

CD-401S (SD)

S Corporation Tax Return 2006

North Carolina Department of Revenue

Tax year less than 12 months N

For calendar year 2006, or other tax year beginning MM DD YY and ending MM DD YY

JOHNSON AND JOHNSON PHARMACEUTICALS INC
5121 VALDEZ COURT DR
RALEIGH NC 27605-0001
Federal Employer ID Number 176453458
N.C. Secretary of State ID Number 6762532
NAICS Code 123456
QSSS or Parent QSSS
Fed Schedule M-3 is attached
Has Escheatable Property
Initial Filer
Final Return
Amended Return
NC-478 is attached
CD-479 is attached
LLC
Foreign Corp

For Computer Use Only

JOHN 5121 27605 176453458 6762532 123456 EP Y IF N
PP P12345678 FR N AR Y 478 N 479 N LLC N FC N
JOHNSON AND JOHNSON PHARMACEUTICALS INC

5121 VALDEZ CTXXXXXXXXXXXXXXXXX35MAX RALEIGHXXXXXXXXXXXXX NC 27605
GR 000000000000 07 000000000 16 -0000000000 26B 000000000
TA 000000000000 08 000000000 17 -0000000000 26C 000000000
01 0000000000 09 000000000 19 -0000000000 26D 000000000
HCE Y 10 -0000000000 20 0000000000 28 000000000
02 0000000000 11 -0000000000 21 0000000000 29 000000000
03 0000000000 13 -0000000000 22 0000000000 36 000000000
05 000000000 14 -0000000000 24 00 37 000000000
06 000000000 15 000.0000 26A 000000000 TN 000000000

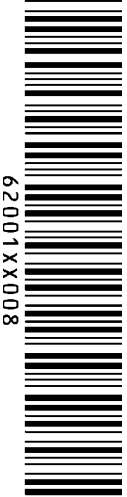


Table with 2 columns: Description and Amount. Section A: Computation of Franchise Tax (lines 1-9). Section B: Computation of Corporate Income Tax (lines 10-21).

Sign Return Below [] Refund Due 00000000 [] Payment Due 00000000

I certify that, to the best of my knowledge, this return is accurate and complete.

Signature and Title of Officer Corporate Telephone Number Date
Signature of Paid Preparer Preparer's Telephone Number Preparer's FEIN, SSN, or PTIN

Mail to: NCDOR, P.O. Box 25000, Raleigh, N.C. 27640-0530
Returns are due by the 15th day of the third month after the end of the income year.

CD-401S Line-by-Line Information

Sch. B Computation of Corporate Income Tax			
22. Tax Credits Attributable to Nonresidents Filing Composite	000000000	5. Add Lines 1 through 4	000000000
23. Net Tax Due for Nonresidents Filing Composite	000000000	6. Acc. depreciation, depletion, and amortization with respect to N.C. tangible property	000000000
24. Annual Report Fee (\$20.00)	00	7. Debts existing for N.C. real estate	000000000
25. Add Lines 23 and 24	000000000	8. Investment in N.C. Tangible Property	000000000
26. Payments		Sch. E Appraised Value of N.C. Tangible Property	
a. Application for Income Tax Extension	000000000	1. County tax value of N.C. tangible property	000000000
b. 2006 Estimated Tax (previous payments if amended)	000000000	2. Appraised value of N.C. tangible property	000000000
c. Partnership (Include Form D-403, NC K-1)	000000000	Sch. G Ordinary Income (Loss) from Trade or Business Activities	
d. Nonresident Withholding (Include 1099 or W-2)	000000000	1. a. Gross receipts or sales	000000000
27. Add Lines 26a through 26d	000000000	b. Returns and allowances	000000000
28. Income Tax Due	000000000	c. Balance - Line 1a minus 1b	000000000
29. Income Tax Overpaid	000000000	2. Cost of goods sold (Attach schedule)	000000000
Tax Due or Refund		3. Gross Profit	000000000
30. Franchise Tax Due or Overpayment	-000000000	4. Net gain (loss) (Attach schedule)	000000000
31. Income Tax Due or Overpayment	-000000000	5. Other income (loss) (Attach schedule)	000000000
32. Balance of Tax Due or Overpayment	-000000000	6. Total Income (Loss)	000000000
33. Interest and Penalties	000000000	7. Compensation of officers (Attach schedule)	000000000
34. Total Due	000000000	8. Salaries and wages (less employment credits)	000000000
35. Overpayment	000000000	9. Repairs and maintenance	000000000
36. 2007 Estimated Income Tax	000000000	10. Bad debts	000000000
37. Amount to be Refunded	000000000	11. Rents	000000000
Sch. C Capital Stock, Surplus, and Undivided Profits		12. Taxes and licenses	000000000
1. Total capital stock outstanding less cost of treasury stock	000000000	13. Interest	000000000
2. Paid-in or capital surplus	000000000	14. a. Depreciation XXXXXXXXXXXXXXXXXXXXXXXX	000000000
3. Retained earnings	000000000	b. Depreciation included in cost of goods sold XXXXXXXXXXXXXXXXXXXXXXXX	000000000
4. Other surplus	000000000	c. Balance - Line 14a minus 14b	000000000
5. Deferred or unearned income	000000000	15. Depletion	000000000
6. Allowance for bad debts	000000000	16. Advertising	000000000
7. LIFO reserves	000000000	17. Pension, profit-sharing, and similar plans	000000000
8. Other reserves that do not represent definite and accrued legal liabilities	000000000	18. Employee benefit programs	000000000
9. Add Lines 1 through 8	000000000	19. Other deductions (Attach schedule)	000000000
10. Affiliated indebtedness XXXXXXXXXXXXXXXXXXXXXXXX	000000000	20. Total Deductions	000000000
11. Line 9 plus (or minus) Line 10	000000000	21. Ordinary Business Income (Loss)	000000000
12. Apportionment factor	000.0000%	Sch. H Computation of Income (Loss)	
13. Capital Stock, Surplus, and Undivided Profits	000000000	1. Ordinary business income (loss)	000000000
Sch. D Investment in N.C. Tangible Property		2. Net rental real estate income (loss)	000000000
Inventory valuation method	XXXX	3. Other net rental income (loss)	000000000
1. Total inventories located in N.C.	000000000	4. Interest income	000000000
2. Total furniture, fixtures, and M & E located in N.C.	000000000	5. Ordinary dividends	000000000
3. Total land and buildings located in N.C.	000000000	6. Royalties	000000000
4. Total leasehold improvements and other N.C. tangible property	000000000	7. Net short-term capital gain (loss)	000000000
		8. Net long-term capital gain (loss)	000000000
		9. Net section 1231 gain (loss)	000000000
		10. Other income (loss) (Attach Schedule)	000000000
		11. Total Income (Loss)	000000000

