

IOWA Corporation Income Tax Return (Short Form)

OFFICIAL USE ONLY

IA 1120 A From _____ to _____ ▲

Check the box if this is: <input type="checkbox"/> (1) Name/Address Change <input type="checkbox"/> (2) A Short Period ▲	
Corporation Name and Address ▲	Federal T.I.N.: ▲
	Business Code: ▲
	County No.: ▲
Is this a first or final return? If yes check the appropriate box.	
Name of contact person _____	First Return ▲ <input type="checkbox"/> New Business? <input type="checkbox"/> Successor? <input type="checkbox"/> Entering Iowa? <input type="checkbox"/>
Phone No. _____	Final Return ▲ <input type="checkbox"/> Merged? <input type="checkbox"/> Dissolved? <input type="checkbox"/> Withdrawn? <input type="checkbox"/>
	<input type="checkbox"/> Bankruptcy? <input type="checkbox"/> Others _____

Type of Return: ▲ 1 Regular Corporation 2 Cooperative 3 UBIT

Is this an inactive corporation? ▲ Yes No

Was Federal Income or Tax changed for any prior period(s)? ▲ Yes No Periods _____

Do you have property in Iowa? ▲ Yes No

		(Use Whole Dollars)	
1. Net Income From Federal Return (before Federal Net Operating Loss)	1		▲
2. 50% of Federal Tax Refund <input type="checkbox"/> Accrual <input type="checkbox"/> Cash	2		▲
3. Other Additions (Schedule A)	3		▲
4. Net Income after additions (add lines 1 through 3)	4		
5. 50% of Federal Tax Deduction <input type="checkbox"/> Accrual <input type="checkbox"/> Cash ▲	5		▲
6. Other Reductions (Schedule A)	6		▲
7. Total Reductions (add lines 5 and 6)	7		
8. Net Income Before Net Operating Loss Deductions (subtract line 7 from line 4)	8		
9. Net Operating Loss Carryforward (use schedule F, if not from previous period)	9		▲
10. Income Subject To Tax (subtract line 9 from line 8) (Do NOT enter an amount below \$0)	10		
11. Computed Tax (for Tax Rates, see bottom of page 2) Check box if tax is annualized <input type="checkbox"/>	11		▲
12. Motor Fuel Credit (attach IA 4136)	12		▲
13. Iowa New Jobs Credit (attach IA 133)	13		▲
14. Research Activities Credit (attach IA 128)	14		▲
15. Minimum Tax Credit (provide schedule)	15		▲
16. Other Credits (please specify & see instructions) (_____)	16		
17. Total Credits (add lines 12 through 16)	17		▲
17a. Check the box if IA 4136 includes diesel fuel <input type="checkbox"/> ▲			
18. Payments (schedule C2, line 5, includes estimated tax credit)	18		▲
19. Total Credits and Payments (add lines 17 and 18)	19		
20. Net Amount (subtract line 19 from line 11)	20		
21. Tax Due (if line 20 is greater than \$0 then enter the Tax Due on line 21)	21		
22. Penalty (Underpayment of Estimated Tax - attach IA 2220)	22		▲
23. Penalty (Failure to pay or failure to file)	23		▲
24. Interest	24		▲
25. Total Amount Due (add lines 21 through 24) Make check payable to: "TREASURER, STATE OF IOWA"	25		▲
26. Overpayment (if line 20 is less than \$0, enter Overpayment on line 26)	26		
27. Credit to next period's Estimated Tax	27		▲
28. Refund Requested (subtract line 27 from 26)	28		▲
Cow-Calf Refund DO NOT use this amount to increase your overpayment, line 26, or to reduce the amount you owe, line 25.			
Refund Cow-Calf Refund (attach IA 132) ▲			

Information from Prior Period Iowa Return: Corporation Name _____

Net Income/(Loss) \$ _____ ▲ Federal T.I.N. _____ ▲

A complete copy of your Federal Return, as filed with the Internal Revenue Service, MUST be filed with this return. If no copy is attached, this MAY NOT be considered a complete return.

