FILL IN FORM USING ALL CAPS

DO NOT PLACE ANY DASHES (-) OR SLASHES (/) IN THE FIELDS

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PA CORPORATE TAX REPORT 20_ _

START ←

DEPARTMENT USE ONLY

☐ A = 1120 B = 1120S C = 1120C D = 1120F E = 1120H F = 1065 G = 1040 H = Other

PLEASE ENTER ALL DATES AS MMDDYYYY

STEP A

Tax Year Beginning XX ☐ Tax Year Ending XX ☐

STEP B

Amended Report	XX	☐	52-53 Week Filer	XX	☐	First Report	XX	☐
Federal Extension Granted	XX	☐	Address Change	XX	☐	KOZ/EIP/SDA Credit	XX	☐
Regulated Inv. Co.	XX	☐	Change Fed Group	XX	☐	File Period Change	XX	☐

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STEP C

Revenue 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	

Parent Corporation EIN ☐

USE WHOLE DOLLARS ONLY

STEP D

	A. Tax Liability from Tax Report (can not be less than zero)	B. Estimated Payments & Credits on Deposit	C. Restricted Credits	STEP E: Payment Due/Overpayment Calculation: A minus B minus C See Instructions
CS/FF				
LOANS				
CNI				
TOTAL				

STEP F: Transfer/Refund Method: See Instructions

E-File Opt Out: See Instructions ☐

☐ **Transfer:** Amount to be credited to the next tax year after offsetting all unpaid liabilities

☐ **Refund:** Amount to be refunded after offsetting all unpaid liabilities

STEP G: Corporate Officer (Sign affirmation below)

NAME

PHONE

EMAIL

FORM BARCODE

I affirm under penalties prescribed by law 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. If this report is an amended report, 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 filed on the due date. I am authorized to execute this consent to the extension of the assessment period.

Corporate Officer Signature	Date
PLEASE SIGN THIS RETURN AFTER PRINTING.	

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REVENUE ID
TAX YEAR END
NAME

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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

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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. Valuation deduction 14
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 _____. 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	

(Attach schedule C-3 if claiming bonus depreciation.)

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

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USE WHOLE DOLLARS ONLY

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 (attach Schedule C-3)	2C	
D. Other (attach schedule) See instructions.	2D	
TOTAL DEDUCTIONS - Sum of A through D	2	
3. **ADDITIONS:**		
A. Taxes imposed on or measured by net income (attach schedule)	3A	
B. Tax preference items (attach copy of federal Form 4626)	3B	
C. Employment incentive payment credit adjustment (attach Schedule W)	3C	
D. Current year bonus depreciation (attach Schedule C-3)	3D	
E. Other (attach schedule) See instructions.	3E	
TOTAL ADDITIONS - Sum of A through E	3	
4. Income or loss with Pennsylvania adjustments (Line 1 minus Line 2 plus Line 3)	4	
5. Total nonbusiness income or loss	5	
6. Income or loss to be apportioned (Line 4 minus Line 5)	6	
7. Apportionment proportion (from Schedule C-1, Line 5)	7	
8. Income or loss apportioned to PA (Line 6 times Line 7)	8	
9. Nonbusiness income or loss allocated to PA	9	
10. Taxable income or loss after apportionment (Line 8 plus Line 9)	10	
11. Total net operating loss deduction (from RCT-103)	11	
12. PA taxable income or loss (Line 10 minus Line 11)	12	
13. Corporate net income tax (Line 12 times _____; if Line 12 is less than zero, enter "0")	13	

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SECTION D: LOANS TAX

1. Foreign Corporations Only. Did this corporation have a fiscal officer resident in Pennsylvania? 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

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List outstanding indebtedness. Attach a separate schedule if additional space is needed.

Interest Amount	Interest Rate	Taxable Value

Taxable Indebtedness 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

Final Report XX

PA Corporations:

Did you ever transact business anywhere? XX — If yes, enter date all business activity ceased XX

Did you hold assets anywhere? XX — If yes, enter date of final disposition of assets* XX

Foreign Corporations:

Did you ever transact business in PA? XX — If yes, enter date PA business activity ceased XX

Did you hold assets in PA? XX — If yes, enter date of final disposition of PA assets* XX

*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 percent or more of any class of assets? (See Instructions) XX

If yes, enter the following information. (Attach a separate schedule if additional space is needed.)

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

SECTION F: GENERAL INFORMATION QUESTIONNAIRE

Describe corporate activity in PA
Describe corporate activity outside PA
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 the 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

A = Accrual **C** = Cash **O** = Other

Other

Accounting Method - Financial Statements

A = Accrual **C** = Cash **O** = Other

Other

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

O = Own
R = Rent

		Street Address	City	County	KOZ/KOEZ
XX					
XX					
XX					
XX					

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CORPORATE OFFICERS
(See Instructions.)

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

PREPARER'S INFORMATION

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

I affirm under penalties prescribed by law this report, including any accompanying schedules and statements, has been prepared by me and to the best of my knowledge and belief is a true, correct and complete report.

Tax Preparer's Signature	Date
PLEASE SIGN AFTER PRINTING.	

INDIVIDUAL PREPARER
PHONE
EMAIL
PTIN/SSN

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