



KENTUCKY SINGLE MEMBER LLC INDIVIDUALLY OWNED INCOME AND LLET RETURN



A LLET	2021 or tax years beginning (MM-DD-YY)	C Kentu	ıcky Corporation/LL	ET)-YY)	
Exemption Code	Name of LLC Account Number (Required) Change of Name Telephone Number					
Provider 3-Factor Apportionment Code	Number and Street					
	City	State	ZIP Code			
Check applicable boxes	☐ Initial return☐ Change of accounting period	State of Organization	Dn .	Princip	al Business Activity in KY	
	 ☐ Qualified investment partnership ☐ Final return (Complete Part IV) ☐ Short-period return (Complete Part IV) ☐ Amended return (Complete Part V) 	Date of Organizatio	janization NAICS		Code Number in KY	
Single Member i	s a:	If non-reside	ent, LLC must	t also file	Form 740NP-WH	1
ART I—KEN	ITUCKY NET DISTRIBUTABLE INCO	OME				
Ordinary i	ncome (loss)		▶1			0 0
Net incom	e (loss) from rental real estate activitie	es	▶2			0 (
Net incom	e (loss) from other rental activities		▶3			0 (
Interest in	come		▶4			0 (
Dividend i	ncome		▶5			0 (
Royalty in	come		▶6			0 (
	term and long-term capital gain (loss) do not include more than \$3,000.		▶7			0 (
3 IRC §1231	net gain (loss)		▶8			0 (
Other inco	me (attach schedule)		▶9			0 (
0 Other ded	uctions (attach schedule)		▶10			0 (
1 Total net di	stributable income (lines 1 through 9 les	s line 10)	▶ 11			0 (
12 Enter 100%	or the apportionment fraction from Sch	nedule A.	▶ 12			%
OFFICIAL USE ONL	Υ					
_		V				
P W 2 0 4		L #				



PART II—LLET COMPUTATION

1	Schedule L, Section E, line 1 (Page 6)	▶ 1	0 0
2	Tax credit recapture	▶2	0 0
3	Total (add lines 1 and 2)	▶3	0 0
4	Nonrefundable LLET credit from Kentucky Schedule(s) K-1	▶ 4	0 0
5	Nonrefundable tax credits (attach Schedule TCS)	▶5	0 0
6	LLET liability (greater of line 3 less lines 4 and 5 or \$175 minimum)	▶ 6	0 0
7	Estimated tax payments	▶7	0 0
8	Certified rehabilitation tax credit	▶8	0 0
9	Film industry tax credit	▶9	0 0
10	Extension payment	▶ 10	0 0
11	Prior year's tax credit	▶ 11	0 0
12	LLET paid on original return	▶ 12	0 0
13	LLET overpayment on original return	▶ 13	0 0
14	Estimated Tax Penalty (attach Form 2220-K)	▶ 14	0 0
15	LLET and Estimated Tax Penalty due (lines 6, 13, and 14 less lines 7 through 12) TAX DUE	▶ 15	0 0
16	LLET overpayment (lines 7 through 12 less lines 6,13, and 14	.) ►16	0 0
17	Credited to 2021 interest	▶ 17	
18	Credited to 2021 penalty	► 18	
19	Credited to 2022 LLET	▶ 19	0 0
20	Amount to be refunded (line 16 less lines 17 through 19)	▶20	
PA	RT III—LLET CREDIT FOR MEMBER		
1	LLET liability (Part II, the total of lines 4 and 6)	▶1	0 0
2	Minimum tax	2	1 7 5.00
3	Member's LLET credit (line 1 less line 2)	▶3	0 0
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PART I	IV-	-EXP	PLANAT	ION C	F FIN	IAL R	ETUR	N AN	D/OR SI	HORT-I	PERIOD RETURN	
	Char	nge of	erations i ownersh to previo	ip					U		status	
PART \	V —	EXPI	LANATI	ON OI	F AM E	ENDE	D RET	ΓURN	CHANG	SES		
												
											and statements, and to the best of my k ation of which preparer has any knowled	
		Signatu	ire of Memb	er							Date	
Sign									//			
Here		Name of Member (Please print)					Title					
		Signatu	ire of Prepar	er							Date / /	
Paid Prepar	er	Name o	of Preparer o	r Firm (Ple	ase print)					ID Number	
Use		Email a	nd/orTeleph	one No.							May the DOR discuss this return with YES NO	this preparer?
Enclos			oporting fed al Schedule				es, includ	ling	Refund or No Payment	Kentuck y Frankfort	y Department of Revenue t, KY 40618-0010	
Paymen	nt		Payable:				ırer		With Payment	Kentucky Frankfort	y Department of Revenue	





SCHEDULE Q-SINGLE MEMBER LIMITED LIABILITY COMPANY QUESTIONNAIRE

IMPORTANT: Questions 1 and 2 must be answered if this is the single member LLC's initial return or if a return was not filed under the same name and same federal I.D. number for the preceding year. Failure to do so may result in a request for a delinquent return.

