

Illinois Department of Revenue 2009 Schedule 1299-D

Attach to your Form IL-1120, IL-1041, or IL-990-T.

Tax Year Ending: ___ / ___ __ __

| Write your name as shown on | your return. | | Write your federal employer identification number (FEIN). | | | | | |
|--|---|--|---|--|--------------------------|--|--|--|
| What's new for this yea | | | For tax years beginning on or after January 1, 2010, the Veterans | | | | | |
| To correctly complete 2009 Sch the 2008 Schedule 1299-D, Ste | | Jobs Credit has been increased to the lesser of 10 percent or \$1200 per qualifying employee. | | | | | | |
| credit carryforward that may be For tax years beginning on and Development credit has e | Schedule 1299-D. 009, the Research | For tax years ending on or after December 31, 2009, and on or before December 30, 2020, the Student-Assistance Contribution Credit allows a credit for employers who make matching contributions to Illinois pre-paid tuition programs. The credit is limited to \$500 per qualifying employee, cannot reduce tax to less than zero, and may be carried forward five years. | | | | | | |
| Step 1: Figure you | ur credits | | | | | | | |
| Section A — Credits | | e carried for two | vears | | | | | |
| TECH-PREP Youth V | | | , | | | | | |
| 1 Write direct payroll exper | | | | x .20 = — | ▶ 1 | | | |
| Dependent Care As | | | | | | | | |
| 2 Write the expenses for o | • | | | x .05 = — | ▶ 2 | | | |
| 3 Add Lines 1 and 2. Write | - | | | | 3 | | | |
| 5 Write any distributive sha 6 Add Lines 4 and 5. This i Employee Child Ca 7 Write the total start-up ca 8 Write the annual amount 9 Add Lines 7 and 8. Write | s your Film Produ Ire Tax Credit (osts to provide the paid to provide the | Iction Services Tax C Form IL-1120 filers child care facility. e child care facility. | only) | x .30 = | 5 6 7 8 9 | | | |
| Jobs Tax Credit | ,,,,, | | | | | | | |
| A | В | С | D | E | F | | | |
| Name of zone | No. of employees this year | No. of employees at end of base year | Col. B minus Col. C | No. of eligible employees included in Col. D | Column E x \$500 | | | |
| - | | adovolopmont Zo | no Invoctmon | | | | | |
| Enterprise Zone or A Description of qualified property | В | C D ACRS New/Used | E Name of zone | F G Basis Rate (see instr.) | H Column F x Column G | | | |
| 11a | | | | | a | | | |
| b | | | | | b | | | |
| с | | | | | c | | | |
| 12 Write any distributive sha Investment Credit from p | | | development Zone | e | 12 | | | |
| 13 Add Column H, Lines 11 This is your Enterprise 2 | a through 11c, and | Line 12. | Zone Investment | Credit. | 13 | | | |
| 14 Add Lines 6, 9, 10, and 1 | 3. Write the total h | nere and on Page 2, Li | ne 15. | | 14 | | | |



