____ KY Corp./LLET Acct. No. _____		Name _____ _____ FEIN _____ KY Corp./LLET Acct. No. _____	
1. Federal taxable income (Sch. CR or Sch. CR-C, line 28).....	1		00		00		00		00		00
(a) Intercompany eliminations	1(a)		00		00		00		00		00
Additions											
2. Interest income (state and local obligations)	2		00		00		00		00		00
3. State taxes based on net/gross income.....	3		00		00		00		00		00
4. Depreciation adjustment.....	4		00		00		00		00		00
5. Deductions attributable to nontaxable income.....	5		00		00		00		00		00
6. Related party expenses.....	6		00		00		00		00		00
7. Dividend paid deduction (REIT)....	7		00		00		00		00		00
8. Domestic production activities deduction	8		00		00		00		00		00
9. Other (attach schedule)	9		00		00		00		00		00
10. Total (add lines 1 through 9).....	10		00		00		00		00		00
Subtractions											
11. Interest income (U.S. obligations)	11		00		00		00		00		00
12. Dividend income.....	12		00		00		00		00		00
13. Federal work opportunity credit...	13		00		00		00		00		00
14. Depreciation adjustment.....	14		00		00		00		00		00
15. Other (attach schedule)	15		00		00		00		00		00
16. Net income (line 10 less lines 11 through 15)	16		00		00		00		00		00
17. Less nonbusiness income net of related expenses	17		00		00		00		00		00
18. Add Kentucky nonbusiness income net of related expenses ...	18		00		00		00		00		00
19. Kentucky net income (line 16 less line 17 plus line 18)	19		00		00		00		00		00



Schedule KCR – Kentucky Consolidated Return Schedule

GENERAL INSTRUCTIONS

Purpose of Form—This schedule must be completed and submitted with the consolidated income tax return (Form 720) to show the statutory adjustments for each member of the affiliated group. Each affiliate is reported net of all amounts resulting from transactions with other members of this consolidated group (intercompany eliminations).

Specific Instructions—For each affiliate, enter the name, FEIN and Kentucky Corporation/LLET account number. If there are more than three affiliates in the affiliated group, use Schedule KCR-C, Kentucky Consolidated Return Schedule Continuation Sheet.

Line 1—Enter the amounts for the parent and each affiliate from Schedule CR, or CR-C, Line 28. **These amounts are before intercompany eliminations.**

Line 1(a)—Enter the amount of intercompany eliminations for the parent and each affiliate. The amount entered in the Total column will be the same as the amounts entered on the Schedule CR, Intercompany Eliminations column.

Line 2–15—The amounts entered in the Total column will be the same as Lines 2-15 on Form 720.

Line 16—This Total is the same as the amount on Form 720, Part II, Line 16.

Line 17—Enter the amount from Schedule A, Section II, Line 3 in the Total column.

Line 18—Enter the amount from Schedule A, Section II, Line 7 in the Total column.

Line 19—This is the Kentucky net income **before** apportionment.