	⟨⟨  2021 Form IL-1120												
	Corporation Income and Replacement Tax Return												
	See "When should I file?" in the Form IL-1120 instructions for a is return is not for calendar year 2021, enter your fiscal tax year here. year beginning $\frac{20}{\text{month}}$ $\frac{20}{\text{year}}$ , ending $\frac{20}{\text{month}}$ $\frac{20}{\text{year}}$ . This form is for tax years ending on or after December 31, 2021, and before December 31 other situations, see instructions to determine the correct form to use.			Enter the amount you are paying	J.								
B	<b>1: Identify your corporation</b> Enter your complete legal business name. If you have a name change, check this box. Name:	0 P Q	(FEIN).	ral employer identification number mber of a group filing a federal turn, enter the FEIN of the parent. American Industry Classification Ocode. See instructions.									
	<ul> <li>First return</li> <li>Final return (Enter the date of termination</li></ul>		accounting recc postal abbreviat City If you are makin to treat all nonb	State ZIP state ZIP state stat									
F	<ul> <li>Unitary Filer (Combined return)</li> <li>Foreign insurer</li> <li>If you completed the following, check the box and <b>attach</b> the federal form(s) to this return.</li> <li>Federal Form 8886</li> <li>Federal Schedule M-3, Part II, Line 12</li> </ul>		Lines 24 and 32 Check your met		<b>_</b>								
G	Apportionment Formulas. Mark the appropriate box or boxes and see         Apportionment Formula instructions.       Sales companies         Insurance companies       Financial organizations         Transportation companies       Federally regulated exchange	v	adjustment on F	Form IL-1120, Line 36, check this federal Form 982 and a									
I J K L	Check this box if you attached Illinois Schedule UB.Check this box if you attached the Subgroup Schedule.Check this box if you attached Illinois Schedule 1299-D.Check this box if you attached Form IL-4562.Check this box if you attached Illinois Schedule M (for businesses).Check this box if you attached Schedule 80/20.	x Y	check this box a Check this box protected under	Public Law 86-272.									
Attach your payment and Form IL-1120-V here.	<ul> <li>If you owe tax on Line 67, make an electronic payment at Tax.Illinois payment voucher, Form IL-1120-V. Write your FEIN, tax year ending, make it payable to "Illinois Department of Revenue." Attach your voir</li> <li>Enter the amount of your payment on the top of this page in the spate</li> <li>If a payment is not enclosed, mail this return to: ILLINOIS DEPARTMENT OF REVENUE PO BOX 19048</li> <li>SPRINGFIELD IL 62794-9048</li> </ul>	, and " ucher ace pro If II P	IL-1120-V" on yo and payment her ovided.	ur check or money order and re. losed, mail this return to: IMENT OF REVENUE									
	Page 1 of 4 This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of the information is REQUIRED. Failure to provide information could result in a penalty		IR NS	DR IL-1120 (R-12/21)									



Ste	p 2: Figure your income or loss			(Whole dollars only)					
1	Federal taxable income from U.S. Form 1120, Line 30.								
	Attach a copy of your federal return.		1	<u>00</u>					
2	Net operating loss deduction from U.S. Form 1120, Line 29a. This amount c	be negative.	2	<u>•00</u>					
3	State, municipal, and other interest income excluded from Line 1.		3	<u>00</u>					
4	Illinois income and replacement tax and surcharge deducted in arriving at Li		4	<u>•00</u>					
5	Illinois Special Depreciation addition. Attach Form IL-4562.			5	<u> </u>				
6	Related-Party Expenses additions. Attach Schedule 80/20.			6	<u> </u>				
7	Distributive share of additions. Attach Schedule(s) K-1-P or K-1-T.			7	<u>•00</u>				
8	Other additions. Attach Schedule M (for businesses).		8	<u>•00</u>					
9	Add Lines 1 through 8. This amount is your income or loss.		9	•00					
Ste	p 3: Figure your base income or loss								
10	Interest income from U.S. Treasury and other exempt federal obligations.	10		<u>•00</u>					
11	River Edge Redevelopment Zone Dividend subtraction.								
	Attach Schedule 1299-B.	11		<u>•00</u>					
12	River Edge Redevelopment Zone Interest subtraction.	40		00					
4.0	Attach Schedule 1299-B.								
13	High Impact Business Dividend subtraction. <b>Attach</b> Schedule 1299-B.								
14	High Impact Business Interest subtraction. <b>Attach</b> Schedule 1299-B.								
15	Contribution subtraction. Attach Schedule 1299-B.								
16	Contributions to certain job training projects. See instructions.								
17	Foreign Dividend subtraction. <b>Attach</b> Schedule J. See instructions.		_ <u>•00</u>						
18	Illinois Special Depreciation subtraction. Attach Form IL-4562.								
19	Related-Party Expenses subtraction. Attach Schedule 80/20.								
20	Distributive share of subtractions. <b>Attach</b> Schedule(s) K-1-P or K-1-T.								
21	Other subtractions. <b>Attach</b> Schedule M (for businesses).		_ <u>•00</u>	00					
22	Total subtractions. Add Lines 10 through 21.		22	• <u>00</u> •00					
23	Base income or loss. Subtract Line 22 from Line 9.	ie hev	and antar the an	23					
	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.)         Image: Stop 1       If you are a unitary filer, do not check this box. Check the box on Line B and complete Step 4.         Image: Stop 2       If you are a unitary filer, do not check this box. Check the box on Line B and complete Step 4.         Image: Stop 3       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		24		•00					
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>					
26	Add Lines 24 and 25.		26	<u>00</u>					
27	Business income or loss. Subtract Line 26 from Line 23.			27	<u>00</u>				
28	Total sales everywhere. This amount cannot be negative.	28							
29	Total sales inside Illinois. This amount cannot be negative.	29							
30	Apportionment Factor. Divide Line 29 by Line 28. Round to six decimal places.	<b>■</b>							
31	Business income or loss apportionable to Illinois. Multiply Line 27 by Line 30		31	<u> </u>					
32	Nonbusiness income or loss allocable to Illinois. Attach Schedule NB.			32	<u> </u>				
33	Business income or loss apportionable to Illinois from non-unitary partnersh		artnerships						
	included on a Schedule UB, S corporations, trusts, or estates. See instruction	ons.		33	<u>•00</u>				
34	Base income or loss allocable to Illinois. Add Lines 31 through 33.			34	<u> </u>				


