



Illinois Department of Revenue

2019 IL-1120-X

For tax years ending on or after December 31, 2019



Amended Corporation Income and Replacement Tax Return

Indicate what tax year you are amending: Tax year beginning month day year, ending month day year

Enter the amount you are paying.



If you are filing an amended return for tax years ending before December 31, 2019, you may not use this form. For prior years, see instructions to determine the correct form to use.

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Step 1: Identify your corporation

- A Enter your complete legal business name. If you have a name change, check this box. Name:
B Enter your mailing address. If you have an address change, check this box. C/O: Mailing address: City: State: ZIP:
C Check the box and see the instructions if your business is a: Unitary Filer (Combined return) Foreign insurer
D Check this box if you are filing this form only to report an increased net loss on Line 37, Column B.
E If you have completed the following, check the box and attach the federal form(s) to this return, if you have not previously done so. Federal Form 8886 Federal Schedule M-3, Part II, Line 12
F Check this box if you attached Illinois Schedule UB.
G Check this box if you attached the Subgroup Schedule.
H Check this box if you attached Illinois Schedule 1299-D.
I Check this box if you attached Form IL-4562.
J Check this box if you attached Illinois Schedule M (for businesses).
K Check this box if you attached Schedule 80/20.
L Check this box if you are a 52/53 week filer.

- M Enter your federal employer identification number (FEIN).
N Enter your North American Industry Classification System (NAICS) Code. See instructions.
O Enter your Illinois corporate file (charter) number.
P Check the applicable box for the type of change being made. NLD State change Federal change
If a federal change, check one: Partial agreed Finalized
Enter the finalization date
Attach your federal finalization to this return.
Q Check this box if you are filing Form IL-1120-X on or before the extended due date and are making the election to treat all nonbusiness income as business income.
R Check this box if you are making a discharge of indebtedness adjustment on Line 36, or Schedule NLD or UB/NLD. (US Form 982)
S If you are filing Schedule INL, check this box.
T If you annualized your income on your Form IL-2220, check this box. (IL-2220)
U Check this box if your business activity is protected under Public Law 86-272.
V Throwback adjustment - see instructions.
W Double throwback adjustment - see instructions.

Attach your payment and Form IL-1120-X-V here.



Explain the changes on this return (Attach a separate sheet if necessary.):

- If you owe tax on Line 68, complete a payment voucher, Form IL-1120-X-V. Write your FEIN, tax year ending, and "IL-1120-X-V" on your check or money order and make it payable to "Illinois Department of Revenue." Attach your voucher and payment to this page.
Enter the amount of your payment on the top of this page in the space provided.
Mail this return to: Illinois Department of Revenue, P.O. Box 19016, Springfield, IL 62794-9016



Step 2: Figure your income or loss

	A As most recently reported or adjusted (Whole dollars only)	B Corrected amount (Whole dollars only)
1 Federal taxable income from U.S. Form 1120.	1 <u> .00</u>	1 <u> .00</u>
2 Net operating loss deduction from U.S. Form 1120.	2 <u> .00</u>	2 <u> .00</u>
3 State, municipal, and other interest income excluded from Line 1.	3 <u> .00</u>	3 <u> .00</u>
4 Illinois income and replacement tax and surcharge deducted in arriving at Line 1.	4 <u> .00</u>	4 <u> .00</u>
5 Illinois Special Depreciation addition. Attach Form IL-4562.	5 <u> .00</u>	5 <u> .00</u>
6 Related-Party Expenses addition. Attach Schedule 80/20.	6 <u> .00</u>	6 <u> .00</u>
7 Distributive share of additions. Attach Schedule(s) K-1-P or K-1-T.	7 <u> .00</u>	7 <u> .00</u>
8 Other additions. Attach Illinois Schedule M (for businesses).	8 <u> .00</u>	8 <u> .00</u>
9 Add Lines 1 through 8. This is your total income or loss.	9 <u> .00</u>	9 <u> .00</u>

