



2015 Form IL-1120 Corporation Income and Replacement Tax Return

See "When should I file?" in the Form IL-1120 instructions for a list of due dates.

Header box containing tax year information and a space for the amount being paid.

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 or this is a first return, check this box. C/O: _____ Mailing address: _____

City: _____ State: _____ ZIP: _____

C Check the applicable box if one of the following applies. [] First return [] Final return (If final, enter the date. mm dd yyyy)

D If this is a final return because you sold this business, enter the date sold (mm dd yyyy) _____, and the new owner's FEIN. _____

E Check the box if your business is a: [] Combined return (unitary) [] Foreign insurer

F If you completed the following, check the box and attach the federal form(s) to this return. [] Federal Form 8886 [] Federal Schedule M-3, Part II, Line 12

G Special Apportionment Formulas. If you use a special apportionment formula, mark the appropriate box and see Special Apportionment Formula instructions. [] Insurance companies [] Financial organizations [] Transportation companies [] Federally regulated exchanges

H Check this box if you attached Illinois Schedule UB. []

I Check this box if you attached Illinois Schedule 1299-D. []

J Check this box if you attached Form IL-4562. []

K Check this box if you attached Illinois Schedule M (for businesses). []

L Check this box if you attached Schedule 80/20. []

M Enter your federal employer identification no. (FEIN). _____

N If you are a member of a group filing a federal consolidated return, enter the FEIN of the parent. _____

O Enter your North American Industry Classification System (NAICS) Code. See instructions. _____

P Enter your corporate file (charter) number assigned to you by the Secretary of State. _____

Q Enter the city, state, and zip code where your accounting records are kept. (Use the two-letter postal abbreviation, e.g., IL, GA, etc.) City _____ State _____ Zip _____

R If you are making the business income election to treat all nonbusiness income as business income, check this box and enter "0" on Lines 24 and 32. []

S Check your method of accounting. [] Cash [] Accrual [] Other _____

T If you are making a Discharge of Indebtedness adjustment on Schedules NLD or UBNLD, or Form IL-1120, Line 36, check this box and attach federal Form 982. []

U If you are a cooperative with an Illinois net loss modification, check this box and attach a completed Schedule INL. []

V If you annualized your income on Form IL-2220, check this box and attach Form IL-2220. []

Attach your payment and Form IL-1120-V here. If you owe tax on Line 62, complete a payment voucher, Form IL-1120-V, make your check payable to "Illinois Department of Revenue" and attach them here. Enter the amount of your payment on the top of this page in the space provided. If a payment is not enclosed, mail this return to: Illinois Department of Revenue, P.O. Box 19008, Springfield, IL 62794-9008. If a payment is enclosed, mail this return to: Illinois Department of Revenue, P.O. Box 19028, Springfield, IL 62794-9028.

Step 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	_____	.00
2	Net operating loss deduction from U.S. Form 1120, Line 29a. This amount cannot be negative.	2	_____	.00
3	State, municipal, and other interest income excluded from Line 1.	3	_____	.00
4	Illinois income and replacement tax and surcharge deducted in arriving at Line 1.	4	_____	.00
5	Illinois Special Depreciation addition. Attach Form IL-4562.	5	_____	.00
6	Related-party expenses additions. Attach Schedule 80/20.	6	_____	.00
7	Distributive share of additions. Attach Schedule(s) K-1-P or K-1-T.	7	_____	.00
8	Other additions. Attach Schedule M (for businesses).	8	_____	.00
9	Add Lines 1 through 8. This amount is your income or loss.	9	_____	.00

Step 3: Figure your base income or loss

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



- 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.)
- B** If any portion of the amount on Line 23 is derived outside Illinois, check this box and complete all lines of Step 4. See instructions. (If you are a unitary filer, you must complete Lines 28 through 30.)

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	_____	.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	_____	.00
26	Add Lines 24 and 25.	26	_____	.00
27	Business income or loss. Subtract Line 26 from Line 23.	27	_____	.00
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 (carry to six decimal places).	30	_____	
31	Business income or loss apportionable to Illinois. Multiply Line 27 by Line 30.	31	_____	.00
32	Nonbusiness income or loss allocable to Illinois. Attach Schedule NB.	32	_____	.00
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	_____	.00
34	Base income or loss allocable to Illinois. Add Lines 31 through 33.	34	_____	.00

Step 5: Figure your net income



35	Base income or net loss from Step 3, Line 23, or Step 4, Line 34.	35	_____	.00
36	Discharge of Indebtedness adjustment. Attach federal Form 982. See instructions.	36	_____	.00
37	Adjusted base income or net loss. Add Lines 35 and 36. See instructions.	37	_____	.00
38	Illinois net loss deduction. Attach Schedule NLD or UB/NLD. If Line 37 is zero or a negative amount, enter "0."	38	_____	.00
39	Net income. Subtract Line 38 from Line 37.	39	_____	.00

