## Form **1045**

**Application for Tentative Refund** 

OMB No. 1545-0098

2014

Department of the Treasury Internal Revenue Service

▶ Separate instructions and additional information are available at *irs.gov/form1045*.
 ▶ Do not attach to your income tax return. Mail in a separate envelope.
 ▶ For use by individuals, estates, or trusts.

Type or print	Name(s) Shown on return									Section Section (S. Simpleyer Identification Humber					
	Number, street, and apt. or suite no. If a P.O. box, see instructions.								Spo	Spouse's social security number (SSN)					
	City, town or post office, state, and ZIP code. If a foreign address, also complete spaces below (see instructions).								. Day	Daytime phone number					
_	Foreign country name				Foreign province/county				For	Foreign postal code					
1	This application is filed to carry back:  a Net operating loss (NO) \$			DL) (Sch. A, line 25, page 2) <b>b</b> Unused general busine \$				iness c	ess credit c Net section 1256 contracts loss						
2	a For the	e calendar vear	2014, or other tax year				Ψ		ЬΓ	)ate tax	σ return w	as filed			
_	beginr	•	•	I, and end	dina			20		rato tar	Crotain V	ao moa			
3					reated by another carryback, enter year of firs					⊥ st carryback ▶					
4	If you	filed a joint r	return (or separate ret	urn) for	some,	but not all,		tax years	involve	ed in f	iguring t	he carr	yback,	list the	
5	=	years and specify whether joint (J) or separate (S) return for each ►  If SSN for carryback year is different from above, enter <b>a</b> SSN ► and <b>b</b> Year(s) ►													
6		If you changed your accounting period, give date permission to change was granted													
7	Have	Have you filed a petition in Tax Court for the year(s) to which the carryback is to be applied?													
8	Is any part of the decrease in tax due to a loss or credit resulting from a reportable transaction required to be disclosed on Form 8886, Reportable Transaction Disclosure Statement?										☐ No				
9			back an NOL or net s se of other credits du										] Yes	☐ No	
		Computation of Decrease in Tax (see instructions)			preceding tax year ended ▶			preceding tax year ended ▶			preceding tax year ended ▶				
Note: If 1a and 1c are blank, skip lines 10 through 15.			Befo	ore	After carryback		Before arryback	Aft carry		Bet	fore back	Af	ter back		
10	NOL d	eduction after ca	rryback (see instructions)												
11		ted gross inco													
12	Dedu	Deductions (see instructions)													
13	Subtr	Subtract line 12 from line 11													
14	Exem	Exemptions (see instructions)													
15	Taxab	Taxable income. Line 13 minus line 14													
16			structions and												
		· ·	on												
17		Alternative minimum tax													
18		Add lines 16 and 17													
19		General business credit (see instructions)													
20		Other credits. Identify													
21		Total credits. Add lines 19 and 20													
22 23		Subtract line 21 from line 18 Self-employment tax													
24															
25			22 through 24												
26		the amount from	•												
			n line 25 for each year												
27	Decre	ase in tax. Lir	ne 25 minus line 26												
28	Overp		k due to a claim of righ				,	, , , ,							
Sign Under penalties of perjury, I declare that I have exame and belief, they are true, correct, and complete.  Your signature  Your signature					ned this a	application and	accompa	inying schedu	lles and	stateme	ents, and to	the best Date	of my kr	nowledge	
Keep	a copy of	' Prougo's signature If Form 1045 is filed is inthy <b>both</b> must sign								Date					
this application for your records		ds.													
Paid Preparer		Print/Type prepa	Preparer	Preparer's signature Date					Check if self-employed PTIN						
	e Only	Firm's name ►							Firm's EIN ▶						
<b>,</b>		Firm's address >								Phone no					

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## **Schedule A-NOL** (see instructions)

1	Enter the amount from your 2014 Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts, enter taxable income increased by the total of the charitable deduction, income distribution deduction, and exemption amount	1	
0		•	
2	Nonbusiness capital losses before limitation. Enter as a positive number	-	
3	Nonbusiness capital gains (without regard to any section 1202 exclusion)		
4	If line 2 is more than line 3, enter the difference. Otherwise, enter -0 4		
5	If line 3 is more than line 2, enter the difference.		
	Otherwise, enter -0		
6	Nonbusiness deductions (see instructions) 6		
7	Nonbusiness income other than capital gains (see		
-	instructions)		
0			
8	Add lines 5 and 7		
9	If line 6 is more than line 8, enter the difference. Otherwise, enter -0	9	
10	If line 8 is more than line 6, enter the difference.		
	Otherwise, enter -0 But do not enter more		
	than line 5		
11	Business capital losses before limitation. Enter as a positive number 11		
12	Business capital gains (without regard to any		
	section 1202 exclusion)		
13	Add lines 10 and 12		
14	Subtract line 13 from line 11. If zero or less, enter -0		
15	Add lines 4 and 14		
	Enter the loss, if any, from line 16 of your 2014 Schedule D (Form 1040).	-	
16	(Estates and trusts, enter the loss, if any, from line 19, column (3), of		
	Schedule D (Form 1041).) Enter as a positive number. If you do not have a		
	loss on that line (and do not have a section 1202 exclusion), skip lines 16		
	through 21 and enter on line 22 the amount from line 15	_	
17	Section 1202 exclusion. Enter as a positive number	17	
18	Subtract line 17 from line 16. If zero or less, enter -0		
19	Enter the loss, if any, from line 21 of your 2014 Schedule D (Form 1040).		
	(Estates and trusts, enter the loss, if any, from line 20 of Schedule D (Form		
	1041).) Enter as a positive number		
20	If line 18 is more than line 19, enter the difference. Otherwise, enter -0 <b>20</b>		
21	If line 19 is more than line 18, enter the difference. Otherwise, enter -0	21	
22	Subtract line 20 from line 15. If zero or less, enter -0-	22	
23	Domestic production activities deduction from your 2014 Form 1040, line 35, or Form 1040NR, line		
	34 (or included on Form 1041, line 15a)	23	
24		24	
24	NOL deduction for losses from other years. Enter as a positive number	24	
25	<b>NOL.</b> Combine lines 1, 9, 17, and 21 through 24. If the result is less than zero, enter it here and on		
	page 1, line 1a. If the result is zero or more, you <b>do not</b> have an NOL	25	