Step 3: Figure your base income or loss

10 Interest income from U.S. Treasury and exempt federal obligations.	10 <u> .00</u>	10 <u> .00</u>
11 River Edge Redevelopment Zone Dividend subtraction. Attach Sch. 1299-B.	11 <u> .00</u>	11 <u> .00</u>
12 River Edge Redevelopment Zone Interest subtraction. Attach Sch. 1299-B.	12 <u> .00</u>	12 <u> .00</u>
13 High Impact Business Dividend subtraction. Attach Schedule 1299-B.	13 <u> .00</u>	13 <u> .00</u>
14 High Impact Business Interest subtraction. Attach Schedule 1299-B.	14 <u> .00</u>	14 <u> .00</u>
15 Contribution subtraction. Attach Schedule 1299-B.	15 <u> .00</u>	15 <u> .00</u>
16 Contributions to certain job training projects.	16 <u> .00</u>	16 <u> .00</u>
17 Foreign Dividend subtraction. Attach Schedule J.	17 <u> .00</u>	17 <u> .00</u>
18 Illinois Special Depreciation subtraction. Attach Form IL-4562.	18 <u> .00</u>	18 <u> .00</u>
19 Related-Party Expenses subtraction. Attach Schedule 80/20.	19 <u> .00</u>	19 <u> .00</u>
20 Distributive share of subtractions. Attach Schedule(s) K-1-P or K-1-T.	20 <u> .00</u>	20 <u> .00</u>
21 Other subtractions. Attach Schedule M (for businesses).	21 <u> .00</u>	21 <u> .00</u>
22 Total subtractions. Add Lines 10 through 21.	22 <u> .00</u>	22 <u> .00</u>
23 Base income or loss. Subtract Line 22 from Line 9.	23 <u> .00</u>	23 <u> .00</u>



A If the amount on Line 23 is derived inside Illinois only, check this box and enter the amount from Step 3, Line 23 on Step 5, Line 35. You may not complete Step 4. (You must leave Step 4, Lines 24 through 34 blank.)

Note If you are a unitary filer, do not check this box. Check the box on Line B and complete Step 4.

B If any portion of the amount on Line 23 is derived outside Illinois, or you are a unitary filer, check this box and complete all lines of Step 4. (Do not leave Lines 28 through 30 blank.) See instructions.

Step 4: Figure your income allocable to Illinois (Complete only if you checked the box on Line B, above.)

24 Nonbusiness income or loss. Attach Schedule NB.	24 <u> .00</u>	24 <u> .00</u>
25 Business income or loss included in Line 23 from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates. See instructions.	25 <u> .00</u>	25 <u> .00</u>
26 Add Lines 24 and 25.	26 <u> .00</u>	26 <u> .00</u>
27 Business income or loss. Subtract Line 26 from Line 23.	27 <u> .00</u>	27 <u> .00</u>
28 Total sales everywhere. This amount cannot be negative.	28 <u> .00</u>	28 <u> .00</u>
29 Total sales inside Illinois. This amount cannot be negative.	29 <u> .00</u>	29 <u> .00</u>
30 Apportionment factor. Divide Line 29 by Line 28. Round to six decimal places.	30 <u> .</u>	30 <u> .</u>
31 Business income or loss apportionable to Illinois. Multiply Line 27 by Line 30.	31 <u> .00</u>	31 <u> .00</u>
32 Nonbusiness income or loss allocable to Illinois. Attach Schedule NB.	32 <u> .00</u>	32 <u> .00</u>
33 Business income or loss apportionable to Illinois from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates. See instructions.	33 <u> .00</u>	33 <u> .00</u>
34 Base income or loss allocable to Illinois. Add Lines 31 through 33.	34 <u> .00</u>	34 <u> .00</u>



Step 5: Figure your net income

Table with 3 columns: Description, A (As most recently reported or adjusted), and B (Corrected amount). Rows 35-39.

Step 6: Figure your replacement tax after credits

Table with 3 columns: Description, A, and B. Rows 40-44.

Step 7: Figure your income tax after credits

Table with 3 columns: Description, A, and B. Rows 45-49.

