FORM 1100	DO NOT WRITE OR STAPLE IN THIS AREA - REVENUE CODE 0042							
2011 DELAWARE								
-								
CORPORATION INCOME		JKN						
FOR CALENDAR YEAR 2011								
or 🛭 scal year beginning 2011 , and en	ding	2012	2					
EMPLOYER IDENTIFICATION NUMB	R							
Name of Corporation			-					
Address	Zip Code			CHE	CHECK APPLICABLE BOX:			
Delawara adalara if di Waran baran alama	7:= 0= d=		INITIAL RETURN	CH	ANGEC	FADDRESS	EXTENSION ATTACHED	
Delaware address if different from above	Zip Code							
Date and State of Incorporation Nature of Business								
			IF OUT OF BUSINESS	S ENTER DA		RF:		
ATTACH COMPLETE COPY OF FE 1. Federal Taxable Income (See specific instructions)	DERAL FORM 1120			,				
1. Federal Taxable Income (See specific instructions) 2. Subtractions:		•••••			1		00	
(a) Foreign dividends, interest and royalties		. 2a		00				
(b) Net interest from U.S securities (Schedule 1, Column 2)				00				
(c) Interest from affiliated companies (Schedule 1, Column 3)								
(d) Gain from sale of U.S. or Delaware securities				00				
(e) Wage deduction - Federal Jobs Credit								
(f) Handicapped accessibility deduction (Attach statement)				00				
(g) Net operating loss carry-over			00					
(h) Other				00				
(i) Total. Add Lines 2(a) through 2(h)				100	2i		00	
3. Line 1 minus Line 2(i)					3			
4. Additions:		4-		00	5		100	
(a) All state and political subdivision income taxes deducted in computing Line 1								
		. 4b 4c		00				
(c) Interest income from obligations of any state except Delaware (Schedule 1, Column 4) .				0.0				
(d) Depletion expense - oil and gas		10						
(e) Interest paid a liated companies (See instructions)				00				
(f) Donations included in Line 1 for which Delaware income tax of	U U	. 4f			40		00	
(g) Total. Add Lines 4(a) through 4(f)					<u>4g</u> 5		00	
5. Entire net income [Line 3 plus Line 4(g)]					-		100	
WHERE LINE 5 ISDERVED ENTIRELY FROM SOURCES WITHIN DEL WHERE THE ENTIRE INCOME ISNOT DERIVED FROM SOURCES WI 6 TO 10 INCLUSIVE	THIN DELAWARE, COMPLET	EITEMS						
6. Total non-apportionable income (or loss) (Schedule 2, Column 3,	Line 8)				6		00	
7. Income (or loss) subject to apportionment (Line 5 minus Line 6)					7		00	
8. Apportionment percentage (Schedule 3D, Line 8)		8		%	9			
9. Income (or loss) apportioned to Delaware (Line 7 multiplied by Lin	ne 8)				10		00	
10. Non-apportionable income (or loss) (Schedule 2, Column 1, Line 8					10		00	
11. Total (Line 9 plus or minus Line 10)					11 12		00	
12. Delaware Taxable Income (Line 5 or Line 11, whichever is less)					12			
13. Tax @8.7%		4.4		00	13	1	100	
14. Delaware tentative tax paid		. 45		00				
15. Credit carry-over from prior year		. 10		00				
16. Other payments (attach statement)				00				
17. Approved income tax credits		·LI			18		00	
18. Total payments and credits. Add Lines 14 through 17			19					
19. If Line 13 is greater than Line 18 enter BALANCE DUE AND PAY IN			20a		00			
20. If Line 18 is greater than Line 13 enter OVERPAYMENT:				20a 20b				
	(b) to be REFUNDED				200 20c		00	
	L(c) to be CREDITED to	ZUIZ IENI					100	

PLEASE SEE REVERSE SIDE FOR SIGNATURE LINES AND MAILING INSTRUCTIONS.

