

Illinois Department of Revenue 2005 Form IL-1120-ST Small Business Corporation

or fiscal year beginning ___/___, 2005, ending ___/___, 20____. Replacement Tax Return Due on or before the 15th day of the 3rd month following the close of the tax year.

			_ -	· _	_	
/pe	Name		Federal emplo	yer identifica	tion numl	ber (FEIN)
				-	ll_	_
r	C/O		Illinois busines	s tax (IBT) r	umber	
			Check this	box if you a	re unitary	and write the FEIN
rint	Mailing address		of the Sch. U	B filer	-	
						First return
	City State ZIP					
	Check the box if your name or address has changed.		□ Finai reiu	rn, compie	te the qu	uestions at the end
Pari	I — Base income or loss Complete Part IA before complete	eting Pa	rt I			
1	Write your unmodified base income or loss from Part IA, Line 5.	3			1	l
2	Additions (See specific instructions for Part I.)					
	a State, municipal, and other interest income excluded in arriving at Line 1 abo	ove 2	2a	_	-	
	b Illinois replacement tax deducted in arriving at Line 1 above		2b		-	
	c Other additions (Specify:) 2	2c	_	-	
	d The share of loss distributable to a shareholder subject to Illinois replacemen	nt tax 2	2d			
3	Add Lines 2a through 2d. This is the total of your additions.				3	
4	Add Lines 1 and 3. This is your total income.				4	l
5	Subtractions (See specific instructions for Part I.)					
	a Interest income from U.S. Treasury and other exempt federal obligations	5	5a	_	_	
	b Enterprise zone subtractions from Schedule 1299-A (See instructions.)	5	5b			
	c The share of income distributable to a shareholder subject to Illinois replacement	ent tax 5	5c			
	d Expenses incurred in producing certain federally tax-exempt income (See instruc	ctions.) 5	5d			
	e Other subtractions (Specify:		5e			
	Add Lines 5a through 5e. This is the total of your subtractions.	,			6	1
7	Subtract Line 6 from Line 4. This is your base income or loss.					
	If your base income or loss is derived solely inside Illinois, write this amount o	on Part II.	Line 1a.			
	If any portion of your base income or loss is derived outside Illinois, write this			ne 1.	7	1
	t II — Net income or loss and replacement tax		,			
1	a Write your base income or loss from Part III, Line 9, if applicable; otherwise, f	from Part	I. Line 7.		1a	I
	b Illinois net loss deduction (NLD). (Attach Schedule NLD, see instructions.)		, -			
	C Subtract Line 1b from Line 1a (cannot be less than zero). This is your income	e after NL	.D.		1c	
2	a Multiply Line 1c by 1.5% (.015). This is your replacement tax.		2a	ı		·
_	b Recapture of investment credits from Schedule 4255. (See instructions.)		2b	 i	_	
3	Add Lines 2a and 2b. This is the total of your replacement tax before investmen			·	3	1
4	Investment credits from Form IL-477 (Attach Form IL-477, see instructions.)	it oround.			4	'
_	Subtract Line 4 from Line 3 (cannot be less than zero). This is your net replacer	ment tay			5	'
6	Tax paid with Form IL-505-B. Include any 2004 overpayment credited to 2005 to				6	''
7	Overpayment. Subtract Line 5 from Line 6.	an.			7	'
′	a Write the amount of overpayment to be credited to 2006.	7	7a	1	'	<u> </u>
Ω	Tax due. Subtract Line 6 from Line 5. This is your balance of tax due (see instruct			moro	8	1
	Tax due. Subtract Line o from Line 3. This is your balance or tax due (see instruct	iloris). i as	y ii i iuii ii ֆ i Oi	more.		
Unde	er penalties of perjury, I state that I have examined this return and, to the best of my knowl	ledge, it is	true, correct, a	nd complet	te.	o not write in this box.
5 6 7 8 Under		,	,			
Si	gn Signature of authorized officer	(<u></u> Pho) one		_	
b.		1110	one			Check if self-
ne	Signature of preparer J		eparer's SSN, FEI	N or DTIN		employed → 🔝
	Signature of preparer	FIE	eparer 5 33N, 1 Li	IN, OF FIIN		
	Drangery firm's name (ar varies if self ampleyed)				()	
	Preparer firm's name (or yours, if self-employed) Address				Phone	
	Mail this return to: Illinois Department of Revenue, P.O. Box	x 19032	Springfield	I. IL. 627	94-901	32 🚄