Under penalties of perjury, I declare that I have examined this return, any attached schedules/statements, and, to the best of my knowledge, believe it to be true, correct and complete. If prepared by a person other than the taxpayer, the declaration is based on all information of which there is any knowledge.

Officer's Signature Date Title

STF WEB _____
Preparer's Signature Date Preparer's T.I.N. ▲

Schedule A — Other Additions and Reductions		Enter Whole Dollars	
	Type of Income	Other Additions	Other Reductions
1	Tax Exempt Interest & Dividends		
2	Iowa Tax Expense/Refund		
3	Federal Securities Interest & Dividends		
4	Other (please specify)		
5			
6	Totals (enter on page 1)	(Enter on line 3)	(Enter on line 6)

Schedule C2 — Payments					
		1st	2nd	3rd	4th
1	Estimated Tax Payments				
2	Total 1st through 4th				
3	Credit from Prior Period				
4	Voucher Payment				
5	TOTAL (add lines 2, 3 & 4)	(Enter on line 18 of page 1) >			

Schedule F — Net Operating Loss				
	Tax Period Ended	Iowa Loss Incurred	Loss Applied	Unused Loss
1				
2				
3				
4				
5				

Additional Information

(1) Year business was started in Iowa: _____ (2) Last period filed as S-Corporation (if any): _____

Please note IA 1120 Schedules B, C1, D, and E do not apply to the IA1120A.

Form IA 1120A may be filed if a corporation is filing as an inactive corporation in Iowa or it meets ALL the following requirements:

- | | |
|--|--|
| <ul style="list-style-type: none"> 1 It does not have any ownership in a foreign corporation. 2 It is not a member of a controlled group of corporations. 3 It is not a personal holding company. 4 It is not a consolidated corporate return filer. 5 Its only dividend income is from domestic corporations, and those dividends qualify for the 70% deduction, none of which represents debt-financed securities. 6 It is not subject to environmental tax under IRS Section 59A. | <ul style="list-style-type: none"> 7 It has no liability or interest under IRS section 452(1)(3) or 452A(c) (relating to certain installment sales) or installment payments of tax under IRS Section 1363(d). 8 It is not required to file an IRS Form 8621, Return by a Shareholder of Passive Foreign Investment Company or Qualified Electing Fund. 9 It does not apportion income within and without Iowa. 10 It is not required to pay minimum tax. 11 It does not have a deduction for nonbusiness income. 12 It does not have any partnership income. |
|--|--|

TAX RATES:

If income shown on line 10 (of page 1) is:
 Under \$25,000, then multiply line 10 by 6%.
 \$25,000 to \$100,000, then multiply line 10 by 8% and subtract \$ 500.
 \$100,000 to \$250,000, then multiply line 10 by 10% and subtract \$ 2,500.
 Over \$250,000, then multiply line 10 by 12% and subtract \$ 7,500.
If annualizing, attach a schedule showing computation.

MAIL YOUR RETURN TO:

Corporation Tax Return Processing
 Iowa Department of Revenue and Finance
 P.O. Box 10468
 Des Moines, Iowa 50306-0468

To obtain copies of schedules and forms call the service numbers below or to have them FAXED to you, call our 24-hour TAX-FAX Hotline:
 Outside of Des Moines, but in Iowa - 800-572-3943. In Des Moines or outside of Iowa - 515-281-4139.

Any questions?

*HOURS: 8:00 am through 4:00 pm, Monday, Tuesday and Thursday.
 9:00 am through 4:00 pm, Wednesday and Friday.*

In Des Moines or outside of IOWA, call: **515-281-3114.**

Outside Des Moines, but in IOWA or from the Rock Island/Moline, IL or Omaha, NE calling areas **800-367-3388.**

Corporate Name: _____

Federal T.I.N. _____