Illinois Department of Revenue 2021 Schedule 80/20 Related-Party Expenses		Year ending
For tax years ending <b>on or after</b> December 31, 202 <sup>-</sup> Attach to your Form IL-1120, IL-1120-ST, IL-1065, or	1. r IL-1041.	Month Year IL Attachment No. 14
Enter your name as shown on your Illinois tax return.	Enter your federal employer	identification number (FEIN).
Step 1: Identify your affiliated companies	ВС	D - Totals
1 Enter the name of each affiliated company. 1◇	◇	$\diamond$
2 Enter the FEIN for each	\$	
2a Check if this is a newly added	· ◇ ·	(
affiliated company. See instructions.		
Step 2: Figure your addition modifications =Note =	All taxpayers may complete this sec	
3a Åmount of interest paid to each affiliated company. 3a	♦	If you have more affiliated companies
h Interest exempt from	♦	to report than space
	``	and attach additional
4 Amount of dividends		Report the totals in
received from each affiliated company.	♦	column D of the last
5 Subtract Line 4 from Line 3c. If negative, enter zero here		only.
and the result as a positive		_
6a Intangible expenses paid to		
each affiliated company. 6a		
Line 6a exempt from add-back. 6b	♦	◇
Check the boxes on Line 6c to identify the reasons the amount on See instructions.	Line 6b is exempt from addback. You m	ay check multiple boxes.
c Foreign company or state	A A	
No principal purpose Add-back unreasonable		
Alternative apportionment L d Subtract Line 6b from 6a. 6d		
7 Any excess of dividends		
received from each affiliated company on Line 4 over the		
interest expense addition on Line 3c. <b>7</b>		
8 Subtract Line 7 from Line 6d.		
If negative, enter zero. 8		8
Add Lines 5 and 8. <b>9</b> Enter the amount here. See instructions.		9
Step 3: Figure your subtraction modifications for	r affiliated companies	
<b>ENOTE</b> All taxpayers may complete Steps 3 and 4 if an addition	modification was figured in Step 2.	
10 Enter the amount of interest received from each affiliated		
company. 10	♦	◇
Line 5 or Line 10. <b>11</b>		11
12 Enter the amount of intangible income		
received from each	♦	
13 Enter the lesser of	V	V
Line 8 or Line 12. <b>13 14</b> Add Column D, Line 11 and Column D, Line 13		13
Enter the total here and on Page 2, Line 15.		14

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$\langle \langle \rangle$	
6	
X	



Enter your name as shown on your Illinois tax return. Enter your federal employer identification number (FEIN). Read this information first - If you attach multiple copies of Schedule 80/20 to your return, complete this page once and attach it as the last page of Schedule 80/20. Failure to do so may result in a delay in the processing of your return. Step 4: Figure your total subtraction modification 15 Enter the amount from Line 14. 15 \_\_\_\_\_ **<u>ENote</u>** If you are not an affiliated company, skip Lines 16 through 22 and complete Line 23. If you are an affiliated company, complete Lines 16 through 22 and Line 23. 16 Enter the name and FEIN of the Name \_ U.S. company that paid you interest or intangible expenses. FEIN \_\_\_\_ \_ - \_ 17 \_\_\_\_\_\_ **17** Enter the amount of interest received from the U.S. company. 18 \_\_\_\_\_ 18 Enter the amount of interest paid to you from the U.S. company's Schedule 80/20, Line 5. 19 Enter the lesser of Line 17 or Line 18. 19 \_\_\_\_\_ 20 \_\_\_\_\_ **20** Enter the intangible income received from the U.S. company. 21 \_\_\_\_\_\_ 21 Enter the amount of intangible expenses paid to you from the U.S. company's Schedule 80/20, Line 8. 22 Enter the lesser of Line 20 or Line 21. 22 \_\_\_\_\_ All taxpayers complete Line 23. 23 Total subtraction modifications.

Add Lines 15, 19, and 22. Enter the amount here. See instructions.

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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.