

FORM 1120-D	DOMESTIC CORPORATION INCOME TAX RETURN For Calendar Year or Fiscal Year beginning and ending Tax Year: 20__ to 20__	State Registration Number: Date of Incorporation:
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Name of Corporation:	Employer Identification Number (EIN):	Business Code Number:
Principal Business Activity:		

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

City or Town, State, and ZIP Code:

INCOME

1	Gross receipts or sales	
2	Cost of goods sold	
3	Gross profit (Subtract line 2 from line 1)	
4	Dividends and interest received	
5	Gross rents	
6	Capital gain net income	
7	Other income (attach schedule)	
8	Total income (Add lines 3 through 7)	

DEDUCTIONS

9	Compensation of officers	
10	Salaries and wages (less employment credits)	
11	Repairs and maintenance	
12	Rents paid	
13	Taxes and licenses	
14	Interest expense	
15	Depreciation (attach Form 4562)	
16	Advertising	
17	Employee benefit programs	
18	Other deductions (attach schedule)	
19	Total deductions (Add lines 9 through 18)	
20	Taxable income before net operating loss deduction (Line 8 minus Line 19)	

TAX, PAYMENTS, AND REFUND

21	Total Tax (Calculate using applicable rate schedule)	
22	Estimated tax payments / Prior year credits	
23	Tax deposited with Form 7004	
24	Total Payments (Add lines 22 and 23)	
25	Estimated Tax Penalty (see instructions)	
26	TAX DUE (If line 21 plus line 25 is larger than line 24, enter amount owed)	
27	OVERPAYMENT (If line 24 is larger than line 21 plus line 25, enter overpayment)	

SIGN HERE

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. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of Officer: Title:	Date:	Officer's Phone Number:
Paid Preparer's Signature: Firm Name:	Date: PTIN:	Preparer's EIN/ SSN Phone No: