



## Illinois Department of Revenue Schedule INL

Attach to your Form IL-1120.

## Illinois Net Loss Adjustments for Cooperatives and REMIC Owners

Year ending

Month Year
IL Attachment No. 20

| Sto | ep 1: Provide the following information  |                         |                   |   |                   |  |  |  |  |
|-----|--|-------------------------|-------------------|---|-------------------|--|--|--|--|
| -   | A<br>Enter your name as shown on your Form IL-1120.  | <b>B</b><br>Enter you   | B                 |   |                   |  |  |  |  |
| (   | C Check the box indicating the reason for completing Schedule INL.   | Cooperative Adjus       | , .               | (Complete Steps 2 and 3 only.)<br>(Complete Step 4 only.) |                   |  |  |  |  |
| St( | ep 2: Make your election (Cooperatives only)   |                         |                   |   |                   |  |  |  |  |
| 1   | Mark this box if this is the <b>first year</b> for which you are filing Sche   | edule INL.              |                   |   |                   |  |  |  |  |
|     | <u>=Note</u> If you marked the box in Line 1, complete the following s   | tatement by checkir     | ng the appropriat | te box  | 1a or 1b.         |  |  |  |  |
|     | I elect to compute Illinois net income for all taxable years:  |                         |                   |   |                   |  |  |  |  |
|     | <b>a</b> allowing patronage losses to offset nonpatronage income. If you check this box, do not complete Step 3 on this form or complete.                              | ete this form in subseq | uuent years.      |   |                   |  |  |  |  |
|     | <b>b</b> without allowing patronage losses to offset nonpatronage inc  | ome.                    |                   |   |                   |  |  |  |  |
| 2   | 2 Mark this box if you elected to offset nonpatronage loss against p<br>for this tax year.   | atronage income for     | federal purposes  | S   |                   |  |  |  |  |
| St  | ep 3: Figure your Illinois income or loss (Coop  | eratives only)          | A<br>Patronage    |   | B<br>Nonpatronage |  |  |  |  |
| 3   | Federal taxable income. (Federal Form 1120-C, Schedule G, Line 10, of Form 8817, Line 29.)   |                         |                   |   | •00               |  |  |  |  |
| 4   | Addition modifications   | 4a _                    | •00               | 4b _  | •00               |  |  |  |  |
| 5   | Subtraction modifications  | 5a _                    | •00               | 5b _  | •00               |  |  |  |  |
| 6   | Base income. Add Lines 3 through 5.  | 6a _                    | •00               | 6b  | •00               |  |  |  |  |
| 7   | Nonbusiness income or loss   | 7a _                    | •00               | 7b _  | •00               |  |  |  |  |
| 8   | Business income or loss from non-unitary partnerships, partnerships in Schedule UB, S corporations, trusts, or estates.  |                         | •00               | 8b _  | •00               |  |  |  |  |
| 9   | Add Lines 7 and 8.   | 9a _                    | •00               | 9b _  | •00               |  |  |  |  |
| 0   | Business income or loss. Subtract Line 9 from Line 6.  | 10a _                   | •00               | 10b   | •00               |  |  |  |  |
| 1   | Apportionment factor from Form IL-1120, Line 30  | 11a _                   | •                 | 11b   |                   |  |  |  |  |
| 2   | Business income or loss apportioned to Illinois. Multiply Line 10 by Line  | e 11. <b>12a</b> _      | •00               | 12b   | •00               |  |  |  |  |
| 3   | Nonbusiness income or loss allocated to Illinois from Form IL-1120, Lin  | ne 32. <b>13a</b> _     | •00               | 13b   | •00               |  |  |  |  |
| 4   | Business income or loss apportionable to Illinois from non-unitary part partnerships included on a Schedule UB, S corporations, trusts, or est. Form IL-1120, Line 33. | ates from               | •00               | 14b   | •00               |  |  |  |  |
| 5   | Base income or loss allocable to Illinois. Add Lines 12 through 14.  |                         |                   |   | •00               |  |  |  |  |
|     | Discharge of Indebtedness adjustment. See instructions.  |                         |                   |   | •00               |  |  |  |  |
|     | Adjusted base income or net loss. Add Lines 15 and 16. See instruction   |                         |                   |   | •00               |  |  |  |  |
|     | Illinois net loss deduction  |                         |                   |   | •00               |  |  |  |  |
|     | Net income or loss. Subtract Line 18 from Line 17.   |                         |                   |   | •00               |  |  |  |  |
| 20  | Combined net income or loss. See instructions.   |                         |                   |   | •00               |  |  |  |  |



## Step 4: Figure your Illinois income or loss (REMIC residual interest owners only.)

| 1  | Enter your base income or net loss from Form IL-1120, Line 35.  |      | 1   | •00        |
|----|---|------|-----|------------|
| 2  | Enter your recomputed federal taxable income. See instructions.   | 2    | •00 |            |
| 3  | Total addition modifications. (Form IL-1120, Lines 2 through 8.)  | 3    | •00 |            |
| 4  | Total subtraction modifications entered as a negative number. (Form IL-1120, Line 22.)  | 4    | •00 |            |
| 5  | Base income. Add Lines 2 through 4.   | 5    | •00 |            |
| 6  | Nonbusiness income or loss. (Form IL-1120, Line 24.)  | 6    | •00 |            |
| 7  | Business income or loss from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates. (Form IL-1120, Line 25.)                             | 7    | •00 |            |
| 8  | Add Lines 6 and 7.  | 8    | •00 |            |
| 9  | Business income or loss. Subtract Line 8 from Line 5.   | 9    | •00 |            |
| 10 | Apportionment factor from Form IL-1120, Line 30   | 10•_ |     |            |
| 11 | Business income or loss apportioned to Illinois. Multiply Line 9 by Line 10.  | 11   | •00 |            |
| 12 | Nonbusiness income or loss allocated to Illinois from Form IL-1120, Line 32.  | 12   | •00 |            |
| 13 | Business income or loss apportionable to Illinois from non-unitary partnerships, partnerships included on a Schedule UB, S corporations, trusts, or estates from Form IL-1120, Line 33. | 13   | •00 |            |
| 14 | Recomputed base income or net loss allocable to Illinois. Add Lines 11 through 13.  |      | 14  | •00        |
| 15 | Subtract Line 1 from Line 14. See instructions.  If the result is positive or zero, stop here. Do not complete the rest of this form.   |      | 15  | •00        |
| 16 | Enter any discharge of indebtedness amount from Form IL-1120, Line 36.  |      | 16  | <u>•00</u> |
| 17 | If Line 1 is  |      |     |            |
|    | <b>negative or zero</b> , add Lines 1 and 16, and enter the total here. <b>positive</b> , enter zero here.  |      | 17  | •00        |
| 18 | Add Lines 15 and 17. If the result is <b>negative</b> , this is the amount you may use as an NLD carryforward in subsequent tax years.  |      | 18  | •00        |