CONSOLIDATED CORPORATE INCOME TAX RETURN

Taxable Year: 20____

Parent Corporation Name

Employer ID Number (EIN)

Principal Business Activity

State of Incorporation

Registered Address

Date of Consolidation Election

SCHEDULE A: AFFILIATED CORPORATIONS INCLUDED IN CONSOLIDATION

Corporation Name	EIN	Ownership %	Gross Income	Taxable Income
Parent:		100%		
Subsidiary 1:				
Subsidiary 2:				
Subsidiary 3:				
Subsidiary 4:				
Total Consolidated Group (Before Eliminations)				

SCHEDULE B: INTERCOMPANY ELIMINATIONS & ADJUSTMENTS

Description of Adjustment / Elimination	Debit ($)	Credit ($)	Affected Subsidiary / Parent Entity
Intercompany Dividend Eliminations			
Intercompany Sales / Cost of Goods Sold			
Unrealized Intercompany Profit in Inventory			
Intercompany Interest Income / Expense			
Other Eliminations (Specify):			
Total Eliminations and Adjustments			

SCHEDULE C: CONSOLIDATED TAXABLE INCOME & TAX COMPUTATION

Line Item	Combined Total	Eliminations	Consolidated Total
1. Gross Receipts or Sales			
2. Less: Cost of Goods Sold			

Line Item	Combined Total	Eliminations	Consolidated Total
3. Gross Profit (Subtract Line 2 from Line 1)			
4. Dividends and Other Income			
5. Total Gross Income (Add Line 3 and Line 4)			
6. Total Deductions (Salaries, Rent, Interest, Depreciation, etc.)			
7. Net Income before NOL and Special Deductions			
8. Consolidated Net Operating Loss (NOL) Deduction			
9. Consolidated Taxable Income (Subtract Line 8 from Line 7)			
10. Corporate Income Tax Rate (%)			
11. Gross Consolidated Tax Liability			
12. Less: Tax Credits (Foreign Tax, R&D, etc.)			
13. Less: Estimated Tax Payments & Prior Year Overpayments			
14. Net Tax Due / (Refund Claimed)			

DECLARATION AND 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 of Parent Corporation

Title / Designation

Date

Signature of Preparer (if other than taxpayer)

Firm Name & Address

Preparer PTIN / EIN