| 15 | Write the amount from Page 1, Line 14. | | | 15 | | | | |
|----------|---|---|---|---------------|----------------------------|--|--|--|
| | High Impact Business Investment Cre | dit | | | | | | |
| | A B Description of Date placed in | C D | E Name of zone | F Basis | G Column F x .5% (.005) | | | |
| 40 | | | | | | | | |
| 16 | a/ | | | | | | | |
| | b / c / | | | | | | | |
| 17 | | | | | | | | |
| 17 | Add Column G, Lines 16a through 16c. This is you | IF HIGH IMPACT BUSINESS IF | ivestment Credit. | F 17 | | | | |
| | Tax Credit for Affordable Housing Don | ations | | | | | | |
| 18 | Write the total amount of your donation to eligible | | x .50 | = 18 | | | | |
| | Write any distributive share of tax credit for Afforda | - | | | | | | |
| | Donations from partnerships and S corporations of | or transferred to you by the c | lonor. | | | | | |
| 20 | Add Lines 18 and 19. This is your Tax Credit for | Affordable Housing Donati | ons. | → 20 | | | | |
| | Economic Development for a Growing | Economy (EDGE) Tax | x Credit | | | | | |
| 21 | | • • • • | | EO. 21 | | | | |
| 22 | Write any distributive share of EDGE tax credit fro | | | | | | | |
| | Add Lines 21 and 22. This is your Economic Dev | | | | | | | |
| | Tax Credit. | | | → 23 | | | | |
| | Research and Development Credit (Qu te → For tax years beginning on or after July 30, 20 Write the following: | 009, write zero on Line 33 a | nd go to Line 34. A Base period avg | g. expenses | B This year's expenses | | | |
| ~ - | Illinois wages for qualified services (see instruction | ns) | | | | | | |
| 25 26 | Illinois cost of supplies Illinois rental or lease costs of computers | | | | | | | |
| 20 | | | | | | | | |
| | Illinois basic research payments to qualified organ | izations (corporations only) | | | | | | |
| 20 | Figure your credit: | | 20 | | | | | |
| 29 | Add Lines 24 through 28 of each column. Total Illir | nois qualifving expenses. | 29 | | | | | |
| | Subtract Column A, Line 29 from Column B, Line | | | 30 | | | | |
| | Multiply Line 30 by 6.5% (.065). | 0 | | 31 | | | | |
| 32 | Write any distributive share of Research and Deve | elopment Credit | | | | | | |
| | from partnerships and S corporations. | | | | | | | |
| 33 | Add Lines 31 and 32. This is your Research and I | Development Credit. | | → 33 | | | | |
| | River Edge Redevelopment Zone Rem | ediation Credit | | | | | | |
| | | B C | ; | | D | | | |
| | | bursed remediation ess of \$100,000 Ra | te | (| Column B x Column C | | | |
| 34 | | 25% | | | | | | |
| 04 | | 25% | | | | | | |
| | | 25% | | | | | | |
| 05 | | | | - | | | | |
| | Write the amount of River Edge Redevelopment Z | | isierrea to you. | 35 | | | | |
| 30 | Add Column D, Lines 34a through 34c, and Line 3 This is your total River Edge Redevelopment Zo | | | | | | | |
| | | | | | | | | |
| 37 | Add Lines 15, 17, 20, 23, 33, and 36. Write the tot | al here and on Page 3. Line | 38. | 37 | | | | |
| 5. | | | | | | | | |
| | | | | | | | | |



