

PA-20S/PA-65 (08-09) (FI)
PA S Corporation/Partnership
Information Return
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2009

PLEASE PRINT. USE BLACK INK.

If any of the information on the preprinted label is incorrect, do not use it.

Read the instructions.
Fill in the applicable ovals.

Filing Status: PA-20S PA-65 PA-KOZ PS
FEIN PA ACCOUNT # NAICS Code NAICS Code Change from Previous Year
Business Name
First Line of Address - Street Address - If Address has Apartment Number, Suite, RR No. - Place on this Line.
Second Line of Address - PO Box
City or Post Office State ZIP Code

Method of Accounting
Accrual
Cash
Other, Describe
Extension Requested
Initial Year
Fiscal Year Beginning Ending
Final Return
FEIN/Name/Address Change
Amended Information Return
Date activity began in PA (MMDDYYYY)

SUBMIT ALL SUPPORTING SCHEDULES.

USE BLACK INK.

If a loss, fill in the oval next to the line.

Part I. Total Taxable Business Income (Loss) from Operations Everywhere

Table with 3 columns: Line number, Description, and Amount. Rows include 1a Taxable Business Income, 1b Share of Income, 1c Total Income, 1d Previously Disallowed CNI Deductions, and 1e Total Adjusted Business Income.

Part II. Apportioned/Allocated PA Taxable Business Income (Loss)

Table with 4 columns: Line number, Description, Outside PA, and PA Source. Rows include 2 Net Business Income, 2 Share of Business Income, 2 Previously Disallowed PA Source CNI Deductions, and 2 Calculate Adjusted/Apportioned Net Business Income.

Part III. Allocated Other PA PIT Income (Loss)

Table with 4 columns: Line number, Description, Outside PA, and PA Source. Rows include 3 Interest Income, 4 Dividend Income, 5 Net Gain (Loss) from PA Schedule D, 6 Rent/Royalty Net Income, 7 Estates or Trusts Income, 8 Gambling and Lottery Winnings, and 9 Total Other PA PIT Income.



FEIN

Business Name

C

**Part IV. Total PA S Corporation or Partnership Income (Loss)**

10	Total Income (Loss) per Books and Records	LOSS	10	.00
11	Total Reportable Income (Loss). Add Lines 1e and 9 or Add Lines 2h and 9	LOSS	11	.00
12	Total Nontaxable/Nonreportable Income (Loss). Subtract Line 11 from Line 10	LOSS	12	.00

**Part V. Pass Through Credits - See the PA-20S/PA-65 Internet instructions for each credit**

13a	Total Other Credits. Submit PA-20S/PA-65 Schedule OC	13a	.00
13b	Resident Credit	13b	.00
14a	PA 2009 Quarterly Tax Withholding Payments for Nonresident Owners	14a	.00
14b	Final Payment of Nonresident Withholding Tax	14b	.00
14c	Total PA Income Tax Withheld. Add Lines 14a and 14b	14c	.00

**Part VI. Distributions - See the PA-20S/PA-65 Internet instructions - Partnerships Only**

15	Distributions of Cash, Marketable Securities, and Property	15	.00
16	Guaranteed Payments for Capital or Other Services	16	.00
17	All Other Guaranteed Payments for Services Rendered	17	.00
18	Guaranteed Payments to Retired Partners	18	.00

**Distributions - See the PA-20S/PA-65 Internet instructions - PA S Corporations Only**

19	Distributions from PA Accumulated Adjustments Account	19	.00
20	Distributions of Cash, Marketable Securities, and Property	20	.00

**Part VII. Other Information - See the PA-20S/PA-65 Internet instructions for each line**

			Yes or No
1	During the entity's tax year, did the entity own any interest in another partnership or in any foreign entity that was disregarded as an entity separate from its owner under federal regulations Sections 301.7701-2 and 301.7701-3? If yes, submit statement	1	
2	Does the entity have any tax-exempt partners/members/shareholders? If yes, submit statement	2	
3	Does the entity have any foreign partners/members/shareholders (outside the U.S.)? If yes, submit statement	3	
4	Was there a distribution of property or a transfer (e.g., by sale or death) of a partner/member interest during the tax year? (Partnership only) If yes, submit statement	4	
5	Has the federal government changed taxable income as originally reported for any prior period? If yes, indicate period on supplemental statement, and submit final IRS determination paperwork	5	
6	Does the entity have any foreign operations or ownership in a foreign bank account? If yes, submit statement	6	
7	Is this entity involved in a reportable transaction, listed transaction, or registered tax shelter within this return? If yes, submit statement	7	
8	Does the entity have any corporate partners? Provide the PA Account # for each corporate partner listed in the Partner/Member/Shareholder Directory	8	
9	Has the entity sold any tax credits? If yes, submit statement	9	
10	Has the entity changed its method of accounting for federal income tax purposes during this tax year? If yes, submit Federal Form 3115	10	
11	Has the entity entered into any like-kind exchanges under IRC Section 1031? If yes, submit Federal Form 8824	11	
12	PA Apportionment as reported on PA-20S/PA-65 Schedule H-Corp	12	— • — — — — —

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Part VIII. PA S Corporations Only - Accumulated Adjustments Account (AAA) and Accumulated Earnings and Profits (AE&P)

Table with 8 rows and 2 columns: AAA, AE&P. Rows include Balance at beginning, Total reportable income, Other additions, Loss from Part IV, Other reductions, Sum of Lines 1 through 5, Distributions, and Balance at taxable year-end.

Part IX. Ownership in Pass Through Entities

If the entity received income (loss) from an S corporation, partnership, estate or trust, limited liability company or any other pass through entity including a qualified subchapter S subsidiary (QSSS), list below the FEIN, name and address for each entity.

Table with 3 columns: FEIN, QSSS, NAME & ADDRESS. Rows labeled a through f.

May the Department of Revenue discuss this return with the preparer shown below? YES [ ] NO [ ]

Part X. Signature and Verification

Under penalties of perjury, I declare I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of General Partner, Principal Officer, or Authorized Individual | Date | Daytime Telephone Number

Paid Preparer's Use Only

Preparer's signature | Date | Check if self-employed [ ] | Firm's name (or yours if self-employed), address, and ZIP code | Daytime Telephone Number

Preparer's SSN or Preparer's PTIN | Firm's FEIN