1 Single member's (owner) name, address, and Social Security number or federal I.D. number

Name	
FEIN	-
Address	

2 If a foreign limited liability company, enter the date qualified to do business in Kentucky.

/	/		

Questions 3—7 must be completed by all single member limited liability companies (LLC).

3 The limited liability company's books are in care of:

Name		
Address		

4	4	Are disregarded entities included in this return?
		If yes, attach Schedule DE .
5		Was the limited liability company a partner in a pass-through entity doing business in Kentucky for the tax year being reported? ☐ Yes ☐ No
		If yes, list name and federal I.D. of the pass-through entity (ies). $ \\$
	Δ	Name
	A	FEIN
	В	Name
		FEIN
	С	Name
		FEIN
	D	Name
		FEIN
	E	Name
	_	FEIN
	F	Name
	_	FEIN
	G	Name
	, ~	

Was the limited liability company doing business in Kentucky other than through its interest held in a pass-through entity doing business in Kentucky?

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FEIN

7 Was this return prepared on:

- (a) □ cash basis
- (b) □ accrual basis
- (c) □ other



SCHEDULE L-LIMITED LIABILITY ENTITY TAX COMPUTATION

	Check the box and complete Schedule L-C, Limited Liability Entity Tax—Continuation Sheet, if the single member limited liability company filing this tax return is a partner or member of a limited liability pass-through entity or general partnership doing business in Kentucky. Enter the total amounts from Schedule L-C in Section A of this schedule.						
SE	CTION A—Computation of Kentucky Gross Receipt	s and Gross Profits					
1(a)	Gross receipts less returns and allowances	▶1(a)	0 0				
(b)	Kentucky statutory gross receipts reductions	► (b)	0 0				
2	Adjusted gross receipts (line 1(a) less line 1(b))	▶2	0 0				
3(a)	Cost of goods sold (attach Schedule COGS)	▶3(a)	0 0				
(b)	Kentucky statutory cost of goods sold reductions	▶ (b)	0 0				
4	Adjusted cost of goods sold (line 3(a) less line 3(b))	▶4	0 0				
5	Gross profits (line 2 less line 4)	▶ 5	0 0				
SE	CTION B—Computation of TOTAL Gross Receipts a	nd Gross Profits					
1	Adjusted gross receipts	▶1	0 0				
2	Cost of goods sold (attach Schedule COGS)	▶2	0 0				
3	Gross profits (line 1 less line 2)	▶3	0 0				



If Section B, Line 1 or 3 is \$3,000,000 or less, SKIP Sections C and D and enter \$175 in Section E, Line 1 and then enter \$175 on page 2, Part II, Line 1. Otherwise, continue to Section C on the next page.

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SCHEDULE L-LIMITED LIABILITY ENTITY TAX COMPUTATION—continued

SECTION C—Computation of Gross Receipts LLET

1	\$3,000,000, but less than \$6,000,000, enter the following:
	(Section A, line 2 × 0.00095) – $\begin{bmatrix} $2,850 \times ($6,000,000 - Section A, line 2) \\ $3,000,000 \end{bmatrix}$
	but in no case shall the result be less than zero.

2 If gross receipts from all sources (Section B, line 1)		
are \$6,000,000 or greater, enter the following: Section A, line 2 \times 0.00095.	▶2	0 0
3 Enter the amount from line 1 or line 2.	▶ 3	0 0

SECTION D—Computation of Gross Profits LLET

1 If gross profits from all sources (Section B, line 3) are greater than \$3,000,000, but less than \$6,000,000, enter the following:

(Section A, line 5 x 0.0075) -	\$22,500 x (\$6,000,000 – Section A, line 5)
	\$3,000,000

but in no case shall the result be less than zero. ▶1

2 If gross profits from all sources (Section B, line 3) are			
\$6,000,000 or greater, enter the following: Section A, line 5 x 0.0075.	▶2	0 0	,
	٠. ٥	0.0	П

3 Enter the amount from line 1 or line 2. ▶3 **0 0**

SECTION E—Computation of LLET

1 Enter the lesser of Section C, line 3 or Section D, line 3 here and on Page 2, Part II, line 1. If less than \$175, enter the minimum of \$175 here and on Page 2, Part II, line 1.