

720S

41A720S

Department of Revenue



A

Kentucky Corporation/LLET Account Number

KENTUCKY S CORPORATION INCOME TAX AND LLET RETURN 2010

See instructions.

Taxable period beginning \_\_\_\_\_, 2010, and ending \_\_\_\_\_, 20 \_\_\_\_.

Form header section containing: B Check applicable box(es); D Federal Identification Number; Taxable Year Ending; Name of S Corporation; State and Date of Incorporation; Principal Business Activity in KY; Number and Street; City, State, ZIP Code, Telephone Number; E Check if applicable; F Number of Shareholders.

Table with 3 columns: Description, Amount, and Total. Includes PART I - ORDINARY INCOME (LOSS) COMPUTATION and PART III - INCOME TAX COMPUTATION.

Table with 3 columns: Description, Amount, and Total. Includes PART II - LLET COMPUTATION and PART III - INCOME TAX COMPUTATION.

TAX PAYMENT SUMMARY (Round to nearest dollar) section with columns for LLET and INCOME, and a box for payment instructions: Make check payable to: Kentucky State Treasurer; Mail return with payment to: Kentucky Department of Revenue, Frankfort, Kentucky 40620.



**SCHEDULE Q— KENTUCKY S CORPORATION QUESTIONNAIRE**

**IMPORTANT:** Questions 4–10 must be completed by all S corporations. If this is the S corporation's initial return or if the S corporation did not file a return under the same name and same federal I.D. number for the preceding year, questions 1, 2 and 3 must be answered. **Failure to do so may result in a request for a delinquent return.**

1. Indicate whether: (a)  new business; (b)  successor to previously existing business which was organized as:  
 (1)  corporation; (2)  partnership; (3)  sole proprietorship; or (4)  other \_\_\_\_\_  
 If successor to previously existing business, give name, address and federal I.D. number of the previous business organization.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. List the following **Kentucky** account numbers. Enter N/A for any number not applicable.  
 Employer Withholding \_\_\_\_\_  
 Sales and Use Tax Permit \_\_\_\_\_  
 Consumer Use Tax \_\_\_\_\_  
 Unemployment Insurance \_\_\_\_\_  
 Coal Severance and/or Processing Tax \_\_\_\_\_

3. If a foreign S corporation, enter the date qualified to do business in Kentucky. \_\_\_ / \_\_\_ / \_\_\_

4. If change of accounting period, Item E on page 1, is checked, complete the following information:  
 Year End before the change:  
 Month \_\_\_\_\_ and Day \_\_\_\_\_  
 a.  Change from a Fiscal Year to a Calendar Year (NOT a 52/53 week filer)  
 b.  Change from a Calendar Year to a Fiscal Year (NOT a 52/53 week filer):  
 New Year End:  
 Month \_\_\_\_\_ and Day \_\_\_\_\_  
 c.  Change from a Fiscal Year to a Calendar Year (52/53 week filer):  
 New Year End: December and day of week \_\_\_\_\_

d.  Change from a Calendar Year to a Fiscal Year (52/53 week filer):  
 New Year End:  
 Month \_\_\_\_\_ and day of week \_\_\_\_\_  
 If a 52/53 week filer: (Choose one of the options below.)

i.  Option A: Ends on the same day of the week and whatever date this same day of the week last occurs in a calendar month.  
 ii.  Option B: Ends on the same day of the week and whatever date this same day of the week occurs that is the nearest to the last day of the calendar month.

