



KENTUCKY CORPORATION INCOME TAX AND LLET RETURN



	lendar year 202	24 or tax year beginning (MM-DD-YY)	<u>- </u>				I-DD-Y	Y)	20
A LLET Exempt	tion Code	D FEIN		E Kentud Accou	cky Corporati unt Number (I	ion/LLET Required)	_		
L		Name of Corporation				☐ Change o	f Name	Telephone Number	
B Income Exempti	Tax ion Code	Number and Street						State of Incorporation	
Γ		City		State	ZIP Code			Date of Incorporation	
		City		State	ZIP Coue			Jacob Miloorpa.a.a.	
	ive Consolidated h Form 722	F Name of Common Parent	Kentucky (Corporation/LI		nt Number	Principa	al Business Activity in KY	
C _{3-Factor}	·			(If different tha	n item ⊑) 				
Apportio	onment Code		☐ Short-per	I return—RAF riod return (Co rn (Complete	omplete Pa		NAICS	Code Number in KY	
PART	I—TAXAB	BLE INCOME COMPUTATION	N						
1 Fe	deral taxable	e income (Form 1120, line 28)		ı	▶1				0 0
ADDIT	ΓIONS:								
2 Inte	erest income	e (state and local obligations)		ŀ	▶2				0 0
3 Sta	ate taxes bas	sed on net/gross income		ŀ	▶3				0 0
4 De	epreciation a	djustment		!	▶4				0 0
-	eductions attr ee lines 22 a	ributable to nontaxable income nd 23)		I	▶5				0 0
6 Re	elated party e	expenses (attach Schedule RP	'C)	ļ	▶ 6				0 0
7 Div	vidend paid o	deduction (Captive REIT)		ŀ	▶7				0 0
8 Re	venue Agen	t Report (RAR)		ļ	▶8				0 0
9 Ke	ntucky capita	al gain from Kentucky Schedule	D, line 18	8	▶9				0 0
10 Lo:	ss from Form	n 4797 found on federal Form 11	20, line 9	9 1	▶10				0 0
11 Ga	ain from Kent	tucky Form 4797, Part II, line 17	7	l	▶11				0 0
12 Fe	deral allowa	ble depletion from Form 1120, li	ine 21	1	▶12				0 0
	AL USE ONLY								
P W 2 0				V A L					

Page 2 of 9

PART I—TAXABLE INCOME COMPUTATION—continued

ADDITIONS—continued		
13 Federal contribution deductions from Form 1120, line 19	▶13	0 0
14 Terminal Railroad Corporation adjustments	▶ 14	0 0
15 Federal allowable passive activity loss	▶15	0 0
16 Federal taxable loss of all exempt corporations	▶16	0 0
17 Reserved for future use	▶17	
18 Enter additions to federal taxable income from Kentucky Schedule(s) K-1	▶18	0 0
19 Internal Revenue Code adjustments (see instructions)	▶19	0 0
20 Other additions (attach explanation)	▶20	0 0
21 Total (add lines 1 through 20)	▶21	0 0
SUBTRACTIONS		
22 Interest income (U.S. obligations)	▶ 22	0 0
23 Dividend income	▶23	0 0
24 Reserved for future use	▶24	
25 Depreciation adjustment	▶25	0 0
26 Revenue Agent Report (RAR)	▶26	0 0
27 Capital gain from Form 1120, line 8	▶27	0 0
28 Gain from Form 4797 found on federal Form 1120, line 9	▶28	0 0
29 Loss from Kentucky Form 4797, Part II, line 17	▶29	0 0
30 50% of the gross royalty income derived from any disposal of coal with a retained economic interest defined by IRC §631(c) and all IRC §272 expenses if the corporation elects not to use percentage depletion	▶30	0 0
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Page 3 of 9

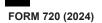
PART I—TAXABLE INCOME COMPUTATION—continued

SUBTRACTIONS—continued		
31 Terminal Railroad Corporation adjustments	▶31	0 0
32 Kentucky allowable passive activity loss	▶32	0 0
33 Kentucky allowable depletion	▶33	0 0
34 Kentucky contribution deductions	▶34	0 0
35 Reserved for future use	▶35	
36 Federal taxable income of all exempt corporations	▶36	0 0
37 Enter subtractions from federal taxable income from Kentucky Schedule(s) K-1	▶37	0 0
38 Internal Revenue Code adjustments (see instructions)	▶38	0 0
39 Other subtractions (attach explanation)	▶39	0 0
40 Net income (line 21 less lines 22 through 39)	▶40	0 0
41 Taxable net income (see instructions)	▶41	0 0
42 Net operating loss deduction (NOLD)	▶42	0 0
43 Taxable net income after NOLD (line 41 less line 42)	▶43	0 0

