



Do not write in this box.

Indicate what tax year you are amending: Tax year beginning ___/___/___, ending ___/___/___

Write the amount you are paying.

\$ _____



If you are filing an amended return for tax years ending before December 31, 2008, you can not use this form. For prior years, use the amended return form for that year.

Step 1: Identify your exempt organization

A Write your exempt organization name and mailing address.

If you have a change, check this box.

Name _____

C/O _____

Mailing address _____

City _____ State _____ Zip _____

B Check this box if Schedule 1299-D is attached.

C Write your federal employer identification number (FEIN).

_____ - _____

D Check the applicable box for the type of change being made.

State change Federal change:

If a federal change, check one: Partial agreed Finalized

If finalized, write the finalization date: ___/___/___
Month Day Year

E Check this box if you are filing a "corrected" return.

F Check this box if you are taxed as a corporation.

G Check this box if you are taxed as a trust.

Step 2: Explain the changes on this return

Attach remittance payable to "Illinois Department of Revenue" here.

Step 3: Figure your base income or loss

1 Unrelated business taxable income or loss from U.S. Form 990-T, Line 34.

A
As most recently reported or adjusted

1 _____

B
Corrected amount

1 _____

2 Illinois income and replacement tax deducted in arriving at Line 1.

2 _____

2 _____

3 Base income or loss. Add Lines 1 and 2.

3 _____

3 _____

If the amount on Line 3 is derived only from inside Illinois or if you are an Illinois resident trust, skip Step 4 and go to Step 5; otherwise complete Step 4.

Step 4: Figure your income allocable to Illinois

4 Trust, estate, or non-unitary partnership business income or loss included in Line 3.

4 _____

4 _____

5 Business income or loss. Subtract Line 4 from Line 3.

5 _____

5 _____

6 Total sales everywhere. This amount cannot be negative.

6 _____

6 _____

7 Total sales inside Illinois. This amount cannot be negative.

7 _____

7 _____

8 Apportionment Factor. Divide Line 7 by Line 6.

8 _____

8 _____

9 Business income or loss apportionable to Illinois. Multiply Line 5 by Line 8.

9 _____

9 _____

10 Trust, estate, or non-unitary partnership business income or loss apportionable to Illinois.

10 _____

10 _____

11 Base income or net loss allocable to Illinois. Add Lines 9 and 10.

11 _____

11 _____

Step 5: Figure your net replacement tax

12 Base income or net loss from Line 3 or Line 11.	12	_____
13 Replacement tax. Corporations multiply Line 12 by 2.5% (.025); trusts 1.5% (.015).	13	_____
14 Recapture of investment credits (Schedule 4255).	14	_____
15 Replacement tax before investment credits. Add Lines 13 and 14.	15	_____
16 Investment credits (Form IL-477).	16	_____
17 Net replacement tax. Subtract Line 16 from Line 15. If negative, write "0."	17	_____

Step 6: Figure your net income tax

18 Base income or net loss from Line 12.	18	_____
19 Income tax. Corporations multiply Line 18 by 4.8% (.048); trusts multiply Line 18 by 3% (.03).	19	_____
20 Recapture of investment credits (Schedule 4255).	20	_____
21 Income tax before credits. Add Lines 19 and 20.	21	_____
22 Income tax credits (Schedule 1299-D).	22	_____
23 Net income tax. Subtract Line 22 from Line 21. If negative, write "0."	23	_____

Step 7: Figure your refund or balance due

24 Net replacement tax from Line 17.	24	_____
25 Net income tax from Line 23.	25	_____
26 Total net income and replacement taxes. Add Lines 24 and 25.	26	_____
27 Payments		
a Credit from prior year overpayment	a	_____
b Total estimated payments	b	_____
c Form IL-505-B (extension) payment	c	_____
28 Total payments. Add Lines 27a through 27c.	28	_____
29 Tax paid with original return (do not include penalties and interest).	29	_____
30 Subsequent tax payments made since the original return.	30	_____
31 Total tax paid. Add Lines 28, 29, and 30.	31	_____
32 Total amount previously refunded and/or credited for the year being amended.	32	_____
33 Net tax paid. Subtract Line 32 from Line 31.	33	_____
34 Refund. Subtract Line 26 from Line 33.	34	_____
35 Tax due. Subtract Line 33 from Line 26.	35	_____
36 Penalty (See instructions.)	36	_____
37 Interest (See instructions.)	37	_____
38 Total balance due. Add Lines 35 through 37.	38	_____

▶ **Make your check payable to "Illinois Department of Revenue."** ◀
Special Note → Write the amount of your payment on the top of Page 1 in the space provided.

Step 8: Sign here

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.

_____ Signature of authorized officer	_____/_____/_____ Date	_____ Title	(____)_____ Phone
_____ Signature of preparer	_____/_____/_____ Date	_____ Preparer's Social Security Number or firm's FEIN	
_____ Preparer firm's name (or yours, if self-employed)	_____ Address	(____)_____ Phone	

▶ **Mail this return to: Illinois Department of Revenue, P.O. Box 19016, Springfield, IL 62794-9016** ◀