1016008105

DEPARTMENT USE ONLY

AMENDED

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START ➜ **STEP A** PLEASE ENTER ALL DATES AS MM/DD/YYYY

Tax Year Beg. XX

Tax Year End. XX

STEP B TO ANSWER "YES", HIT "ENTER" TO CHECK BOX. TO ANSWER "NO", LEAVE BLANK.

Regulated Inv. Co. XX ☐

52-53 Week Filer XX ☐

Address Change XX ☐

Change Fed Group XX ☐

First Report XX ☐

KOZ/EIP Credit XX ☐

File Period Change XX ☐

Federal Amended Return XX ☐

STEP C

Corp Tax Account ID XX

Federal EIN XX

Business Activity Code XX

Corporation Name XX

Address Line 1 XX

Address Line 2 XX

City XX

State XX

ZIP XX

Date of Federal Change

STEP D

	A. Original Tax Liability	B. Amended Tax Liability	C. Estimated Payments & Credits on Deposit	D. Restricted Credits	Calculation: B minus C minus D	STEP E: Payment Make check for this amount payable to "PA Dept of Revenue"
CS/FF						
LOANS						
CNI						
TOTAL						

STEP F: Refund /Transfer Method
Select one of the following options:

Made Payment Via EFT ☐

A ☐ Total transfer of credit

B ☐ Total refund of credit

STEP G: Corporate Officer (Sign affirmation below)

NAME

PHONE

E-MAIL

FORM BARCODE

By checking the Amended box on this form, the taxpayer hereby consents to the extension of the assessment period for this tax year to one year from the date of filing of this amended report or three years from the filing of the original report, whichever period last expires and agrees to retain all required records pertaining to that tax and tax period until the end of the extended assessment period, regardless of any statutory provision providing for a shorter period of retention. For purposes of this extension, an original report filed before the due date is deemed to have been filed on the due date. I hereby affirm under penalties prescribed by law that this report (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete report and that I am authorized to execute this consent to the extension of the assessment period. If prepared by a person other than the taxpayer, his declaration is based on all information of which he has any knowledge.

DATE

Corporate Officer Signature/Date

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SECTION A: CS/FF

OLDEST PERIOD FIRST	TAX PERIOD BEGINNING	TAX PERIOD ENDING	BOOK INCOME
YEAR 1			
YEAR 2			
YEAR 3			
YEAR 4			
YEAR 5			
YEAR 6			
YEAR 7			
CUR YR			

Investment in LLC XX
Holding Company XX
Family Farm XX

2. **TOTAL BOOK INCOME** (sum of income for all tax periods up to, but not over 5 years total) 2
3. **DIVISOR** (in years and in part years rounded to three decimal places) See Instructions 3
4. Divide Line 2 by Line 3 4
5. **AVERAGE BOOK INCOME** -Enter Line 4 or if Line 4 is less than zero enter "0" 5

6 Divide Line 5 by 0.095 6
7. Shareholders' equity at the **END** of the current period 7
8. Shareholders' equity at the **BEGINNING** of the current period 8
9. If Line 7 is more than twice as great or less than half as much as Line 8, add Lines 7 and 8 and divide by 2. Otherwise enter Line 7. 9

10. **NET WORTH-** Enter Line 9 or if Line 9 is less than zero enter "0" 10
11. Multiply Line 10 by 0.75 11
12. Add Lines 6 and 11 12
13. Divide Line 12 by 2 13
14. $150,000 valuation deduction 14 -150000
15. **CAPITAL STOCK VALUE-** Line 13 less Line 14 but not less than "0". If 100% Taxable, enter Line 15 on Line 17. 15

16. Proportion of taxable assets or apportionment proportion (From Schedule A-1, Line 5) 16
17. **TAXABLE VALUE-** Multiply Line 15 by Line 16. If less than zero, enter "0" 17
18. **CAPITAL STOCK/FOREIGN FRANCHISE TAX-** Multiply Line 17 by 0.00289. 18

Total Beginning of Taxable Year Assets

Total End of Taxable Year Assets

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SECTION B: Bonus Depreciation

1. Current year fed. deprec. of 168k prop. 1
2. Current year adj. for disp. of 168k prop. 2
3. Other adjustments 3
(Must attach Schedule C-3 if claiming bonus depreciation)

Business Trust	XX	☐
Solicitation Only	XX	☐
Single Member LLC	XX	☐
Multi-Member LLC	XX	☐
PA-S	XX	☐
Taxable Built-in Gains	XX	☐

SECTION C: CORPORATE NET INCOME TAX

1. Income or loss from federal return on a separate company basis 1

2. DEDUCTIONS:

A. Corporate dividends received (From Schedule C-2, Line 6) 2A
B. Interest on U.S. securities (GROSS INT less EXPENSES) 2B
C. Curr yr. addtl. PA deprec. plus adjust. for sale (attached Schedule C-3) 2C
D. Other (attached schedule) See Instructions. 2D
TOTAL DEDUCTIONS - Sum of (A) through (D) 2