Page 4 of 9

PART II—LLET COMPUTATION

1	Schedule L, Section E, line 1 (Page 9)	▶ 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	Reserved for future use	▶ 7	
8	Estimated tax payments	▶8	0 0
9	Refundable tax credits (attach Schedule TCS)	▶9	0 0
10	Reserved for future use	▶10	
11	Extension payment	▶11	0 0
12	Prior year's tax credit	▶ 12	0 0
13	Income tax overpayment from Part III, line 17	▶13	0 0
14	LLET paid on original return	▶14	0 0
15	LLET overpayment on original return	▶15	0 0
16	Estimated Tax Penalty (attach Form 2220-K)	▶16	0 0
17	LLET and Estimated Tax Penalty Due (lines, 6, 15, and 16 less lines 7 through 14).	17	0 0
18	LLET overpayment (lines 7 through 14 less lines 6, 15, and 16)	▶18	0 0
19	Credited to 2024 income tax	▶19	0 0
20	Credited to 2024 interest	▶20	
21	Credited to 2024 late file/pay penalty	▶21	
22	Credited to 2025 LLET	▶22	0 0
23	Amount to be refunded (line 18 less lines 19 through 22)] ▶23	





Page 5 of 9

PART III—INCOME TAX COMPUTATION

1	Income tax (see instructions)	▶1	0 0
2	Tax credit recapture	▶2	0 0
3	Tax installment on LIFO recapture (see instructions)	▶3	0 0
4	Total (add lines 1 through 3)	▶4	0 0
5	Nonrefundable LLET credit from the Corporation LLE Credit Worksheet(s) (see instructions)	T ▶5	0 0
6	Nonrefundable LLET credit (Part II, line 6 less \$175)	▶6	0 0
7	Nonrefundable tax credits (attach Schedule TCS)	▶7	0 0
8	Net income tax liability (line 4 less lines 5 through 7 but not less than zero)	, ▶8	0 0
9	Estimated tax payments	▶9	0 0
10	Extension payment	▶10	0 0
11	Prior year's tax credit	▶11	0 0
12	LLET overpayment from Part II, line 19	▶12	0 0
13	Corporation income tax paid on original return	▶13	0 0
14	Corporation income tax overpayment on original return	rn ▶14	0 0
15	Income tax due (lines 8 and 14 less lines 9 through 13)	TAX DUE ▶15	0 0
16	Income tax overpayment (lines 9 through 13 less lines 8 and 14)	▶16	0 0
17	Credited to 2024 LLET	▶17	0 0
18	Credited to 2024 interest	▶18	
19	Credited to 2024 late file/pay penalty	▶19	
20	Credited to 2025 corporation income tax	▶20	0 0
21	Amount to be refunded (line 16 less lines 17 through 20)	REFUND ▶21	





Page	6	of	9

PART IV—EXPLAN	NATION OF FINAL	RETURN AND/OR	SHORT-PERIO	D RETURN
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☐ Ch	eased operations in Kentucky nange of ownership accessor to previous business	☐ Merger	in filing st	tatus
PART V	—EXPLANATION OF AMENDED RETUR	N CHAN	GES	
OFFICER I	NFORMATION			
	hedule listing the name, home address, and Social mber of the vice president, secretary, and treasurer.			
Has the atta	ached officer information changed from the last return filed? Name		□ Yes t's Home Ao	□ No ddress
	Social Security Number			
	ties of perjury, I declare that I have examined this return, including accon, and complete. Declaration of preparer (other than taxpayer) is based on			
	Signature of Officer			Date
Sign				''
Here	Name of Officer (Please print)			Title
	Signature of Preparer			Date / /
Paid Preparer Use	Name of Preparer or Firm (Please print)		ID Number	
036	Email and/or Telephone No.			May the DOR discuss this return with this preparer? YES NO
Enclose	Include federal Form 1120 with all supporting schedules and statements.	Refund or No Payment		/ Department of Revenue KY 40618-0010
Payment	Check Payable: Kentucky State Treasurer	With		y Department of Revenue





SCHEDULE Q—QUESTIONNAIRE

IMPORTANT: Questions 1 and 2 must be answered if this is the corporation'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.**

