

FORM 1120X-SUB

Amended Business Income Tax Return

For the calendar year or fiscal year beginning/ending details below.

TAX YEAR
20 _____

1. LEGAL NAME OF CORPORATION / BUSINESS ENTITY
2. EMPLOYER IDENTIFICATION NUMBER (EIN)
3. NUMBER, STREET, AND ROOM OR SUITE NO.
4. PHONE NUMBER & CONTACT PERSON
5. CITY OR TOWN, STATE, AND ZIP CODE

6. TYPE OF RETURN ORIGINALLY FILED (CHECK BOX) <input type="checkbox"/> Form 1120 (C-Corp) <input type="checkbox"/> Form 1120-S (S-Corp) <input type="checkbox"/> Form 1065 (Partnership) <input type="checkbox"/> Other

FINANCIAL RECONCILIATION

Line	Tax Items	A. As Originally Reported or Adjusted	B. Net Change (Increase/Decrease)	C. Corrected Amount
1	Gross Receipts or Sales			
2	Cost of Goods Sold			
3	Gross Profit (Line 1 minus Line 2)			
4	Total Deductions / Expenses			
5	Taxable Income (Line 3 minus Line 4)			
6	Total Tax Liability			
7	Tax Payments and Credits			
8	Tax Due (Line 6 minus Line 7)			
9	Overpayment / Refund Claimed			

EXPLANATION OF CHANGES

Provide the line reference number and a detailed explanation for each amendment.

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SIGNATURE OF OFFICER Under penalties of perjury, I declare that I have examined this return and accompanying schedules.

TITLE

DATE

PAD PREPARER USE ONLY

PREPARER NAME / PTIN

DATE

FIRM EIN

FIRM PHONE