art	IA — Ordinary income adjustments — (See instructions.)		
1	Write your ordinary income or loss from U.S. Form 1120S, Schedule K, Line 1.		1
2	Write the appropriate amounts from U.S. Form 1120S, Schedule K.		
	a Net income or loss from rental real estate activities from Line 2	2a	
	b Net income or loss from other rental activities from Line 3c	2b	
	c Portfolio income or loss from Lines 4 through 8c	2c	
	d Net gain or loss from sale or exchange of property used in trade or business		
	and certain involuntary conversions under IRC Section 1231, from Line 9	2dl	
	e Other income from Line 10	2e	
	f Any other items of income or loss that were not included in the computation		
	of ordinary income or loss on U.S. Form 1120S, Page 1		
	Identify:	2f	
2	Total. Add Lines 2a through 2f.		2
3	Add Lines 1 and 2.		3
4	Write the appropriate amounts from U.S. Form 1120S, Schedule K.		
	a Charitable contributions from Line 12a	4al	
	b Expense deduction under IRC, Section 179, from Line 11	4b	
	c Interest on investment indebtedness from Line 12b	4cl	
	d Any other items of expense that were not deducted in the computation		
	of ordinary income or loss on U.S. Form 1120S, Page 1		
	Identify:	_4dl	
4	Total. Add Lines 4a through 4d.		4
5	Subtract Line 4 from Line 3. This is your unmodified base income or loss. Write here at	nd on Part I, Line 1.	5
1	write your base income or loss from Part I, Line 7 a Nonbusiness income or loss included in Part III, Line 1 (Attach Schedule NB.) If you are making the business income election, check this box and write zero here and on Part III, Line 7. (See instructions.) b Business income or loss from non-unitary partnerships, trusts, and estates included in Part III, Line 1. (See instructions.) Add Lines 2a and 2b. This is the total of your subtractions. Subtract Line 3 from Line 1. This is your business income or loss. Business income apportionment formula (Financial organizations and transportation the appropriate box and see Special Apportionment Formulas instructions.) a Total sales everywhere b Total sales within Illinois c Divide Line 5b by Line 5a. (Carry to six decimal places.) This is your apportionment factor. Multiply Line 4 by Line 5c. This is your business income or loss apportionable to Illinois Nonbusiness income or loss apportionable to Illinois (from non-unitary partnerships, trusts, Add Lines 6 through 8. This is your base income or net loss allocable to Illinois. Write here	5c . Line 2a, write zero here. and estates (See instr.)	1
1		Accrual	ecify:)
yo	u discontinued or sold your business, please complete the following.		
2	If you discontinued your business, write the date://		
3	If you sold your business, write the date:/	_	
4	Tell us the new owner's name:		
5	Tell us the new owner's address:	_	
		_	
_			
6	Tell us the former owner's forwarding address:		



Schedule B Partners' or Shareholders' Identification Attach to your Form IL-1065 or Form IL-1120-ST.

Month Year
IL Attachment No. 3

Write your name as shown on your Form IL-1065 or Form IL-1120-ST.

Write your federal employer identification number (FEIN).

ldent	ify your partners	or shareholders	
	Α	В	С
	Name	Address	Social Security number or FEIN
1			
2			
3			
4			
5			
6			
7			
8			
9			
15			
16			
17			
18			
19			
20			

Year e	nding
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Month Year
IL Attachment No. 8

Write your name as snown on your Form IL-1120, IL-1120-S1, or IL-1065.	write your federal employer identification no. (FEIN)
	_

Read the instructions before completing this form.

			Column A Total everywhere	Column B Allocable to Illinois
1	Interest*	1_		
2	Dividends*	2_		
3	Rental income			
4	Patent royalties			
5	Copyright royalties			
6	Other royalty income			
7	Capital gain (loss) from real property			
8	Capital gain (loss) from tangible personal property			
9	Capital gain (loss) from intangible personal property			
10	Other (specify)			
		_		
11	Recaptured business expense (See instructions.) Note You must complete the Apportionment Factor Worksheet below to get the correct figure for Column B.			
12	Totals. Add Lines 1 through 11 for each column.	12	Write this total on Part III, Line 2a.	Write this total on Part III, Line 7.
App a b c d e f	Write your apportionment factor from two years ago(if applicate Write your apportionment factor from last year's tax return. Write your apportionment factor from this year's tax return. Write your apportionment factor from this year's tax return. Add Lines a, b, and c. If you have an amount on Line a, divide Line d by 3. If you do not have an amount on Line a, divide Line d by 2. Write the greater of Line c or Line e. This is your apportionment factor. Multiply Column A, Line 11 by Line f, and write the result here and in Column B, Line 11.	b_		

^{*} Interest and dividends are allocable to Illinois if your commercial domicile was in Illinois at the time the interest or dividend was paid or accrued.