5. The S corporation's books are in care of: (name and address)  
 \_\_\_\_\_  
 \_\_\_\_\_

6. Are disregarded entities included in this return?  Yes  No. If yes, list name, address and federal I.D. number of each entity.  
 \_\_\_\_\_  
 \_\_\_\_\_

7. Was the S corporation a partner or member in a pass-through entity doing business in Kentucky?  Yes  No. If yes, list name and federal I.D. number of each pass-through entity.  
 \_\_\_\_\_

Was the S corporation doing business in Kentucky other than through its interest held in a pass-through entity doing business in Kentucky?  Yes  No

8. Was this return prepared on: (a)  cash basis, (b)  accrual basis, (c)  other \_\_\_\_\_  
 9. Did the S corporation file a Kentucky tangible personal property tax return for January 1, 2011?  Yes  No

10. Is the S corporation currently under audit by the Internal Revenue Service?  Yes  No  
 If yes, enter years under audit \_\_\_\_\_  
 If the Internal Revenue Service has made final and unappealable adjustments to the corporation's taxable income which have not been reported to the department, check here  and file an amended Form 720S for each year adjusted. Attach a copy of the final determination to each amended return.

**OFFICER INFORMATION (Failure to Provide Requested Information May Result in a Penalty)**

Has the officer information entered below changed from the last return filed?  Yes  No

President's Name: \_\_\_\_\_  
 President's Home Address: \_\_\_\_\_  
 \_\_\_\_\_  
 President's Social Security Number: \_\_\_\_\_  
 Date Became President \_\_\_ / \_\_\_ / \_\_\_  
 Vice President's Name: \_\_\_\_\_  
 Vice President's Home Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Vice President's Social Security Number: \_\_\_\_\_

Treasurer's Name: \_\_\_\_\_  
 Treasurer's Home Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Treasurer's Social Security Number: \_\_\_\_\_  
 Secretary's Name: \_\_\_\_\_  
 Secretary's Home Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Secretary's Social Security Number: \_\_\_\_\_

I, the undersigned, declare under the penalties of perjury, that I have examined this return, including all accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete.

\_\_\_\_\_  
Signature of principal officer or chief accounting officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of person or firm preparing return

\_\_\_\_\_  
SSN, PTIN or FEIN Date

**May the DOR discuss this return with the preparer?**  
 Yes  No

E-mail Address: \_\_\_\_\_  
 Telephone No.: \_\_\_\_\_



**SCHEDULE K—SHAREHOLDERS’ SHARES OF INCOME, CREDITS, DEDUCTIONS, ETC.**

SECTION I	(a) Pro Rata Share Items	(b) Total Amount
<b>Income (Loss) and Deductions</b>		
1. Kentucky ordinary income (loss) from trade or business activities (page 1, Part I, line 10).....	1	00
2. Net income (loss) from rental real estate activities (attach federal Form 8825) .....	2	00
3. (a) Gross income from other rental activities.....	3(a)	00
(b) Less expenses from other rental activities (attach schedule) .....	(b)	00
(c) Net income (loss) from other rental activities (line 3a less line 3b) .....	3(c)	00
4. Portfolio income (loss):		
(a) Interest income .....	4(a)	00
(b) Dividend income.....	(b)	00
(c) Royalty income .....	(c)	00
(d) Net short-term capital gain (loss) (attach federal Schedule D and Kentucky Schedule D, if applicable).....	(d)	00
(e) Net long-term capital gain (loss) (attach federal Schedule D and Kentucky Schedule D, if applicable).....	(e)	00
(f) Other portfolio income (loss) (attach schedule) .....	(f)	00
5. Section 1231 net gain (loss) (other than due to casualty or theft) (attach federal and Kentucky Forms 4797).....	5	00
6. Other income (loss) (attach schedule) .....	6	00
7. Charitable contributions (attach schedule) and housing for homeless deduction (attach Schedule HH).....	7	00
8. IRC Section 179 expense deduction (attach federal Form 4562 and Kentucky Form 4562).....	8	00
9. Deductions related to portfolio income (loss) (attach schedule).....	9	00
10. Other deductions (attach schedule) .....	10	00
<b>Investment Interest</b>		
11. (a) Interest expense on investment debts .....	11(a)	00
(b) (1) Investment income included on lines 4(a), 4(b), 4(c) and 4(f) above .....	(b)(1)	00
(2) Investment expenses included on line 9 above .....	(2)	00
<b>Tax Credits</b>		
12. Skills Training Investment Tax Credit (attach copy of certification(s)) .....	12	00
13. Certified Rehabilitation Tax Credit (attach copy of certification(s)).....	13	00
14. Kentucky Unemployment Tax Credit (attach Schedule UTC) .....	14	00
15. Recycling/Composting Equipment Tax Credit (attach Schedule RC) .....	15	00
16. Kentucky Investment Fund Tax Credit (attach KEDFA notification) .....	16	00
17. Coal Incentive Tax Credit (attach Schedule CI) .....	17	00
18. Qualified Research Facility Tax Credit (attach Schedule QR).....	18	00
19. GED Incentive Tax Credit (attach Form DAEL-31) .....	19	00
20. Voluntary Environmental Remediation Tax Credit (attach Schedule VERB) .....	20	00
21. Biodiesel Tax Credit (attach Schedule BIO).....	21	00
22. Environmental Stewardship Tax Credit (attach Schedule KESA).....	22	00