Step 6: Figure your replacement tax after credits

40	Replacement tax. Multiply Line 39 by 2.5% (.025).	40	_____	.00
41	Recapture of investment credits. Attach Schedule 4255.	41	_____	.00
42	Replacement tax before credits. Add Lines 40 and 41.	42	_____	.00
43	Investment credits. Attach Form IL-477.	43	_____	.00
44	Replacement tax after credits. Subtract Line 43 from Line 42. If the amount is negative, enter "0."	44	_____	.00

Step 7: Figure your income tax after credits

45	Income tax. Multiply Line 39 by 5.25% (.0525).	45	_____	.00
46	Recapture of investment credits. Attach Schedule 4255.	46	_____	.00
47	Income tax before credits. Add Lines 45 and 46.	47	_____	.00
48	Income tax credits. Attach Schedule 1299-D.	48	_____	.00
49	Income tax after credits. Subtract Line 48 from Line 47. If the amount is negative, enter "0."	49	_____	.00

Step 8: Figure your refund or balance due

50	Replacement tax before reductions. Enter the amount from Line 44.	50	_____	.00
50a	Foreign Insurer replacement tax reduction. Attach Schedule INS or UB/INS. See instructions.	50a	_____	.00
50b	Subtract Line 50a from Line 50. This is your net replacement tax.	50b	_____	.00
51	Income tax before reductions. Enter the amount from Line 49.	51	_____	.00
51a	Foreign Insurer income tax reduction. Attach Schedule INS or UB/INS. See instructions.	51a	_____	.00
51b	Subtract Line 51a from Line 51. This is your net income tax.	51b	_____	.00
52	Compassionate Use of Medical Cannabis Pilot Program Act surcharge. See instructions.	52	_____	.00
53	Total net income and replacement taxes and surcharge. Add Lines 50b, 51b, and 52.	53	_____	.00
54	Underpayment of estimated tax penalty from Form IL-2220. See instructions.	54	_____	.00
55	Total tax, surcharge, and penalty. Add Lines 53 and 54.	55	_____	.00
56	Payments. See instructions.			
	a Credit from prior year overpayments.	56a	_____	.00
	b Total estimated payments.	56b	_____	.00
	c Form IL-505-B (extension) payment.	56c	_____	.00
	d Pass-through withholding payments reported to you on Schedule(s) K-1-P or K-1-T. Attach Schedule(s) K-1-P or K-1-T.	56d	_____	.00
	e Gambling withholding. Attach Form(s) W-2G.	56e	_____	.00

57	Total payments. Add Lines 56a through 56e.	57	_____	.00
58	Overpayment. If Line 57 is greater than Line 55, subtract Line 55 from Line 57.	58	_____	.00
59	Amount to be credited forward. See instructions.	59	_____	.00
60	Refund. Subtract Line 59 from Line 58. This is the amount to be refunded.	60	_____	.00

61 Complete to direct deposit your refund.

Routing Number	<input type="text"/>	<input type="checkbox"/> Checking or	<input type="checkbox"/> Savings
Account Number	<input type="text"/>		

62	Tax due. If Line 55 is greater than Line 57, subtract Line 57 from Line 55. This is the amount you owe.	62	_____	.00
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Step 9: Sign here

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 of authorized officer _____ Date _____ Title _____ (_____) Phone _____

Signature of paid preparer _____ Date _____ Paid preparer's Social Security number or firm's FEIN _____

Paid preparer's firm name _____ Address _____ (_____) Phone _____

Check this box if the Department may discuss this return with the paid preparer shown in this step. <input type="checkbox"/>
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- **Attach supporting documents** to your Form IL-1120.
- Failure to attach the required documents may result in the disallowance of the corresponding line item.

If you completed:



Form IL-1120	→	U.S. 1120, Pages 1 through 5, or equivalent.
Step 1, Line E (unitary) only	→	Schedule UB
Step 1, Line E (foreign insurer) only	→	Schedule INS
Step 1, Line E (unitary) and (foreign insurer)	→	Schedule UB and Schedule UB/INS
Lines 5 and 18	→	Form IL-4562
<ul style="list-style-type: none"> ● Special Depreciation addition ● Special Depreciation subtraction 		
Lines 6 and 19	→	Schedule 80/20
<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
<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 subtractions ● 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, Step 1, Line T.
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. Note → Check the box on Form IL-1120, Step 1, Line I.
Lines 50a and 51a Foreign Insurer tax reduction	→	Schedule INS or Schedule UB/INS (for unitary filers)
Line 54 Underpayment of estimated tax penalty	→	Form IL-2220 Note → If you annualized your income on Form IL-2220, Step 6, check the box on Form IL-1120, Step 1, Line V.
Line 56d Pass-through withholding payments reported to you	→	All Schedules K-1-P and K-1-T you received showing a pass-through withholding payment
Line 56e Gambling withholding	→	All copies of Form W-2G

