



Illinois Department of Revenue 2004 Form IL-1023-C

Composite Income and Replacement Tax Return

or fiscal year beginning ____/____/____, 2004, ending ____/____/____, 20____.

Due on or before the 15th day of the 4th month following the close of the tax year.

Do not write above this line.

Name of partnership or S corporation _____

_____-____-____ Federal employer identification number (FEIN) **6 6 6**
Seq. code

In care of _____

_____-____-____ Illinois business tax (IBT) number

Mailing address _____

Check all that apply.

Name or address change First return Final return

City _____ State _____ ZIP _____

Partners or shareholders included are (check only one):

Check the return you filed Form IL-1065 Form IL-1120-ST

Trusts/individuals/estates Individuals/estates only

Part 1 — Figure the composite income and income tax

- 1 a Write the amount of modified base income of the partnership or S corporation. **1a** _____ | _____
- b Write the total percentage of ownership for resident members in this composite return. (**Stop** - see instructions.) **1b** _____ %
- c Multiply Line 1a by Line 1b. Write the result here. **1c** _____ | _____
- 2 a Write the amount of modified base income allocable to Illinois. **2a** _____ | _____
- b Write the total percentage of ownership for nonresident members in this composite return. **2b** _____ %
- c Multiply Line 2a by Line 2b. Write the result here. **2c** _____ | _____
- 3 Add Lines 1c and 2c. This is the composite income. **3** _____ | _____
- 4 Total income tax. Multiply Line 3 by 3% (.03). Write the total here and on Part 3, Line 7. **4** _____ | _____

Part 2 — Figure the replacement tax (Complete only if this return includes any trust members.)

- 5 Write the amount of composite income included in Part 1, Line 3, that is subject to replacement tax. **5** _____ | _____
- 6 Total replacement tax. Multiply Line 5 by 1.5% (.015). Write the result here and on Part 3, Line 8. **6** _____ | _____

Part 3 — Figure the total tax

- 7 Write the total income tax amount from Part 1, Line 4. **7** _____ | _____
- 8 Write the total replacement tax amount from Part 2, Line 6. **8** _____ | _____
- 9 Add Lines 7 and 8. This is the total amount of income and replacement tax. **9** _____ | _____
- 10 Write the total amount prepaid on Form IL-1023-CES, plus any credit from your 2003 IL-1023-C. **10** _____ | _____
- 11 Overpayment. If Line 10 is greater than Line 9, subtract Line 9 from Line 10. If not, go to Line 13. **11** _____ | _____
- 12 Write the amount of overpayment you want credited to your 2005 composite tax. **12** _____ | _____
- 13 Tax due. If Line 9 is greater than Line 10, subtract Line 10 from Line 9. This is your balance of tax due. **13** _____ | _____

****Make your check or money order payable to "Illinois Department of Revenue"****

Part 4 — Sign below

Do not write in this box.

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 and that each of the qualifying partners or shareholders is aware of, and complies with, the rules and regulations set forth and made binding by this composite return.

Signature of authorized agent _____ /_____/____ Date _____

(_____) _____ Phone _____

Signature of preparer _____ /_____/____ Date _____

Preparer's SSN, FEIN, or PTIN _____

Check if self-employed →

Preparer firm's name (or preparer if self-employed) _____

Address (firm's or preparer's if self-employed) _____

(_____) _____ Phone _____

➤ **Mail this return to: Illinois Department of Revenue, P.O. Box 19009, Springfield, IL 62794-9009** ◀

FI NS XX ME DR _____ AL _____ CR ID _____