	Indicate whether: (a) □ new business, (b) □ successor to previously existing business which was organized as: (1) □ corporation (2) □ partnership (3) □ sole proprietorship (4) □ other					
	If successor to previously existing business, give name, address, and federal I.D. number of the previous business organization.					
N	lame					
F	EIN					
A	Address					
2	If a foreign corporation, enter the date qualified to do business in Kentucky.					
Oue	estions 3–10 must be completed by all corporations.					
3	The corporation's books are in care of:					
N	Name					
1	lame					
Α	lame Address					
A						
4						
	Are disregarded entities included in this return?					
5	Are disregarded entities included in this return? Yes No If yes, attach Schedule DE. Was the corporation a partner or member in a pass-through entity doing business in Kentucky? Yes No If yes, list the name(s) and federal I.D. number(s)					
	Are disregarded entities included in this return? Yes No If yes, attach Schedule DE. Was the corporation a partner or member in a pass-through entity doing business in Kentucky? Yes No If yes, list the name(s) and federal I.D. number(s) of the pass-through entity(ies).					
5	Are disregarded entities included in this return? Yes No If yes, attach Schedule DE. Was the corporation a partner or member in a pass-through entity doing business in Kentucky? Yes No If yes, list the name(s) and federal I.D. number(s) of the pass-through entity(ies).					

	6	Was the corporation doing business in Kentucky other than through its interest held in a pass-through entity doing business in Kentucky? $\ \square$ Yes $\ \square$ No
	7	Did the corporation at any time during the taxable year own more than 50 percent (50%) of the voting stock of another corporation that is part of a unitary business per KRS 141.202(2)(f)? Yes □ No
		If yes, list name and federal I.D. number of the entity.
		Name
		FEIN
	8	Was more than 50 percent (50%) of the corporation's voting stock owned by any corporation that is part of a unitary business per KRS 141.202(2)(f)? \Box Yes \Box No
		If yes, list name and federal I.D. number of each entity.
		If more than 3 companies, attach a supporting statement.
	A	Name
		FEIN
	В	Name
		FEIN
	c	Name
		FEIN
!	9	The federal tax return attached to this Kentucky tax return is: a pro forma federal tax return a copy of the federal tax return filed with the Internal Revenue Service.

10 Was this return prepared on:
(a) □ cash basis
(b) □ accrual basis
(c) □ other ______

Page 8 of 9

SCHEDULE L—LIMITED LIABILITY ENTITY TAX COMPUTATION

Check the box and complete Schedule L-C, Limited Liability Entity Tax—Continuation Sheet, if the corporation 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. SECTION A—Computation of Kentucky Gross Receipts and Gross Profits ▶ 1(a) 00 1(a) Gross receipts less returns and allowances ▶ (b) (b) Kentucky statutory gross receipts reductions ▶2 00 2 Adjusted gross receipts (line 1(a) less line 1(b)) ▶ 3(a) 00 3(a) Cost of goods sold (attach Schedule COGS) **▶** (b) (b) Kentucky statutory cost of goods sold reductions 00 Adjusted cost of goods sold (line 3(a) less line 3(b)) ▶4 4 ▶5 00 5 Gross profits (line 2 less line 4) SECTION B—Computation of TOTAL Gross Receipts and Gross Profits ▶1 00 1 Adjusted gross receipts ▶2 00 2 Cost of goods sold (attach Schedule COGS) 3 Gross profits (line 1 less line 2) ▶3 00



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 4, Part II, Line 1. Otherwise, continue to Section C on the next page.







SCHEDULE L—LIMITED LIABILITY ENTITY TAX COMPUTATION—continued

S	ECTION C—Computation of Gross Receipts LLET		
1	If gross receipts from all sources (Section B, line 1) are great \$3,000,000, but less than \$6,000,000, enter the following:	ter than	
	(Section A, line 2 x 0.00095) - \$2,850 x (\$6,000,000 - Section A, line 2) \$3,000,000		
	but in no case shall the result be less than zero.	▶1	0 0
2	If gross receipts from all sources (Section B, line 1) are \$6,000,000 or greater, enter the following: Section A, line 2 x 0.00095.	▶ 2	0 0
3	Enter the amount from line 1 or line 2.	▶3	0 0
S	ECTION D—Computation of Gross Profits LLET		
1	If gross profits from all sources (Section B, line 3) are greate \$3,000,000, but less than \$6,000,000, enter the following:	r than	
	(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	0 0
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
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 4, Part II, line 1. If less than \$175, enter the minimum of \$175 here and on Page 4, Part II, line 1.	▶ 1	0 0