Form IT-20X State Form 438

State of Indiana Amended Corporation Income Tax Return For Calendar Year Ending

13 / 8-17)	For Calener r Tax Year Beginning	dar Year Ending and Endin]		
Name of Corporation	Tax real beginning	and Endin	9	Federal Identif	ication Number	
Number and Street		County		Indiana Taxpayer Identification Number		
City or Post Office	S	tate	ZIP Code	Corporate Tele	orate Telephone Number	
b. Is the corporation curredIndiana Department ofIf yes, indicate yearsc. Is this the first amende	return being filed?	f. List year of limitat		s of federal value of the waivers ination by the		
	in state of ate form for the year amended and federal s				ungo in Part IV	
Note: Do not calculate income tax for years be	e gross income tax or supplemental net peyond the repeal date of Jan. 1, 2003.	A As Reported or Last Determined	B Amount of Ch	ange	C Correct Amount Round all entries	
Part I - Summary of Tax	e minus sign for negative amounts			1	0	
	e (see instructions)			2	C	
, ,	e tax - multiply line 2 by the applicable rate			3	0	
	of line 1 or 3 from line 2 and enter difference			4	C	
-	ome tax - multiply line 4 by the applicable rate			5		
	ater of line 1 or 3, plus line 5			6	(
7. Sales/use and other to	axes			7	C	
8. Total tax due - add line	es 6 and 7			8	(
Part II - Credits and Pay	ments					
9. Amount of estimated t	tax paid (including extension payment)			9	(
10. Gross income tax paid	on real estate sales (attach additional receipts)			10	(
11. College and University	y Credit (attach schedule if corrected)			11	(
12. Other credits (attach e	explanation if changed from original claim)			12	(
13. Amount previously pa	id with the original return			13	С	
14. Amount paid on prior	amended return			14	C	
15. Amount paid for audit	adjustment			15	C	
	s 9 through 15			16	(
17 Amount previously re	funded (include amounts credited to IT-6 estin	nated account)		17		
					(
Amount of all penalty and interest previously paid					(
	e or Refund (see instructions)			19		
	is greater than line 19, enter the difference)			20		
•	20 or \$5, whichever is greater)				(
- ·	ons)				(
,	- add lines 20, 21, and 22					
	line 19 is greater than line 8, enter the differer					
26. Amount of line 24 to b	be refundedbe applied to the current estimated income tax		nding:	26	0	
Under penalties of perjury, I de	diana Department of Revenue. clare that I have examined this return, including accrite the Department to discuss my return with my			the best of my	r knowledge and belief it is	
ignature of Officer	Date	Paid Preparer: F	Firm's Name (or yours	if self-employe	d)	
Print or Type Name of Officer	Title	PTIN				
Personal Representative's Na	ame (Print or Type)	Telephone Numb	oer			
elephone Number		Address				
Address		City				
City		State		ZIP Cod	le + 4	
•	710.0 1 1 1					
State	ZIP Code + 4	Paid Preparer's S	Signature		Date	



Instructions for Indiana Amended Corporation Income Tax Return Form IT-20X

Who Should File Form IT-20X

This form should be filed by a corporation amending a previously filed Indiana Corporation Income Tax Return. To amend a previously filed Form IT-65, IT-20S, FIT-20, IT-20NP, or URT-1, a corrected copy of the original form must be filed with the amended check box marked at the top of the form.

If this form is being filed as a result of a Federal Revenue Agent's Report (RAR), the change must be documented by attaching copies of the RAR and the appropriate federal forms within 120 days of such change. If an audit has been conducted, copies of the audit report should also be enclosed. Payment of any balance due, plus interest, must accompany the amended return.

Indiana Code (IC) 6-3-4-6 requires taxpayers to notify the department within **180 days** of any modification made to a federal income tax return.

Under IC 6-8.1-9-1, a taxpayer has 180 days from the date of modification by the Internal Revenue Service to file a claim for refund with the department. Any overpayment resulting from modification of federal income tax liability must be claimed within the latter of 3 years from the due date of the return, 3 years from the date of payment, or within 180 days of notification of change by the Internal Revenue Service.

Copies of all federal waivers that apply to your amended return must be enclosed. An agreement with the department to extend the statute of limitations for assessment also extends the period for filing a claim for refund.

Completing the Form

Taxpayers should refer to the instructions for the corporation income tax return, and related schedules, of the tax year being amended. You can get copies of certain prior-year returns by contacting the department or by visiting www.in.gov/dor/taxforms.

Place your 9-digit federal ID number in the box in the upper-right corner of the form. Next, enter your assigned Indiana **taxpayer identification number.** Complete all other applicable questions.

Corporations must attach a corrected (amended) copy of the original Form IT-20, including corrected supporting forms/schedules, to support this claim. Part I - Summary of Tax Calculations

Complete lines 1 through 8 of columns A, B, and C. Use the original IT-20 Fiscal return format computation if amending for a 2002/2003 fiscal year. Attach the revised return calculation. If the amounts reflected in column A are the result of an Indiana audit, please attach audit schedule. Any changes reflected in column B must be documented.