	SCHEDULE	1 - INTEREST INCOME	•									
	Description Of Interest	Column 1 Foreign Interest	Column Interest Rec From U.S. Se	eived	Column 3 Interest Receive Affiliated Comp	d From	Column 4 Interest Received From State Obligatio		Column 5 Other Interest Income			
1		00		00		00		00	(00	1	
2		00		00		00		00		00	2	
3		00		00		00		00		00	3	
4		00		00		00		00		00	4	
5	Tatala	00		00		00		00			5	
6								00	(00	6	
	SCHEDULE 2 - NON-APPORTIONABLE INCOME ALL Description				Column 1 /ithin Delaware		Column 2 Without Delaware	Column 3 Total				
1	Rents and royalt	ies from tangible property				00		00	(00	1	
2	Royalties from p	atents and copyrights				00		00	(00	2	
3	Gains or (losses) from sale of real property				00		00	(00	3	
4	Gains or (losses) from sale of depreciable tangib	le property			00		00	(00	4	
5	Interest income	from Schedule 1, Columns 4 and	I 5, Line 6			00		00		00	5	
6	Total		• • • • • • • • • • • • • • • • • •			00		00		00	6	
7		expenses (Attach statement)	F			00		00		00	7	
8		tionable income				00		00		00	8	
	SCHEDULE	3 - AFFORTIONWENT F		-A - Gross F	Real and Tangible	Personal	Property					
			Concute o	Within De		r croonar i		and With	nout Delaware			
		Description	Beginning o		End of Ye	ar	Beginning of Year		End of Year			
1	Real and tangibl	e property owned		00		00		00	(00	1	
		e property rented		00		00		00	(10		
2		ual rental paid)		00		00		00		00 00	2	
3		inal cost of real and tangible		00		00		00		10	3	
4		te from which is separately		00		00		00		00	1	
5				00		00		00		00	5	
6		See instructions)			•	00				20	6	
		Schedule	e 3-B - Wages, Sa	laries, and (Other Compensati	on Paid or	Accrued to Employee	s	·			
	Description					in Delaware	Within and Without Delaware					
1	Wages, salaries.	and other compensation of all e	mplovees				00	1		00	1	
2	U .	laries, and other compensation of					00		(00	2	
	Total	·····	· · · · · · · · · · · · · · · · · · ·				00		(00	3	
			Schedule 3	3-C - Gross	Receipts Subject t	o Apportic		1	1		L	
1	Gross receipts fr	om sales of tangible personal pro	operty				00				1	
2	Gross income fro	om other sources (Attach stateme	ənt)				00				2	
3	Total			D Dotorm	ination of Apportio	nmont Bor	00			00	3	
			Schedule 3	-D - Deteini			-					
1	Average value o	f real and tangible property within	Delaware				00	=		%		
2	Average value of real and tangible property within and without Delaware				· · · · · · · · · · · · · · · · · · ·		00]				
							00	1		%		
3	-	and other compensation paid to					00	=		70		
<u> </u>	wages, salaries	and other compensation paid to	employees within ar	ia without Del	aware			J				
5	Gross receipts a	nd gross income from within Del	aware				00]		%		
6		nd gross income from within and					00	=				
		·								_		
7	Total											
										%		
8	Apportionment p	percentage (See instructions)										
		of perjury, I declare that I have e plete. If prepared by a person oth										
	Date	Date Signature of Officer Title							Email Address		-	
	Date	Signature of individ	lual or firm preparing th	e return			Addr	ress			-	
	MAKE CHECK PAYABLE AND MAIL TO: Delaware Division of Revenue, P.O. Box 2044, Wilmington, DE 19899-2044 IF A 2D BARCODE APPEARS IN THE UPPER RIGHT CORNER OF PAGE 1 OF THIS FORM: MAIL REFUND OR BALANCE DUE RETURNS TO: Delaware Division of Revenue, P.O. Box 8712, Wilmington, DE 19899-8712 MAIL ZERO DUE RETURNS TO: Delaware Division of Revenue, P.O. Box 8719, Wilmington, DE 19899-8719											