

**FORM
1120-D
Tax Year**

**DOMESTIC CORPORATION INCOME TAX
RETURN**

For State and Federal Compliance

Official Use Only

For calendar year or tax year beginning _____ ending _____

Name of Corporation _____	Employer Identification Number (EIN) _____	Date of Incorporation _____
	State of Incorporation _____	Total Assets _____

Number, Street, and Room or Suite No. (If a P.O. Box, see instructions)

City or Town, State, and ZIP Code

Initial Return
 Final Return

PART I : GROSS 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 share distributions	
5	Interest income	
6	Gross rents and royalties	
7	Capital gain net income	
8	Other income (attach schedule)	
9	Total Income (Add Lines 3 through 8)	

PART II : DEDUCTIONS

10	Compensation of officers	
11	Salaries and wages (less employment credits)	
12	Repairs and maintenance	
13	Rents paid	
14	Taxes and licenses	
15	Interest expense	
16	Charitable contributions	
17	Depreciation (attach Form 4562)	
18	Advertising	
19	Other deductions (attach schedule)	
20	Total Deductions (Add Lines 10 through 19)	
21	Taxable Income before Net Operating Loss (Subtract Line 20 from Line 9)	

PART III : TAX, PAYMENTS, AND BALANCE DUE

22	Total Tax liability	
23	Tax payments (including estimated tax payments)	
24	Refundable credits	
25	Total Payments and Credits (Add Lines 23 and 24)	
26	Estimated Tax Penalty (Check if Form 2220 is attached <input type="checkbox"/>)	
27	Amount Owed (If Line 22 plus Line 26 is larger than Line 25, enter amount owed)	
28	Overpayment (If Line 25 is larger than the sum of Line 22 and Line 26, 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's Signature	Date	PTIN	Firms EIN