Step	5: Fic	gure your net i	inco	ome																							
35	-	ncome or net los			ep 3, l	_ine 2	3, o	r St	ep 4	, L	ine 34	L.								3	5				•00		
36	Discharge of indebtedness adjustment. Attach federal Form 982. See instructions.									<b>36</b> 00																	
37	Adjusted base income or net loss. Add Lines 35 and 36. See instructions.								3	7				•00													
38	Illinois net loss deduction. If Line 37 is zero or a negative amount, enter zero.																										
	Check this box and attach a detailed statement if you have merged losses.							38							•00												
39	Net in	come. Subtract I	_ine	38 fro	om Lin	e 37.														3	9				<u>•00</u>		
Step	6: Fig	gure your repla	ace	ment	tax a	after	cre	dits	6																		
40	-	cement tax. Multi			-																0				•00		
41	•	Recapture of investment credits. Attach Schedule 4255.											1														
42		placement tax before credits. Add Lines 40 and 41.											2														
		ment credits. Atta																			3						
	-	cement tax after						3 fro	om L	ine	e 42. I	f the	e a	mou	int is	nega	tive	e, enter z	ero.	4	4				_• <u>00</u>		
Step	-	gure your inco					ts																				
45		e tax. Multiply Lir		-																<b>45</b>							
46	•	ture of investme							255	•											6						
47		e tax before cred					-														7 <u>•00</u>						
48		e tax credits. Atta																			<b>B</b> 00						
49		e tax after cred						n Lin	ie 47	'. It	f the a	Imol	unt	is n	egati	ve, e	nte	r zero.		4	9				<u>•00</u>		
-	-	gure your refu																									
50		cement tax before																			0						
51	-	n Insurer replace											UE	B/INS	5. See	e inst	truc	ctions.			1						
52		ict Line 51 from L				-		-				х.									2						
53		e tax before redu										_ //		-							3						
54	•	n Insurer income										B/IN	VS.	. See	e inst	ructio	ons	•			4				_• <u>00</u>		
55		ict Line 54 from L				-						-									5				_• <u>00</u>		
56	-	assionate Use of					-				-	e. S	ee	inst	ructic	ons.					6				_ <u>•00</u>		
57		f assets by gamin	-			-															7						
58	Total net income and replacement taxes and surcharges. Add Lines 52, 55, 56, and 57.											8															
59	-	payment of estim										inst	ruc	ction	s.						9						
60		taxes, surcharg		-	enalty	. Add	Lin	ies 5	58 ar	٦d	59.									6	0				<u>•00</u>		
61	-	ents. See instruct																	0.0								
		edits from previo			-																						
		tal payments ma						eturn is filed. 61b							<u>•00</u>	<u>)</u>											
	<ul> <li>Pass-through withholding reported to you.</li> <li>Attach Schedule(s) K-1-P or K-1-T.</li> </ul>						61c								•00	<u>)</u>											
	Ati	ss-through entity tach Schedule(s)	) K-	1-P or	K-1-T		-																				
		nois income tax v			•			(s) \	N-20	G.					61e				•00	-							
62	•	payments. Add Li			•															-	2				<u>•00</u>		
63	-	ayment. If Line 6		-					btra	ct I	Line 6	0 fro	om	Line	e 62.					6	3				<u>•00</u>		
64	Amount to be <b>credited forward.</b> See instructions. Check this box and attach a detailed statement if this carryforward is going to a different FEIN. <b>4 64 64</b>									•00 🏈																	
65		d. Subtract Line								-			-	-	10 a (		em	I LIIN.			+ 5				<u>000</u> 、		
							15 1		annot			Terc		ieu.					1	0	5						
	Complete to direct deposit your refund.         Routing Number       Checking or																										
	K	louting Number	╞				┿	┿	╈	╬		H		neci		or L	4	Savings									
	A	ccount Number																									
67	Tax du	<b>ue.</b> If Line 60 is g	rea	ter tha	n Line	e 62, s	subt	ract	Line	e 6	2 from	n Lin	ne (	60. 1	This is	s the	am	nount you	ı owe.	6	7				• <u>00</u>		
Step	9: Siq	n below - Under	pen	alties o	of perju	irv, I s	ate	that	l hav	e e	examin	ed th	his	retur	m and	l, to th	ne b	est of my	knowled	dge.	it is tru	ie, co	rrect	and c	omplete		
Sigr	· · ·		1		1	<b>,</b> , -										,		,		<b>J</b> =,					artment		
Here																with the											
	Signa	ature of authorized	offic	cer	Da	ate (mi	n/dd/	уууу)	)   1	Γitle	e						Pho	one			paid p	repai	er sh	own ir	this step		
Paid	ļ												Cheo														
	arer	Print/Type paid pr	epar	er's na	me			Pai	d pre	pa	rer's si	gnat	ture	9			D	ate (mm/do	d/yyyy)	sel	f-emplo	byed	Paid	Prepa	rer's PTIN		
	Only												Firm	's FE	EIN ▶												
000	y	Firm's address																	Firm'	s ph	one	(	)				

