

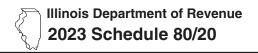


Year ending

Month Year

IL Attachment No. 14

	V V / Macon to yo	u o	111112 1120, 12 1120 01	,	, 0. 12 10 11.			12 / 1110	
_									
	er your name as shown on you					Enter your f	ederal employe	r identification nu	mber (FEIN).
St	ep 1: Identify your	affil	iated companies		В		С	D.	- Totals
1	Enter the name of each		^		_				Totals
	affiliated company.	1		_<>		<>			
2	Enter the FEIN for each								
_	affiliated company.			_					
2a	Check if this is a newly add		ions \square						
_	affiliated company. See ins	struct	ions. \square						
St	ep 2: Figure your a	ddi	tion modification	S =Note	∃ All taxpaye	ers may com	plete this s	ection.	
	Amount of interest paid to					-	•	If va	ou have more
	each affiliated company.	3a		_<>					
b	Interest exempt from			^		^		to re	port than space
	the amount on Line 3a.							and a	ided, complete attach additional
C	Subtract Line 3b from 3a.	3c							nedules 80/20.
4	Amount of dividends								ort the totals in
	received from each	4		^		^		colur	mn D of the last
5	affiliated company.			_<>				\diamondsuit addi	tional Schedule only.
Э	Subtract Line 4 from Line 3 If negative, enter zero here								Of fry.
	and the result as a positive	ż							
	amount on Line 7.	5						5	
6a	Intangible expenses paid t	0							
	each affiliated company.			_<>		<			
b	Intangible expenses amou Line 6a exempt from add-back	nt on		^		^		^	
0.	Line 6a exempt from add-back	6b		_<>		—.⊹ —	Liller I W		11. 1. 1.
	eck the boxes on Line 6c e instructions.	to ide	entity the reasons the	amount	on Line 60 is ex	cempt from ac	daback. You	may cneck mu	itipie boxes.
C		te							
Ū	No principal purpose								
	Add-back unreasonable								
	Alternative apportionme				Ш				
_	Subtract Line 6b from 6a.	6d							
7	Any excess of dividends								
	received from each affiliate								
	company on Line 4 over the interest expense addition of								
	Line 3c.	7 .							
8	Subtract Line 7 from Line								
	If negative, enter zero.	8						8	
9	Total addition modificati	ons							
	Add Lines 5 and 8.	9 .						9	
	Enter the amount here. Se								
	<u>ep 3</u> : Figure your s								
	lote→ All taxpayers may o		lete Steps 3 and 4 if a	n additio	n modification	was figured i	n Step 2.		
10	Enter the amount of intere								
	received from each affiliate	eu 1∩		\Diamond		\Diamond		\Diamond	
11	company. Enter the lesser of	10		_					
• • •	Line 5 or Line 10.	11						11	
12	Enter the amount of								
	intangible income								
	received from each			^		^		, [
۔ د	affiliated company.	12		_⊹				♦ □	
13	Enter the lesser of	40						40	
1/	Line 8 or Line 12. Add Column D, Line 11 an		umn D. Line 13					13	
14	Enter the total here and							14	
		•	.g,u .u.						





Ent	er your name as shown on your Illinois tax return.	Ente	Enter your federal employer identification number (FEIN).				
		attach multiple copies of Schedule 80/20 to yo do so may result in a delay in the processing o		ıd attach it			
St	ep 4: Figure your total subtrac	tion modification					
15	Enter the amount from Line 14.	15					
<u>=</u> N	ote → If you are not an affiliated company	, skip Lines 16 through 22 and complete Line 2	23.				
	If you are an affiliated company, con	mplete Lines 16 through 22 and Line 23.					
16	Enter the name and FEIN of the U.S. company that paid you interest or intangible expenses.	Name					
17	Enter the amount of interest received from	the U.S. company.	17	<			
18	Enter the amount of interest paid to you fro	m the U.S. company's Schedule 80/20, Line 5	. 18	<			
19	Enter the lesser of Line 17 or Line 18.		19				
20	Enter the intangible income received from	20	<				
21	Enter the amount of intangible expenses pa	30/20, Line 8. 21	<				
22	Enter the lesser of Line 20 or Line 21.		22				
AI	I taxpayers complete Line 23.						
23	Total subtraction modifications. Add Lines 15, 19, and 22. Enter the amount here. See instructions.		23				

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.