38 Write the amount from Page 2, Line 37.

| | A Name | B SSN | C Date hired | D Qualifying wages | E Column D x 5% c | F Max credit amt. | | H Column F mi Column G | | ا Write the lesser of Column E or H |
|---|--|--|--|--|---------------------------|-------------------------|---------------------------------|------------------------------|---|---|
| 9a | | | / | | | \$600 | | | _ a | |
| b | | | / | <u> </u> | | \$600 | | | _ b | |
| с | | | / | | | \$600 | | | _ C | |
| | any distributive sha ines 39a through 39 | | | | | | ions. | | | |
| Vete | erans Jobs Cred | dit | | | | | | | | |
| | A Name | B SSN | | C Qualifying wages | D Credit percentage | E Column C Column | | F Max credit amount | | G Write the lesser of Column E or F |
| 2 a | | | | | | | | | a | |
| | | | | | | | | | b | |
| C | | | | | | | | | C | |
| | | | | | | | | | | |
| | any distributive sha | | | | • | • | ns. | | | |
| | any distributive sha ines 42a through 42 | | | | • | • | ns. | | | |
| 4 Add L | • | 2c and Line 43. T | This is yo | ur total Vetera | • | • | ins. | | | |
| 4 Add L | ines 42a through 42 | 2c and Line 43. T | This is yo I n Cred | ur total Vetera | ins Jobs Ci Col | • | E Max o | Ecredit | | F Write the lesser of Column D or E |
| 4 Add L | Lines 42a through 42 Jent-Assistance A Name | 2c and Line 43. T e Contributio B SSN | This is yo n Cred co | ur total Vetera lit Qualifying ntribution amo | ins Jobs Ci Col | D umn C | E Max o | credit ount | ▶ 44 | F Write the lesser |
| 4 Add L ∎ Stud 5a | ines 42a through 42 dent-Assistance A | 2c and Line 43. 7 e Contributio B SSN | This is yo n Cred co | ur total Vetera lit Qualifying ntribution amo | ins Jobs Ci Col | D umn C | E Max o amo | credit ount 00 | • 44 a | F Write the lesser of Column D or E |
| 4 Add L I Stud | ines 42a through 42 dent-Assistance A Name | 2c and Line 43. 7 e Contributio B SSN | This is yo | ur total Vetera lit Qualifying ntribution amo | ins Jobs Ci Col | D umn C | E Max o amo \$5 | credit bunt 00 00 | ► 44 a b | F Write the lesser of Column D or E |
| 4 Add L ■ Stud 5a b c 6 Write from p | ines 42a through 42 dent-Assistance A Name any distributive sha partnerships and S | 2c and Line 43. 7 e Contributio B SSN | This is yo n Cred co | ur total Vetera lit C Qualifying ntribution amo | Col unt x | D umn C | E Max o amo \$5 \$5 | credit bunt 00 00 | 44 a b c | F Write the lesser of Column D or E |
| 4 Add L ■ Stud 5a b 6 Write from p 7 Add L | ines 42a through 42 dent-Assistance A Name any distributive sha partnerships and S ines 45a through 45 | 2c and Line 43. 7 Contributio B SSN | This is yo n Cred co sistance | ur total Vetera | Col unt x | D umn C | E Max o amo \$5 \$5 | credit bunt 00 00 | 44 a b c 46 | F Write the lesser of Column D or E |
| 4 Add L 5a 5a 6 Write from p 7 Add L nis is your | ines 42a through 42 dent-Assistance A Name any distributive sha partnerships and S | 2c and Line 43. 7 e Contributio B SSN | This is yo n Cred co sistance | ur total Vetera | Col unt x | D umn C | E Max o amo \$5 \$5 | credit bunt 00 00 | 44 a b c 46 | F Write the lesser of Column D or E |

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Step 2: Figure your credit (See instructions before completing this Step.) <u>=Note</u> - All line reference in this Step refer to Step 2 of this Schedule 1299-D, unless otherwise noted.