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Schedule B-NOL Carryover (see instructions) Complete one column before going to the next column. Start with the earliest preceding preceding preceding carryback year. tax year ended ▶ tax year ended ▶ tax year ended ▶ 1 NOL deduction (see instructions). Enter as a positive number . . . . 2 Taxable income before 2014 NOL carryback (see instructions). Estates and trusts, increase this amount by the sum of the charitable deduction and income distribution deduction . . . 3 Net capital loss deduction (see instructions) . . . . . . . . . 4 Section 1202 exclusion. Enter as a positive number . . . . . . . . 5 Domestic production activities deduction . . . . . . . . . 6 Adjustment to adjusted gross income (see instructions) . . . . . . . Adjustment to itemized deductions (see 7 instructions) . . . . . . . . . 8 Individuals, enter deduction for exemptions (minus any amount on Form 8914, line 6, for 2006 and 2009; line 2 for 2005 and 2008). Estates and trusts, enter exemption amount . Modified taxable income. Combine lines 2 through 8. If zero or less, enter -0- . . . . . . . . . . . . . 10 NOL carryover (see instructions) . . **Adjustment to Itemized Deductions** (Individuals Only) Complete lines 11 through 38 for the carryback year(s) for which you itemized deductions only if line 3, 4, or 5 above is more than zero. 11 Adjusted gross income before 2014 NOL carryback . . . . . . . . 12 Add lines 3 through 6 above . . . 13 Modified adjusted gross income. Add lines 11 and 12 . . . . . . . . Medical expenses from Sch. A (Form 14 1040), line 4 (or as previously adjusted) Medical expenses from Sch. A (Form 15 1040), line 1 (or as previously adjusted) Multiply line 13 by percentage from 16 Sch. A (Form 1040), line 3 . . . . 17 Subtract line 16 from line 15. If zero or less, enter -0- . . . . . . . . Subtract line 17 from line 14 . . . . 18 19 Mortgage insurance premiums from Sch. A (Form 1040), line 13 (or as previously adjusted) . . . . . . 20 Refigured mortgage insurance premiums (see instructions) . . . . 21 Subtract line 20 from line 19

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Schedule B-NOL Carryover (Continued) Complete one column before going to the next column. Start with the earliest preceding preceding preceding carryback year. tax year ended ▶ tax year ended ▶ tax year ended ▶ 22 Modified adjusted gross income from line 13 on page 3 of the form . . . 23 Enter as a positive number any NOL carryback from a year before 2014 that was deducted to figure line 11 on page 3 of the form . . . . . . . . . Add lines 22 and 23 . . . . . . 24 25 Charitable contributions from Sch. A (Form 1040), line 19 (line 18 for 2004 through 2006), or Sch. A (Form 1040NR), line 5 (line 7 for 2004 through 2010), or as previously adjusted Refigured charitable contributions (see 26 instructions) . . . . . . . . . Subtract line 26 from line 25 27 28 Casualty and theft losses from Form 4684. line 18 (line 23 for 2008: line 21 for 2009; line 20 for 2005, 2006, and 2010) . . . . . . . . . . . . Casualty and theft losses from Form 29 4684, line 16 (line 21 for 2008; line 18 for 2005, 2006, and 2010; line 19 for 2009) Multiply line 22 by 10% (.10) . . . 30 Subtract line 30 from line 29. If zero or 31 less, enter -0- . . . . . . . . . 32 Subtract line 31 from line 28 33 Miscellaneous itemized deductions from Sch. A (Form 1040), line 27 (line 26 for 2004 through 2006), or Sch. A (Form 1040NR), line 13 (line 15 for 2004 through 2010), or as previously adjusted 34 Miscellaneous itemized deductions from Sch. A (Form 1040), line 24 (line 23 for 2004 through 2006), or Sch. A (Form 1040NR), line 10 (line 12 for 2004 through 2010), or as previously adjusted 35 Multiply line 22 by 2% (.02) . . . . 36 Subtract line 35 from line 34. If zero or less, enter -0- . . . . . . . . 37 Subtract line 36 from line 33 . . . 38 Complete the worksheet in the instructions if line 22 is more than the applicable amount shown in the instructions. Otherwise, combine lines 18, 21, 27, 32, and 37; enter the result here and on line 7 (page 3) . . . .