Step 8: Figure your refund or balance due

Table with 3 columns: Description, A, and B. Rows 50-68.

Note: You will be sent a bill for any additional penalty and interest due.

Special Note: Enter the amount of your payment on the top of Page 1 in the space provided.

Step 9: Sign below - 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 and preparer information form with fields for Signature, Date, Title, Phone, PTIN, Firm's name, address, and phone.

Attach supporting documents to your Form IL-1120-X.



If you completed:

Form IL-1120-X	→	U.S. 1120-X, and U.S.1139 or federal RAR (if applicable)
Step 1, Line C (unitary) only	→	Schedule UB/Subgroup Schedule Note → Check the box on Form IL-1120-X, Step 1, Line F/G
Step 1, Line C (foreign insurer) only	→	Schedule INS
Step 1, Line C (unitary) and (foreign insurer)	→	Schedule UB/Subgroup Schedule and Schedule UB/INS Note → Check the box on Form IL-1120-X, Step 1, Line F/G
Step 1, Line E	→	Federal Form 8886 or Federal Schedule M-3 (as applicable)
Step 1, Line R	→	Federal Form 982
Step 1, Line S	→	Schedule INL
Step 1, Line T	→	Schedule 2220
Lines 5 and 18	→	Form IL-4562 Note → Check the box on Form IL-1120-X, Step 1, Line I
<ul style="list-style-type: none"> ● Special Depreciation addition ● Special Depreciation subtraction 		
Lines 6 and 19	→	Schedule 80/20 Note → Check the box on Form IL-1120-X, Step 1, Line K
<ul style="list-style-type: none"> ● Related-Party Expenses addition ● Related-Party Expenses subtraction 		
Lines 7 and 20	→	Schedule(s) K-1-P or K-1-T
<ul style="list-style-type: none"> ● Distributive share of additions ● Distributive share of subtractions 		
Lines 8 and 21	→	Schedule M and any required support listed on Schedule M Note → Check the box on Form IL-1120-X, Step 1, Line J
<ul style="list-style-type: none"> ● Other additions ● Other subtractions 		
Lines 11 through 15	→	Schedule 1299-B and any required support listed on Schedule 1299-B
<ul style="list-style-type: none"> ● River Edge Redevelopment Zone Dividend subtraction ● River Edge Redevelopment Zone Interest subtraction ● High Impact Business Dividend subtraction ● High Impact Business Interest subtraction ● Contributions subtraction 		
Line 17 Foreign Dividend subtraction	→	Illinois Schedule J, and U.S. 1120, Schedule C or equivalent
Lines 24 and 32	→	Schedule NB
<ul style="list-style-type: none"> ● Nonbusiness income or loss ● Nonbusiness income or loss allocable to Illinois 		
Lines 25 and 33	→	Schedule(s) K-1-P or K-1-T
<ul style="list-style-type: none"> ● Business income or loss from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates ● Business income or loss apportionable to Illinois from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates 		
Line 36 Discharge of indebtedness adjustment	→	Federal Form 982 Note → Check the box on Form IL-1120-X, Step 1, Line R
Line 38 Illinois net loss deduction	→	Schedule NLD or UB/NLD (for unitary filers)
Lines 41 and 46 Recapture of investment credit	→	Schedule 4255
Line 43 Investment credits	→	Form IL-477 and any required support listed on Form IL-477
Line 48 Income tax credits	→	Schedule 1299-D and any required support listed in the Schedule 1299-D instructions or Schedule 1299-I Note → Check the box on Form IL-1120-X, Step 1, Line H
Lines 51 and 54 Foreign Insurer tax reduction	→	Schedule INS or Schedule UB/INS (for unitary filers) Note → Check the box on Form IL-1120-X, Step 1, Line C
Line 59c Pass-through withholding reported to you	→	All Schedules K-1-P and K-1-T you received showing pass-through withholding
Line 59d Illinois gambling withholding	→	Copies of all Forms W-2G

****Failure to attach the required documents may result in the disallowance of the corresponding line item.****