



Illinois Department of Revenue

2004 Form IL-1120-ST

Small Business Corporation

Replacement Tax Return

or fiscal year beginning ___/___/___, 2004, ending ___/___/___, 20___

Due on or before the 15th day of the 3rd month following the close of the tax year.

Do not write above this line.

Type Name
or C/O
print Mailing address
City State ZIP
Check the box if your name or address has changed.

Federal employer identification number (FEIN)
Illinois business tax (IBT) number
Check this box if you are unitary and write the FEIN of the Sch. UB filer
Check the box if this is your: First return
Final return, complete the questions at the end.

Part I - Base income or loss Complete Part IA before completing Part I

1 Write your unmodified base income or loss from Part IA, Line 5.
2 Additions (See specific instructions for Part I.)
2a State, municipal, and other interest income excluded in arriving at Line 1 above
2b Illinois replacement tax deducted in arriving at Line 1 above
2c Other additions (Specify:)
2d The share of loss distributable to a shareholder subject to Illinois replacement tax
3 Add Lines 2a through 2d. This is the total of your additions.
4 Add Lines 1 and 3. This is your total income.
5 Subtractions (See specific instructions for Part I.)
5a Interest income from U.S. Treasury and other exempt federal obligations
5b Enterprise zone subtractions from Schedule 1299-A (See instructions.)
5c The share of income distributable to a shareholder subject to Illinois replacement tax
5d Expenses incurred in producing certain federally tax-exempt income (See instructions.)
5e Other subtractions (Specify:)
6 Add Lines 5a through 5e. This is the total of your subtractions.
7 Subtract Line 6 from Line 4. This is your base income or loss.
If your base income or loss is derived solely inside Illinois, write this amount on Part II, Line 1a.
If any portion of your base income or loss is derived outside Illinois, write this amount on Part III, Line 1.

Part II - Net income or loss and replacement tax

1 a Write your base income or loss from Part III, Line 9, if applicable; otherwise, from Part I, Line 7.
b Illinois net loss deduction (NLD). (Attach Schedule NLD, see instructions.)
c Subtract Line 1b from Line 1a (cannot be less than zero). This is your income after NLD.
2 a Multiply Line 1c by 1.5% (.015). This is your replacement tax.
b Recapture of investment credits from Schedule 4255. (See instructions.)
3 Add Lines 2a and 2b. This is the total of your replacement tax before investment credits.
4 Investment credits from Form IL-477 (Attach Form IL-477, see instructions.)
5 Subtract Line 4 from Line 3 (cannot be less than zero). This is your net replacement tax.
6 Tax paid with Form IL-505-B. Include any 2003 overpayment credited to 2004 tax.
7 Overpayment. Subtract Line 5 from Line 6.
a Write the amount of overpayment to be credited to 2005.
8 Tax due. Subtract Line 6 from Line 5. This is your balance of tax due (see instructions). Pay in full if \$1 or more.

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.

Do not write in this box.

Sign here

Signature of authorized officer / / Date () Phone

Signature of preparer / / Date Preparer's SSN, FEIN, or PTIN

Preparer firm's name (or yours, if self-employed) Address () Phone

Check if self-employed ->

Mail this return to: Illinois Department of Revenue, P.O. Box 19032, Springfield, IL 62794-9032

Part IA — Ordinary income adjustments — (See instructions.)

- | | | | | |
|----------|--|-----------|----------|---------------|
| 1 | Write your ordinary income or loss from U.S. Form 1120S, Schedule K, Line 1. | | 1 | _____ _____ |
| 2 | Write the appropriate amounts from U.S. Form 1120S, Schedule K. | | | |
| | a Net income or loss from rental real estate activities from Line 2 | 2a | | _____ _____ |
| | b Net income or loss from other rental activities from Line 3c | 2b | | _____ _____ |
| | c Portfolio income or loss from Lines 4 through 8c | 2c | | _____ _____ |
| | d Net gain or loss from sale or exchange of property used in trade or business and certain involuntary conversions under IRC, Section 1231, from Line 9 | 2d | | _____ _____ |
| | e Other income from Line 10 | 2e | | _____ _____ |
| | f Any other items of income or loss that were not included in the computation of ordinary income or loss on U.S. Form 1120S, Page 1
Identify: _____ | 2f | | _____ _____ |
| 2 | Total. Add Lines 2a through 2f. | | 2 | _____ _____ |
| 3 | Add Lines 1 and 2. | | 3 | _____ _____ |
| 4 | Write the appropriate amounts from U.S. Form 1120S, Schedule K. | | | |
| | a Charitable contributions from Line 12a | 4a | | _____ _____ |
| | b Expense deduction under IRC, Section 179, from Line 11 | 4b | | _____ _____ |
| | c Oil and gas depletion (See instructions.) | 4c | | _____ _____ |
| | d Interest on investment indebtedness from Line 12c | 4d | | _____ _____ |
| | e Any other items of expense that were not deducted in the computation of ordinary income or loss on U.S. Form 1120S, Page 1
Identify: _____ | 4e | | _____ _____ |
| 4 | Total. Add Lines 4a through 4e. | | 4 | _____ _____ |
| 5 | Subtract Line 4 from Line 3. This is your unmodified base income or loss. Write here and on Part I, Line 1. | | 5 | _____ _____ |

Part III — Base income or loss allocable to Illinois

Complete Part III only if any portion of your base income or loss is derived outside Illinois.

