

Illinois Department of Revenue Schedule INL

Attach to your Form IL-1120.

Illinois Net Loss Adjustments for Cooperatives and REMIC Owners

Year ending

Month Year

IL Attachment No. 20

| Sto | ep 1: Provide the following information | | | | | | |
|-----|--|------------------------|--|----------|-----------------------------------|--|--|
| 4 | Enter your name as shown on your Form IL-1120. | | Enter your federal employer identification no. (FEIN). | | | | |
| | Effect your name as shown on your Form IE 1720. | Linery | our rederar employe | i ideiit | meanorrio. (i Eliv). | | |
| (| Check the box indicating the reason for completing Schedule INL. | Cooperative Adjustment | ` ' | | eps 2 and 3 only.) ep 4 only.) | | |
| Sto | ep 2: Make your election (Cooperatives only) | | | | | | |
| 1 | Mark the box if this is the first year for which you are filing Schedule IN | IL. | | | | | |
| | <u>■Note</u> If you marked the box in Line 1, complete the following statement by checking the appropriate box 1a or 1b. | | | | | | |
| | I elect to compute Illinois net income for all taxable years: | | | | | | |
| | a allowing patronage losses to offset nonpatronage income. | | | | | | |
| | b without allowing patronage losses to offset nonpatronage income. | | | | | | |
| 2 | Mark the box if you elected to offset nonpatronage loss against patronag | e income | | | | | |
| | for federal purposes for this tax year. | | | | | | |
| Sto | ep 3: Figure your Illinois income or loss (Cooperat | ives only) | A | | В | | |
| | | | Patronage | | Nonpatronage | | |
| 3 | Federal taxable income. (Federal Form 1120-C, Schedule G, Line 10, o | | | | | | |
| | Form 8817, Line 29.) | | | | | | |
| 4 | Addition modifications | | | | | | |
| 5 | Subtraction modifications | | | | | | |
| 6 | Base income. Add Lines 3 through 5. | | <u>•00</u> | | | | |
| 7 | | | 00 | 7b | <u>•00</u> | | |
| 8 | Business income or loss from non-unitary partnerships, partnerships in Schedule UB, S corporations, trusts, or estates. | | •00 | 8h | •00 | | |
| 9 | Add Lines 7 and 8. | | •00 | | | | |
| | Business income or loss. Subtract Line 9 from Line 6. | | | | •00 | | |
| | Apportionment factor from Form IL-1120, Line 30 | | | | | | |
| | Business income or loss apportioned to Illinois. Multiply Line 10 by Line | | | | •00 | | |
| | Nonbusiness income or loss allocated to Illinois from Form IL-1120, Line | | | | •00 | | |
| | Business income or loss apportionable to Illinois from non-unitary partnerships included on a Schedule UB, S corporations, trusts, or esta | erships, tes from | | | | | |
| | Form IL-1120, Line 33. | | <u>•00</u> | | | | |
| | Base income or loss allocable to Illinois. Add Lines 12 through 14. | | | | <u>•00</u> | | |
| 16 | Discharge of Indebtedness adjustment. See instructions. | | | | <u>•00</u> | | |
| 17 | • | | •00 | | | | |
| | Illinois net loss deduction | | | | •00 | | |
| | Net income or loss. Subtract Line 18 from Line 17. | 19a | <u>•00</u> | | •00 | | |
| 20 | Combined net income or loss. See instructions. | | | 20 | <u>•00</u> | | |

Step 4: Figure your Illinois income or loss (REMIC residual interest owners only.)

| 1 | Enter your base income or net loss from Form IL-1120, Line 35. | | 1 | <u>•00</u> |
|----|---|-----|-------------|------------|
| 2 | Enter your recomputed federal taxable income. See instructions. | 2 | <u>•00</u> | |
| 3 | Total addition modifications. (Form IL-1120, Lines 2 through 8.) | 3 | <u>•00</u> | |
| 4 | Total subtraction modifications entered as a negative number. (Form IL-1120, Line 22.) | 4 | <u>•00</u> | |
| 5 | Base income. Add Lines 2 through 4. | 5 | <u>•00</u> | |
| 6 | Nonbusiness income or loss. (Form IL-1120, Line 24.) | 6 | <u>•00</u> | |
| 7 | Business income or loss from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates. (Form IL-1120, Line 25.) | 7 | • <u>00</u> | |
| 8 | Add Lines 6 and 7. | 8 | <u>•00</u> | |
| 9 | Business income or loss. Subtract Line 8 from Line 5. | 9 | <u>•00</u> | |
| 10 | Apportionment factor from Form IL-1120, Line 30 | 10• | | |
| 11 | Business income or loss apportioned to Illinois. Multiply Line 9 by Line 10. | 11 | <u>•00</u> | |
| 12 | Nonbusiness income or loss allocated to Illinois from Form IL-1120, Line 32. | 12 | <u>•00</u> | |
| 13 | Business income or loss apportionable to Illinois from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates from Form IL-1120, Line 33. | 13 | •00 | |
| 14 | Recomputed base income or net loss allocable to Illinois. Add Lines 11 through 13. | | 14 | •00 |
| 15 | Subtract Line 1 from Line 14. See instructions. If the result is positive or zero, stop here. Do not complete the rest of this form. | | 15 | •00 |
| 16 | Enter any discharge of indebtedness amount from Form IL-1120, Line 36. | | 16 | •00 |
| 17 | If Line 1 is | | | |
| | negative or zero, add Lines 1 and 16, and enter the total here. positive , enter zero here. | | 17 | <u>•00</u> |
| 18 | Add Lines 15 and 17. If the result is negative , this is the amount you may use as an NLD carryforward in subsequent tax years. | | 18 | •00 |