Attach supporting documents to your Form IL-1120.



If you completed:	
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## Attach:

Form IL-1120	U.S. 1120, Pages 1 through 6, or equivalent
	Schedule UB/Subgroup Schedule
	<b><u>ENote</u></b> Check the box on Form IL-1120, Step 1, Line H
Step 1, Line E (foreign insurer) only	
	Schedule UB/Subgroup Schedule and Schedule UB/INS
	<b>ENDITIENT</b> Check the box on Form IL-1120, Step 1, Line H
Step 1, Line F	Federal Form 8886 or Federal Schedule M-3 (as applicable)
Step 1, Line U	
Step 1, Line V	
Step 1, Line W	
Lines 5 and 18	
Special Depreciation addition	<i>ENDIE</i> → Check the box on Form IL-1120, Step 1, Line K
<ul> <li>Special Depreciation subtraction</li> </ul>	
	Schedule 80/20
Related-Party Expenses addition	<b>ENDITIENT</b> Check the box on Form IL-1120, Step 1, Line M
<ul> <li>Related-Party Expenses subtraction</li> </ul>	· · · · · · · · · · · · · · · ·
Lines 7 and 20	Schedule(s) K-1-P or K-1-T
<ul> <li>Distributive share of additions</li> </ul>	
<ul> <li>Distributive share of subtractions</li> </ul>	
Lines 8 and 21	Schedule M and any required support listed on Schedule M
<ul> <li>Other additions</li> </ul>	<b><u></u>ENote → Check the box on Form IL-1120, Step 1, Line L</b>
<ul> <li>Other subtractions</li> </ul>	
Lines 11 through 15	► Schedule 1299-B and any required support listed on Schedule
<ul> <li>River Edge Redevelopment Zone</li> </ul>	1299-B
Dividend subtraction	
<ul> <li>River Edge Redevelopment Zone</li> </ul>	
Interest subtraction	
High Impact Business Dividend subtraction	
<ul> <li>High Impact Business Interest subtractions</li> <li>Contributions subtraction</li> </ul>	
	▶ Illinois Schedule J, and U.S. 1120, Schedule C or equivalent
-	
Lines 24 and 32	Schedule NB
Nonbusiness income or loss	
Nonbusiness income or loss allocable to Illinois     Lines 25 and 33	Schodula(a) K 1 D or K 1 T
<ul> <li>Business income or loss from non-unitary</li> </ul>	► Schedule(s) K-1-P or K-1-T
partnerships, partnerships included on a Schedule UB	
S corporations, trusts, or estates	,
<ul> <li>Business income or loss apportionable to Illinois from</li> </ul>	
non-unitary partnerships, partnerships included on a	
Schedule UB, S corporations, trusts, or estates	
	► Federal Form 982
	<i></i> Check the box on Form IL-1120, Step 1, Line U
Lines 41 and 46 Recapture of investment credit	Schedule 4255
	Form IL-477 and any required support listed on Form IL-477
,	Schedule 1299-D and any required support listed in the Schedule
	1299-D instructions or Schedule 1299-I
	<i>_Note→</i> Check the box on Form IL-1120, Step 1, Line J
Lines 51 and 54 Foreign Insurer tax reduction	Schedule INS or Schedule UB/INS (for unitary filers)
	<i>■Note</i> Check the box on Form IL-1120, Step 1, Line E
Line 59 Underpayment of estimated tax penalty	Form IL-2220
	<b><u>ENote</u></b> If you annualized your income on Form IL-2220, Step 6,
	check the box on Form IL-1120, Step 1, Line W
	All Schedules K-1-P and K-1-T you received showing
to you	pass-through withholding
	All Schedules K-1-P and K-1-T you received showing
reported to you	pass-through entity tax credit
Line 61e Illinois income tax withholding	<ul> <li>Copies of all Forms W-2G</li> </ul>

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