- | | | | | |
|----------|--|-----------|----------|---------------|
| 1 | Write your base income or loss from Part I, Line 7 | | 1 | _____ _____ |
| 2 | a Nonbusiness income or loss included in Part III, Line 1 (Attach Schedule NB.)
If you are making the business income election, check this box and write zero here and on Part III, Line 7. (See instructions.) → <input type="checkbox"/> | 2a | | _____ _____ |
| | b Business income or loss from non-unitary partnerships, trusts, and estates included in Part III, Line 1. (See instructions.) | 2b | | _____ _____ |
| 3 | Add Lines 2a and 2b. This is the total of your subtractions. | | 3 | _____ _____ |
| 4 | Subtract Line 3 from Line 1. This is your business income or loss. | | 4 | _____ _____ |
| 5 | Business income apportionment formula (Financial organizations and transportation companies: check the appropriate box and see Special Apportionment Formulas instructions.) <input type="checkbox"/> F <input type="checkbox"/> T | | | |
| | a Total sales everywhere | 5a | | _____ _____ |
| | b Total sales within Illinois | 5b | | _____ _____ |
| | c Divide Line 5b by Line 5a. (Carry to six decimal places.)
This is your apportionment factor. | 5c | | _____ _____ |
| 6 | Multiply Line 4 by Line 5c. This is your business income or loss apportionable to Illinois. | | 6 | _____ _____ |
| 7 | Nonbusiness income or loss allocable to Illinois (Attach Sch. NB.) If you checked the box on Line 2a, write zero here. | | 7 | _____ _____ |
| 8 | Business income or loss apportionable to Illinois from non-unitary partnerships, trusts, and estates (See instr.) | | 8 | _____ _____ |
| 9 | Add Lines 6 through 8. This is your base income or net loss allocable to Illinois. Write here and on Part II, Line 1a. | | 9 | _____ _____ |

- 1** Check the method of accounting used in preparing this return: Cash Accrual Other (Specify: _____)

If you discontinued or sold your business, please complete the following.

- 2** If you discontinued your business, write the date: _____ / _____ / _____
- 3** If you sold your business, write the date: _____ / _____ / _____
- 4** Tell us the new owner's name: _____
- 5** Tell us the new owner's address: _____
- 6** Tell us the former owner's forwarding address: _____





Schedule B Partners' or Shareholders' Identification

Attach to your Form IL-1065 or Form IL-1120-ST.

Year ending

_____/_____
Month Year

Write your name as shown on your Form IL-1065 or Form IL-1120-ST.

Write your federal employer identification number (FEIN).
_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-

Identify your partners or shareholders

A	B	C	D
Name	Address	Social Security number or FEIN	Share of income or loss(%)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			



Schedule NB Nonbusiness Income

Attach to your Form IL-1120, IL-1120-ST, or IL-1065.

Year ending

Month Year

Write your name as shown on your Form IL-1120, IL-1120-ST, or IL-1065.

Write your federal employer identification no. (FEIN)

Read the instructions before completing this form.

	Column A Total everywhere	Column B Allocable to Illinois
1 Interest*	1 _____	_____
2 Dividends*	2 _____	_____
3 Rental income	3 _____	_____
4 Patent royalties	4 _____	_____
5 Copyright royalties	5 _____	_____
6 Other royalty income	6 _____	_____
7 Capital gain (loss) from real property	7 _____	_____
8 Capital gain (loss) from tangible personal property	8 _____	_____
9 Capital gain (loss) from intangible personal property	9 _____	_____
10 Other (specify) _____	10 _____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
11 Recaptured business expense (See instructions.) <u>Note</u> → You must complete the Apportionment Factor Worksheet below to get the correct figure for Column B.	11 _____	_____
12 Totals. Add Lines 1 through 11 for each column.	12 _____ Write this total on Part III, Line 2a.	_____ Write this total on Part III, Line 7.

Apportionment Factor Worksheet (See instructions)

a Write your apportionment factor from two years ago(if applicable). a _____

b Write your apportionment factor from last year's tax return. b _____

c Write your apportionment factor from this year's tax return. c _____

d Add Lines a, b, and c. d _____

e If you have an amount on Line a, divide Line d by 3.
If you do not have an amount on Line a, divide Line d by 2. e _____

f Write the greater of Line c or Line e.
This is your apportionment factor. f _____

g Multiply Column A, Line 11 by Line f, and write the result here and in Column B, Line 11. g _____

* Interest and dividends are allocable to Illinois if your commercial domicile was in Illinois at the time the interest or dividend was paid or accrued.