If filing because of an IRC Section 172 deduction, effective Jan. 1, 2004, the loss derived from Indiana must be calculated by applying the modifications, in effect for the year in which the loss was incurred, used in arriving at Indiana adjusted gross income. The resulting Indiana net operating loss (NOL), adjusted for any federal Section 172 modifications, may be claimed toward reducing, before any other state deductions, Indiana adjusted gross income. Use Schedule IT-20NOL (revised 8-09 and after) to determine the available amount you may deduct.

A preexisting NOL must also be recalculated using this methodology to apply any remaining loss as a deduction for tax years ending after Dec. 31, 2003. All NOLs incurred after this date, whether carried back or forward, must be calculated using the revised IT-20NOL schedule.

The available Indiana NOL is subject to the same carryover provisions as required by the Internal Revenue Code, as adopted and in effect on Jan. 1 of the taxable year. **Note:** The NOL carryback is no longer available.

Part II - Credits and Payments

If a change is indicated in column B, lines 9 through 15, provide a complete explanation in Part IV and attach any schedules, statements, or canceled checks that support such change. Note that a change of adjusted gross income tax (column C, line 3) may affect the amount of allowable College Credit on line 11 and other credits on line 12. Generally, the total credit entered on lines 11 and 12 cannot exceed the amount of tax entered on line 3 of column C.

Line 17 - "Previously Refunded" includes overpayments previously requested to be carried forward to other tax periods. Once the overpayment amount has been carried forward it cannot be reversed.

Part III - Remittance Due or Refund

Remittance Due:

Line 20 - If line 8 is greater than line 19, enter the difference as the balance due on line 20.

Line 21 - If an amended return is submitted after the due date of the original return, including valid extensions, penalty must be entered on line 21. The penalty is 10% of the balance due or \$5, whichever is greater. A late penalty of \$10 per day may apply to zero tax liability returns delinquently filed.

Line 22 - Indiana law does not provide for the waiver of interest. **Interest must be computed on the balance due.** Use the interest rate table below to properly compute the amount of interest for line 22.

Line 23 - Add balance due, penalty, and interest to equal the total remittance due. Pay this amount.

Refund Due:

Line 24 - If line 19 is greater than line 8, subtract line 8 from line 19 and enter the overpayment.

Line 25 - Enter the portion of the overpayment from line 24 to be refunded.

If an excess tax payment is not refunded or credited against a current or future tax liability within 90 days after the date the refund claim is filed, the date the tax was due, or the date the tax was paid, whichever is latest, the excess tax payment accrues interest from the date the tax was due, the date the tax was paid, the date the return was actually filed, or July 1, 2015, whichever is latest. The statute of limitations for refund claims is 3 years from the due date of the return or 3 years from the date the overpayment occurred, whichever is later. Extensions of time to file extend the due date of the return. Quarterly payments are considered to be made on the due date of the return filed for a taxable period.

Line 26 - Enter that portion of line 24 to be applied to your current estimated tax account and the year to which the overpayment is to be applied. The total of lines 25 and 26 must equal the amount shown on line 24.

Note: If your overpayment is reduced due to an error on the tax return or an adjustment by the department, the amount to be refunded (line 25) will be corrected before any changes are made to the amount on line 26.

Table of Interest Rates Charged Per Annum:

1/1/93 to 1	2/31/947%	1/1/09 to	12/31/09	. 7%
1/1/95 to 1	2/31/956%	1/1/10 to	12/31/10	. 7%
1/1/96 to12	2/31/007%	1/1/11 to	12/31/11	.9%
1/1/01 to 1	2/31/028%	1/1/12 to	12/31/12	. 4%
1/1/03 to 1	2/31/036%	1/1/13 to	12/31/13	. 3%
1/1/04 to 1	2/31/04 4%	1/1/14 to	12/31/14	. 3%
1/1/05 to 1	2/31/05 3%	1/1/15 to	12/31/15	. 3%
1/1/06 to 1	2/31/06 4%	1/1/16 to	12/31/16	. 2%
1/1/07 to 1	2/31/08 5%	1/1/17 to	12-31/17	. 3%

Interest rates on assessments are determined annually on Nov. 1 for each upcoming year. For further information, call (317) 232-0129, visit www.in.gov/dor, or write to:

Indiana Department of Revenue

Tax Administration

100 N. Senate Ave.

Indianapolis, IN 46204-2253

Be sure to sign, date, and print your name on the return. If a paid preparer completes your return, you can authorize the department to discuss your tax return with the preparer by checking the authorization box above the signature line. The department may contact you if there are any questions or concerns about your tax return. If you want the department to be able to discuss your tax return with someone else (e.g., the person who prepared it or a designated person), please complete the personal representative information area in full.

If you owe tax, please mail your return to Indiana Department of Revenue, P.O. Box 7087, Indianapolis, IN 46207-7087. If you do **not** owe any tax, mail it to Indiana Department of Revenue, P.O. Box 7231, Indianapolis, IN 46207-7231.

Part IV - Please enclose a concise explanation of change(s) along with the corrected schedules and any other documentation.

Note: If the corporation is undergoing a bankruptcy proceeding, mail an amended return to: Indiana Department of Revenue, Bankruptcy Section MS108, 100 N Senate Ave., Indianapolis, IN 46204-2253. The telephone number is (317) 232-2289.