Legal Name (First 10 Characters)

JOHNSON &

Federal Employer ID Number

176453458

Sch. I Adjustments to Income (Loss)	Other Information - All Taxpayers Must Complete Schedule
1. Additions to Income (Loss)	1. a. State of incorporation XXXXXXXXXXXXXXXX
a. Taxes based on net income 0000000000	b. Date incorporated MM DD YY
b. Interest on non-N.C. obligations 0000000000	2. Date of N.C. Certificate of Authority MM DD YY
c. Other additions to federal taxable income 0000000000	3. Trade or business: a. In N.C. XXXXXXXXXXXXXXXX
2. Total Additions 0000000000	b. Everywhere XXXXXXXXXXXXXXXX
3. Deductions from Income (Loss)	4. Principal place of business XXXXXXXXXXXXXXXX
a. U.S. obligation interest (net of expenses) 0000000000	5. a. What was the last year the IRS redetermined
b. Additional first-year depreciation 0000000000	the corporation's federal taxable income? XXXX
c. Other deductions from federal taxable income 0000000000	b. Were adjustments reported to N.C.? N
4. Total Deductions 0000000000	c. If so, when? MM DD YY
5. Adjustments to Income (Loss) 0000000000	6. Is corporation subject to franchise tax but not N.C. income tax because its' income tax activities are protected? (If yes, attach explanation) N

Income Tax Rate Schedule

6.00 % of the first \$12,750

7.75 % of the amount over \$60,000 but no more than \$120,000

7.00 % of the amount over \$12,750 but no more than \$60,000

8.25 % of the amount over \$120,000

Sch. K Shareholders' Pro Rata Share Items

	Shareholder 1	Shareholder 2	Shareholder 3	Shareholder 4
1. Identifying Number	000000000	000000000	000000000	000000000
2. Name	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX
3. Address	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX
4. Ownership %	000.0000%	000.0000%	000.0000%	000.0000%
5. Share of income (loss)	0000000000	0000000000	0000000000	0000000000
6. Additions to income (loss)	0000000000	0000000000	0000000000	0000000000
7. Deductions from income (loss)	0000000000	0000000000	0000000000	0000000000
8. Income subject to N.C. tax	0000000000	0000000000	0000000000	0000000000
9. Share of tax credits	0000000000	0000000000	0000000000	0000000000
10. Tax withheld from nonwage compensation	0000000000	0000000000	0000000000	0000000000
11. Amount of Line 8 apportioned or allocated to N.C. (nonresidents only)	0000000000	0000000000	0000000000	0000000000
12. Separately stated items of income (nonresidents only)	0000000000	0000000000	0000000000	0000000000
13. Net tax paid for shareholder by corporation (nonresidents only)	0000000000	0000000000	0000000000	0000000000
	Shareholder 5	Shareholder 6	Shareholder 7	Shareholders' Total
1. Identifying Number	000000000	000000000	000000000	
2. Name	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	
3. Address	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	
4. Ownership %	000.0000%	000.0000%	000.0000%	000.0000%
5. Share of income (loss)	0000000000	0000000000	0000000000	0000000000
6. Additions to income (loss)	0000000000	0000000000	0000000000	0000000000
7. Deductions from income (loss)	0000000000	0000000000	0000000000	0000000000
8. Income subject to N.C. tax	0000000000	0000000000	0000000000	0000000000
9. Share of tax credits	0000000000	0000000000	0000000000	0000000000
10. Tax withheld from nonwage compensation	0000000000	0000000000	0000000000	
11. Amount of Line 8 apportioned or allocated to N.C. (nonresidents only)	0000000000	0000000000	0000000000	0000000000
12. Separately stated items of income (nonresidents only)	0000000000	0000000000	0000000000	0000000000
13. Net tax paid for shareholder by corporation (nonresidents only)	0000000000	0000000000	0000000000	0000000000

This page must be filed with the first page of Form CD-401S.

