

For Calendar Year 2016 or other fiscal year \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Check all that apply: Name/Address Change [ ] Short Period [ ] Amended Return [ ]

Part I: Corporation Name and Address

Name \_\_\_\_\_
Street Address \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_
Name of Contact Person \_\_\_\_\_
Phone Number (\_\_\_\_) \_\_\_\_\_

FEIN \_\_\_\_\_ Business Code \_\_\_\_\_
County Number \_\_\_\_\_ Number of Shareholders \_\_\_\_\_
Is this a first or final return? If yes, check the appropriate box.
First Return [ ] New Business [ ] Successor [ ] Entering Iowa [ ]
Final Return [ ] Reorganized [ ] Merged [ ]
Dissolved [ ] Withdrawn [ ]
Bankruptcy [ ] Other [ ]

Part II: Corporation Information

Type of Return: [ ] S Corporation [ ] IC Domestic International Sales Corporation [ ] Foreign Sales Corporation [ ]
Is this an inactive corporation? [ ] Yes [ ] No
Was federal income or tax changed for any prior period(s)? [ ] Yes [ ] No Tax Period(s) \_\_\_\_\_
Is the corporation's business carried on entirely within Iowa? [ ] Yes [ ] No
Date of S corporation election (mm/dd/yyyy) \_\_\_\_\_

PART III: Modification of Corporation Income

1. Net income per federal Schedule K. (See instructions) 1. \_\_\_\_\_
2. Interest and dividends exempt from federal income tax. (See instructions) 2. \_\_\_\_\_
3. Other additions. Include schedule 3. \_\_\_\_\_
4. Total additions. Add lines 2 and 3. 4. \_\_\_\_\_
5. 50% of federal income tax 5. \_\_\_\_\_
6. Interest and dividends from federal securities. (See instructions) 6. \_\_\_\_\_
7. Other reductions. Include schedule 7. \_\_\_\_\_
8. Total reductions. Add lines 5, 6, and 7 8. \_\_\_\_\_
9. Net modifications. Subtract line 8 from line 4. 9. \_\_\_\_\_
10. Modified federal net income. Add line 1 and line 9 10. \_\_\_\_\_
11. Tax on built-in gains or passive investment income. (See instructions) 11. \_\_\_\_\_

Amount owed: Make check payable to Treasurer, State of Iowa. Submit with form IA 1120V. If a refund is needed, see instructions.

Part IV: Business Activity Ratio (BAR) See instructions

Table with 3 columns: Types of Income, Column A-Iowa Receipts, Column B-Receipts Everywhere. Rows include Gross receipts, Net dividends, Exempt interest, Accounts receivable interest, Other interest, Rent, Royalties, Capital gain/(loss), Ordinary gains/(loss), Partnership gross receipts, Other, TOTALS, and BAR calculation.

PART V: Information from Prior Period Iowa Return

Corporation Name \_\_\_\_\_ Net Income/(Loss) \$ \_\_\_\_\_ FEIN \_\_\_\_\_

File electronically. A complete copy of your federal return must be filed with this return, not including federal K-1s.

Declaration: Under penalties of perjury, I declare that I have examined this return and any included 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 \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Preparer's Signature \_\_\_\_\_ Preparer's ID Number \_\_\_\_\_ Date \_\_\_\_\_

Preparer's Address \_\_\_\_\_

Mail To: Corporate Tax Return Processing, Iowa Department of Revenue, PO Box 10468, Des Moines IA 50306-0468