| | Write your total tax (see instructions). | | | | | | |
|----|---|--------|--|--|--|--|--|
| | Write the amount of foreign tax credit from Form IL-1041, Schedule CR, Line 8 (Form IL-1041 filers only). 2 | | | | | | |
| | Subtract Line 2 from Line 1. If the amount is zero or negative, write zero. | | | | | | |
| 4 | Write the amount from 2008 Schedule 1299-D, Step 3, Line 1. | | | | | | |
| 5 | Subtract Line 4 from Line 3. This amount may be negative. | 5. | | | | | |
| | Write the amount from 2008 Schedule 1299-D, Step 3, Line 2. | ► 6. | | | | | |
| 7 | If Line 5 is negative, write the amount from Line 6 as a negative number. | _ | | | | | |
| _ | Otherwise, subtract Line 6 from Line 5. | | | | | | |
| | Write the amount from 2008 Schedule 1299-D, Step 3, Line 3. | ▶ 8. | | | | | |
| 9 | If Line 7 is negative, write the amount from Line 8 as a negative number. | - | | | | | |
| | Otherwise, subtract Line 8 from Line 7. | • • | | | | | |
| | Write the amount from 2008 Schedule 1299-D, Step 3, Line 4. | ► 10 . | | | | | |
| 11 | If Line 9 is negative, write the amount from Line 10 as a negative number. | | | | | | |
| | Otherwise, subtract Line 10 from Line 9. | | | | | | |
| | Write the amount from 2008 Schedule 1299-D, Step 3, Line 5. | ► 12 . | | | | | |
| 13 | If Line 11 is negative, write the amount from Line 12 as a negative number. | | | | | | |
| | Otherwise, subtract Line 12 from Line 11. | | | | | | |
| | Write the amount from 2008 Schedule 1299-D, Step 3, Line 6. | ▶ 14. | | | | | |
| 15 | If Line 13 is negative, write the amount from Line 14 as a negative number. | 45 | | | | | |
| 40 | Otherwise, subtract Line 14 from Line 13. | | | | | | |
| | Write the amount from 2008 Schedule 1299-D, Step 3, Line 7. | 10. | | | | | |
| 17 | If Line 15 is negative, write the amount from Line 16 as a negative number. | 17 | | | | | |
| 10 | Otherwise, subtract Line 16 from Line 15. | | | | | | |
| | Write the amount from Step 1, Section A, Line 3, of this Schedule 1299-D. | 10. | | | | | |
| 19 | If Line 17 is negative, write the amount from Line 18 as a negative number. | 10 | | | | | |
| 20 | Otherwise, subtract Line 18 from Line 17. Write the amount from Step 1, Section B, Line 48, of this Schedule 1299-D. | | | | | | |
| | If Line 19 is negative, write the amount from Line 20 as a negative number. | 20 - | | | | | |
| 21 | Otherwise, subtract Line 20 from Line 19. | 21 . | | | | | |
| 22 | Figure the amount of credit to use this year. | 21. | | | | | |
| " | $\underline{=Note}$ If the lesser number is negative, write zero. | | | | | | |
| | | | | | | | |
| | b Write the lesser of Step 2, Line 5 or Line 6. | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | g Write the lesser of Step 2, Line 15 or Line 16. | | | | | | |
| | h Write the lesser of Step 2, Line 17 or Line 18. h | | | | | | |
| | | | | | | | |
| 23 | Add Lines 22a through 22i. Write the result here and on your | | | | | | |
| | Form IL-1120, Line 50, IL-1041, Line 45, or | | | | | | |
| | IL-990-T, Line 22. | 23 . | | | | | |



Step 3: Figure your credit available to be carried forward Retain a copy of this page in your files. You will need this to complete next year's Illinois Schedule 1299-D. To figure each credit amount, STOP at the first applicable line for each credit. **ENOTE** All line references in this Step refer to Step 2 of this Illinois Schedule 1299-D. 1 *Two-year credit carryforward* that is available for **one** more tax year. If Line 9 is positive or zero, write zero here. You do not have any credit from this year to carry. • If Line 7 is negative, write the amount from Line 8 here. If Line 9 is negative, write that amount as a positive number here. 1_____ 2 Five-year credit carryforward that is available for one more tax year If Line 11 is positive or zero, write zero here. You do not have any credit from this year to carry. • If Line 9 is negative, write the amount from Line 10 here. • If Line 11 is negative, write that amount as a positive number here. 2 3 Two-year credit carryforward that is available for the next two tax years. • If Line 19 is positive or zero, write zero here. You do not have any credit from this year to carry. • If Line 17 is negative, write the amount from Line 18 here. • If Line 19 is negative, write that amount as a positive number here. 3 4 Five-year credit carryforward that is available for the next two tax years. If Line 13 is positive or zero, write zero here. You do not have any credit from this year to carry. • If Line 11 is negative, write the amount from Line 12 here. • If Line 13 is negative, write that amount as a positive number here. 4 5 Five-year credit carryforward that is available for the next three tax years. If Line 15 is positive or zero, write zero here. You do not have any credit from this year to carry. • If Line 13 is negative, write the amount from Line 14 here. 5_ • If Line 15 is negative, write that amount as a positive number here. 6 *Five-vear credit carrvforward* that is available for the next **four** tax vears. If Line 17 is positive or zero, write zero here. You do not have any credit from this year to carry. • If Line 15 is negative, write the amount from Line 16 here. • If Line 17 is negative, write that amount as a positive number here. 6 7 Five-year credit carryforward that is available for the next five tax years. If Line 21 is positive or zero, write zero here. You do not have any credit from this year to carry. • If Line 19 is negative, write the amount from Line 20 here. • If Line 21 is negative, write that amount as a positive number here. 7_

This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty. This form has been approved by the Forms Management Center. IL-492-2296



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