



Illinois Department of Revenue

2002 Form IL-1023-C

Composite Income and Replacement Tax Return

or fiscal year beginning ___/___/___, 2002, ending ___/___/___, 20___.

Due on or before the 15th day of the 4th month following the close of the tax year.

Do not write above this line.

Name of partnership or S corporation

Federal employer identification number (FEIN)

666
Seq. code

In care of

Illinois business tax (IBT) number

Mailing address

Check all that apply.

Name or address change First return Final return

City

State

ZIP

Partners or shareholders included are (check only one):

Check the return you filed Form IL-1065 Form IL-1120-ST

Trusts/individuals/estates Individuals/estates only

Part 1 — Figure the composite income and income tax

- 1 a Write the amount of modified base income of the partnership or S corporation. **1a** _____
- b Write the total percentage of ownership for resident members in this composite return. (**Stop** - see instructions.) **1b** _____ %
- c Multiply Line 1a by Line 1b. Write the result here. **1c** _____
- 2 a Write the amount of modified base income allocable to Illinois. **2a** _____
- b Write the total percentage of ownership for nonresident members in this composite return. **2b** _____ %
- c Multiply Line 2a by Line 2b. Write the result here. **2c** _____
- 3 Add Lines 1c and 2c. This is the composite income. **3** _____
- 4 Total income tax. Multiply Line 3 by 3% (.03). Write the total here and on Part 3, Line 7. **4** _____

Part 2 — Figure the replacement tax (Complete only if this return includes any trust members.)

- 5 Write the amount of composite income included in Part 1, Line 3, that is subject to replacement tax. **5** _____
- 6 Total replacement tax. Multiply Line 5 by 1.5% (.015). Write the result here and on Part 3, Line 8. **6** _____

Part 3 — Figure the total tax

- 7 Write the total income tax amount from Part 1, Line 4. **7** _____
- 8 Write the total replacement tax amount from Part 2, Line 6. **8** _____
- 9 Add Lines 7 and 8. This is the total amount of income and replacement tax. **9** _____
- 10 Write the total amount prepaid on Form IL-1023-CES, plus any credit from your 2001 IL-1023-C. **10** _____
- 11 Overpayment. If Line 10 is greater than Line 9, subtract Line 9 from Line 10. If not, go to Line 13. **11** _____
- 12 Write the amount of overpayment you want credited to your 2003 composite tax. **12** _____
- 13 Tax due. If Line 9 is greater than Line 10, subtract Line 10 from Line 9. This is your balance of tax due. **Make your check or money order payable to "Illinois Department of Revenue."** **13** _____

Part 4 — Sign below

Do not write in this box.

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete and that each of the qualifying partners or shareholders is aware of, and complies with, the rules and regulations set forth and made binding by this composite return.

Signature of authorized agent _____ /_____/_____ (_____) _____
 Date Phone

Signature of preparer _____ /_____/_____ _____
 Date Preparer's SSN, FEIN, or PTIN

Preparer firm's name (or preparer if self-employed) _____ Address (firm's or preparer's if self-employed) _____ (_____) _____
 Phone

Check if self-employed →

➤ Mail this return to: Illinois Department of Revenue, P.O. Box 19009, Springfield, IL 62794-9009 ◀

FI NS XX ME DR _____ AL _____ CR ID _____

