

FORM 1120-C	U.S. Corporate Income Tax Return For calendar year or tax year beginning and ending Beginning: Ending:	OMB No. Tax Year
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CORPORATE INFORMATION		
Name of Corporation	Employer Identification Number (EIN)	Date of Incorporation
Number, Street, and Room or Suite No.	Total Assets (see instructions)	State of Incorporation
City or Town, State, and ZIP Code	<input type="checkbox"/> Initial Return <input type="checkbox"/> Final Return <input type="checkbox"/> Address Change <input type="checkbox"/> Amended Return	

INCOME		
1	Gross receipts or sales (less returns and allowances)	
2	Cost of goods sold	
3	Gross profit (Subtract line 2 from line 1)	
4	Dividends and inclusions	
5	Interest	
6	Gross rents	
7	Gross royalties	
8	Capital gain net income	
9	Net gain or (loss) from Form 4797	
10	Other income (attach schedule)	
11	Total income (Add lines 3 through 10)	

DEDUCTIONS		
12	Compensation of officers	
13	Salaries and wages (less employment credits)	
14	Repairs and maintenance	
15	Bad debts	
16	Rents	
17	Taxes and licenses	
18	Interest expense	
19	Charitable contributions	
20	Depreciation (attach Form 4562)	
21	Advertising	
22	Employee benefit programs	
23	Other deductions (attach schedule)	
24	Total deductions (Add lines 12 through 23)	
25	Taxable income before net operating loss deduction (Subtract line 24 from line 11)	
26	Net operating loss deduction	

27	Taxable income (Subtract line 26 from line 25)	
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TAX, COMPUTATIONS, AND PAYMENTS		
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28	Total Tax (from Schedule J or Tax Computation section)	
29	Estimated tax payments and amount applied from prior year return	
30	Tax deposited with Form 7004 (Extension of Time to File)	
31	Total payments and refundable credits (Add lines 29 and 30)	
32	Estimated tax penalty (see instructions)	
33	Amount owed (If line 31 is smaller than the sum of lines 28 and 32, enter amount owed)	
34	Overpayment (If line 31 is larger than the sum of lines 28 and 32, enter overpayment)	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of Officer

Date

Title

Paid Preparer Signature

Date

PTIN / EIN