3. ADDITIONS:

A. Taxes imposed on or measured by net income (attached schedule) 3A
B. Tax Preference Items (Attached copy of Federal Form 4626) 3B
C. Employment incentive payment credit adjustment (attached Schedule W) 3C
D. Current year bonus depreciation (attached Schedule C-3) 3D
E. Other (attached schedule) See instructions. 3E
TOTAL ADDITIONS - Sum of (A) through (E) 3

4. Income or loss with Pennsylvania adjustments (Line 1 - Line 2 + Line 3) 4
5. Total nonbusiness income (or loss) 5
6. Income (or loss) to be apportioned (Line 4 - Line 5) 6
7. Apportionment proportion (from Schedule C-1 Line 5) 7
8. Income (or loss) apportioned to PA (Line 6 x Line 7) 8
9. Nonbusiness income (or loss) allocated to PA 9
10. Taxable income (or loss) after apportionment (Line 8 + Line 9) 10
11. Total Net Operating Loss deduction (from RCT-103) cannot exceed \$3,000,000 or 12½% of Line 10 11
12. PA taxable income (or loss) (Line 10 - Line 11) 12
13. Corporate Net Income Tax (Line 12 x .0999) 13

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SECTION D: LOANS TAX

1 Did this corporation have a fiscal officer resident in PA and paying interest on indebtedness of the corporation? XX

2. Did this corporation have indebtedness outstanding to individual residents and/or partnerships resident in Pennsylvania? XX

3. Did this corporation have indebtedness outstanding held by a trustee, agent or guardian for a resident individual taxable in its own right or by an executor or administrator of an estate wherein the decedent was a resident of Pennsylvania? XX

List outstanding indebtedness. Attach separate schedule if additional space is required.

Interest Amount	Interest Rate	Taxable Value

TAX INDEBT XX

LOANS TAX XX

SCHEDULE A-1: Apportionment Schedule For **Capital Stock/Foreign Franchise Tax** (Include Form RCT-102, RCT-105, or RCT-106)

Three Factor

Property-PA	1A		1C
Property-Total	1B		
Payroll-PA	2A		2C
Payroll-Total	2B		
Sales-PA	3A		3C
Sales-Total	3B		

Single Factor

Numerator	4A	
Denominator	4B	
Apportionment Proportion	5	

SCHEDULE C-1: Apportionment Schedule For **Corporate Net Income Tax** (Include Form RCT-106)

Three Factor

Property-PA	1A		1C
Property -Total	1B		
Payroll-PA	2A		2C
Payroll-Total	2B		
Sales-PA	3A		3C
Sales-Total	3B		

Single Factor

Numerator	4A	
Denominator	4B	
Apportionment Proportion	5	

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SECTION E: CORPORATE STATUS CHANGES

Out of Existence (Final Report) XX

Out of Existence/ Withdrawal Date XX

*Date of Distribution of Assets XX

OR __No Assets to Distribute XX

PA Corporations: Report date business activity ceased and date assets were distributed.

Foreign (Non-PA) Corporations: Report date business activity in PA ceased and date PA assets were distributed.

*Schedule of Disposition of Assets MUST be completed and filed with the PA Corporate Tax Report

Has the corporation sold or transferred in bulk 51% or more of any of the following classes of assets: any stock of goods, wares, merchandise of any kind, fixtures, machinery, equipment, buildings or real estate. If so, please provide the name and address of the purchaser. (Attach separate schedule if additional space is required.) XX

Purchaser Name XX
Address Line 1 XX
Address Line 2 XX
City XX
State XX
ZIP XX

SECTION F: GENERAL INFORMATION QUESTIONNAIRE

Brief description of corporate activity in PA

Brief description of corporate activity outside of PA

List other states in which taxpayer has activity

State of Incorporation XX Incorporation Date XX

1. Does any corporation, individual or other business entity hold all or a majority of the stock of this corporation? XX
2. Does this corporation own all or a majority of stock in other corporations? If yes, complete Schedule X. XX
3. Is this taxpayer a partnership that elects to file federal taxes as a corporation? XX
4. Has federal government changed taxable income as originally reported for any prior period for which reports of change have not been filed in PA? XX

If yes: First Period End Date: XX Last Period End Date: XX

Accounting Method - Federal Tax Return

- Accrual
- Cash
- Other

Accounting Method - Financial Statements

- Accrual
- Cash
- Other

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SCHEDULE OF REAL PROPERTY IN PA (Attach separate schedule if additional space is required.)

Own/Rent	Street Address	City	County	KOZ/KOEZ

CORPORATE OFFICERS		SSN	Last Name	First Name	MI
President/Managing Partner	XX				
Vice President	XX				
Secretary	XX				
Treasurer/Tax Manager	XX				

TAX PREPARER'S NAME AND ADDRESS

Mail to Practitioner XX
Federal EIN XX
Firm Name XX
Address Line 1 XX
Address Line 2 XX
City XX
State XX
ZIP XX

Tax Preparer's Signature/Date

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NAME
PHONE
E-MAIL

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