**SCHEDULE K—SHAREHOLDERS’ SHARES OF INCOME, CREDITS, DEDUCTIONS, ETC.**

**SECTION I—continued** (a) Pro Rata Share Items (b) Total Amount

**Tax Credits—continued**

23. Clean Coal Incentive Tax Credit (attach Schedule CCI) .....	23		00
24. Ethanol Tax Credit (attach Schedule ETH).....	24		00
25. Cellulosic Ethanol Tax Credit (attach Schedule CELL).....	25		00

**Form 5695-K Pass-through Amounts (attach Form 5695-K)**

26. Energy Efficiency Products Tax Credit from Form 5695-K, line 6 .....	26		00
27. Energy Efficiency Products Tax Credit from Form 5695-K, line 12 .....	27		00
28. Energy Efficiency Products Tax Credit from Form 5695-K, line 18 .....	28		00
29. Energy Efficiency Products Tax Credit from Form 5695-K, line 36 .....	29		00
30. Energy Efficiency Products Tax Credit from Form 5695-K, line 36 .....	30		00
31. Energy Efficiency Products Tax Credit from Form 5695-K, line 51 .....	31		00
32. Energy Efficiency Products Tax Credit from Form 5695-K, line 51 .....	32		00
33. Energy Efficiency Products Tax Credit from Form 5695-K, line 57 .....	33		00
34. Energy Efficiency Products Tax Credit from Form 5695-K, line 63 .....	34		00
35. Railroad Maintenance and Improvement Tax Credit (attach Schedule RR-I) .....	35		00

**Other Items**

36. (a) Type of Section 59(e)(2) expenditures ► .....	36(a)		
(b) Amount of Section 59(e)(2) expenditures.....	(b)		00
37. Tax-exempt interest income .....	37		00
38. Other tax-exempt income.....	38		00
39. Nondeductible expenses .....	39		00
40. Total property distributions (including cash) other than dividends reported on line 42 below .....	40		00
41. Other items and amounts required to be reported separately to shareholders (attach schedule).....	41		
42. Total dividend distributions paid from accumulated earnings and profits.....	42		00

**SECTION II—Pass-through Items**

1. S corporation’s Kentucky sales from Schedule A, Section I, line 1 .....	1		00
2. S corporation’s total sales from Schedule A, Section I, line 2 .....	2		00
3. S corporation’s Kentucky property from Schedule A, Section I, line 5 .....	3		00
4. S corporation’s total property from Schedule A, Section I, line 6 .....	4		00
5. S corporation’s Kentucky payroll from Schedule A, Section I, line 8 .....	5		00
6. S corporation’s total payroll from Schedule A, Section I, line 9 .....	6		00
7. S corporation’s Kentucky gross profits from Schedule LLET, Section A, Column A, line 5 .....	7		00
8. S corporation’s total gross profits from all sources from Schedule LLET, Section A, Column B, line 5 .....	8		00
9. Limited liability entity tax (LLET) nonrefundable credit from page 1, Part II, the total of lines 4 and 6, less \$175 .....	9		00