

FORM 1120-C	CONSOLIDATED CORPORATE INCOME TAX RETURN For Affiliated Group of Corporations For calendar year or tax year beginning _____, and ending _____	Tax Year 20____
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I. PARENT CORPORATION & GROUP IDENTIFICATION

Name of Parent Corporation

Employer Identification Number (EIN)

Registered Address (Street, City, State, ZIP Code)

II. SCHEDULE OF AFFILIATED CORPORATIONS INCLUDED IN CONSOLIDATION

No.	Name of Subsidiary Corporation	EIN	State of Incorp.	% of Voting Power Held	% of Value Held
1					
2					
3					
4					
5					

III. CONSOLIDATED TAXABLE INCOME COMPUTATION

Category	Parent Corp	Subsidiaries (Combined)	Consolidated Total
1. Gross Receipts or Sales			
2. Less: Cost of Goods Sold			
3. Gross Profit (Line 1 minus Line 2)			
4. Dividends & Intercompany Eliminations			
5. Interest Income			
6. Other Income / Capital Gains			
7. Total Consolidated Income (Lines 3 to 6)			
8. Compensation of Officers			
9. Salaries and Wages			
10. Rents, Taxes, & Licenses			
11. Depreciation & Amortization			

Category	Parent Corp	Subsidiaries (Combined)	Consolidated Total
12. Employee Benefit Programs			
13. Other Deductions			
14. Total Deductions (Lines 8 to 13)			
15. Taxable Income Before NOL (Line 7 minus Line 14)			
16. Net Operating Loss Deduction			
17. Consolidated Taxable Income (Line 15 minus Line 16)			

IV. CONSOLIDATED TAX COMPUTATION AND PAYMENTS

18. Income Tax on Consolidated Taxable Income	
19. Alternative Minimum Tax/ Consolidated Minimum Tax (if applicable)	
20. Total Consolidated Tax (Line 18 plus Line 19)	
21. Consolidated Foreign Tax Credits	
22. General Business Credits	
23. Net Consolidated Tax Liability (Line 20 minus Lines 21 and 22)	
24. Prior Year Overpayments Applied / Estimated Tax Payments	
25. Other Credits / Payments	
26. Amount Owed / (Overpayment) (Line 23 minus Lines 24 and 25)	

V. DECLARATION & SIGNATURES

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 (Parent Corporation)

Date

Title

Signature of Paid Preparer

Date

PTIN/ Firm EIN