



DO NOT STAPLE

For the taxable year beginning 2 0 1 6 ; ending

FILING INFORMATION section containing fields for Name, Business Activity Code, EIN, Date Business Began, Date Business Discontinued, State and Month/Year of Incorporation, State of Commercial Domicile, Type of Federal Return Filed, and Method Used to Determine Income of Corporation in Kansas.

Mark this box if you are filing this as an AMENDED 2016 Kansas return.

NOTE: This form cannot be used for tax years prior to 2016.

Reason for amending your 2016 Kansas return:

- Amended affects Kansas only
Adjustment by the IRS
Amended federal tax return

Table with 20 rows for tax calculations, including Federal taxable income, Total state and municipal interest, Taxes on or measured by income, Federal net operating loss deduction, Total additions to federal taxable income, Interest on U.S. government obligations, IRC Section 78 and 80% of foreign dividends, Other subtractions from federal taxable income, Total subtractions from federal taxable income, Net income before apportionment, Nonbusiness income, Apportionable business income, Average percent to Kansas, Amount to Kansas, Nonbusiness income - Kansas, Kansas expensing recapture, Kansas expensing deduction, Kansas net income before NOL deduction, and Kansas net operating loss deduction.



21. Combined report (Schedule K-121) or alternative/separate accounting income (separate schedule).....	21	
22. Kansas taxable income (subtract line 20 from line 19 or enter line 21, as applicable)	22	
23. Normal tax (4% of line 22)	23	
24. Surtax (3% of line 22 in excess of \$50,000)	24	
25. Total tax (Add lines 23 and 24. If filing combined, use line 24 of K-121.)	25	
26. Total nonrefundable credits (Part I, line 27; cannot exceed amount on line 25)	26	
27. Balance (subtract line 26 from line 25; cannot be less than zero)	27	
28. Estimated tax paid and amount credited forward (Part II, line 4).....	28	<p>If this is your ORIGINAL Kansas return, skip lines 32 and 33 and continue to line 34.</p> <p>If this is your AMENDED Kansas return, complete lines 32 and 33 before continuing to line 34.</p>
29. Other tax payments (enclose separate schedule)	29	
30. Amount paid with Kansas extension	30	
31. Total of all other refundable credits (Part I, line 34)	31	
32. Payment remitted with original return; see instructions	32	
33. Overpayment from original return (this figure is a subtraction; see instructions)	33	
34. Total prepaid credits (add lines 28 through 32 and subtract line 33).....	34	
35. BALANCE DUE (if line 27 exceeds line 34)	35	
36. Interest	36	
37. Penalty	37	
38. Estimated tax penalty. If annualizing to compute penalty, mark this box <input type="checkbox"/>	38	
39. Total tax, interest & penalty due (add lines 35 through 38). Complete Form K-120V and enclose it with your payment.	39	
40. OVERPAYMENT (if line 27 plus line 38 is less than line 34).....	40	
41. REFUND. Enter the amount of line 40 you wish to be refunded.....	41	
42. CREDIT FORWARD. Enter the amount of line 40 (original return only) you wish to be applied to 2017 estimated tax. (Line 42 cannot exceed the total of lines 28, 29 and 30).....	42	

I authorize the Director of Taxation or the Director's designee to discuss my return and enclosures with my preparer.
 I declare under the penalties of perjury that to the best of my knowledge this is a true, correct, and complete return.

sign here

_____	_____	_____
Signature of officer	Title	Date
_____	_____	_____
Individual or firm signature of preparer	Address/Telephone Number	Date

Tax preparer's EIN (Employer Identification Number) or SSN (Social Security Number)

NOTE: You are not required to send a copy of your entire federal return. See instructions for the list of federal forms required to accompany the state return.

PART II - ADDITIONAL INFORMATION

1. Did the corporation file a Kansas Income Tax return under the same name for the preceding year? ___ Yes ___ No If "no", enter previous name and EIN.

2. Enter the address of the corporation's principal location in Kansas.

3. The corporation's books are in care of:

Name _____

Address _____

Telephone _____

4. List each estimated tax payment and credit forward amount claimed on this return.

Date	Amount	Date	Amount

5. Has your corporation been involved in any reorganization during the period covered by this return? ___ Yes ___ No If "yes" enclose a detailed explanation.

6. If this is a final return for Kansas, state the reason. If the corporation was liquidated or dissolved, state the IRC section under which the corporation was liquidated.

7. If your federal taxable income has been redetermined for any prior years that have not previously been reported to Kansas, check the applicable box(es) below and state the calendar, fiscal, or short period year ending date. You are required to submit, under separate cover, the federal Forms 1139, 1120X, or Revenue Agent's Report along with the Kansas amended return.

- Revenue Agent's Report Net Operating Loss
- Amended Return

Years ended _____

8. If you are registered with the Kansas Department of Revenue under any other Kansas tax act, enter all registration or license numbers on the applicable line.

a. Sales Tax _____

b. Compensating Use Tax _____

c. Withholding Tax _____

d. Other (specify) _____

PART III - AFFILIATED CORPORATIONS DOING BUSINESS IN KANSAS

Name of Corporation	Employer ID Number

(Enclose a separate sheet for additional corporations)

PART IV - SCHEDULE OF TAXES

(Include those taxes deducted on line 17 of the federal return. See instructions.)

1. Taxes on or measured by income or fees or payments in lieu of income taxes (include federal environmental tax; itemize).

2. Total (Enter on line 3, page 1)	
3. Total other taxes	
4. Total taxes (Must equal line 17 of the federal return)	

PART V - SCHEDULE OF INTEREST INCOME

(Include the interest from line 5 of the federal return)

1. U.S. interest income (describe type):

2. Total (Enter on line 7, page 1)	
3. Total other interest income	
4. Total interest income (Must equal line 5 of the federal return)	