Control for the second se		Illinois Department of Revenue				
Partnership Replacement Tax Return Bea When should I life? in the form II.1056 intervious for a list of due dates If this return is not for calendar year 2024, enter your fiscal tax year here. Tax year beginning mean dag. 20 year This form is of tax years ending on attra Document 31, 2024. This form is of tax years ending on attra Document 31, 2024, and before December 31, 2024. This form is of tax years ending on attra Document 31, 2024, and before December 31, 2024. Total other statistics, see instructions to determine the correct form to use. Total other statistics, see instructions to determine the correct form to use. Total other statistics, see instructions to determine the correct form to use. Total other statistics, see an enchord of a statistic ty our part of the dates of the statistic transmitter of the dates of the statistic transmitter of the dates of the transmitter of the dates of the date of the date of the minutes. Total other statistics, each included on a schedule UB and attach it to the dates of the date of the dates of the date of the da		2024 Eorm II -1065				
See "When should file?" in the Form IL-106S instructions for a list of due dates. If this rotum is not for calandary your lisual axy your brack any are beginning method for a list of calandary your lisual axy your brack Tay your beginning method for the determine the context form to use See "When should file?" The form is for taxy yours ending on a flar December 31. 2024, and before December 31. 2025. See "When should file?" The form is for taxy yours ending on a flar December 31. 2024. See "When should file?" The form is for taxy yours ending on a flar December 31. 2024, and before December 31. 2025. See "When should file?" The form is for taxy yours ending on a flar December 31. 2024. See "When should file?" See "See "See "See "See "See "See						
If this return is not for calendar year 2004 enter your fiscal flax year here. Enter the amount you are paying more digr 20 year. This form is off a year ending on orafte December 31, 2025. Enter your complete legal business name. Inter your complete legal business name. Inter your complete legal business name. If you have a name change, check this box. Inter your complete legal business name. Inter your complete legal business name. Inter your complete legal business name. If you have a name change, check this box. Inter your mailing address. Inter your mailing address. Correst inter your mailing address. ZP Inter your complete legal business (nough the phylocitation the phyloci						
Tax year beginning	If			int you are paying		
It is form is for tax years ending on rafter December 31, 2024, and before December 31, 2025. \$		· · ·		int you are paying.		
For all other situations, see instructions to determine the correct form to use. Image: Correct						
Step 1: identify your partnership K Enter your completed legal business name. If you have a name change, check this box. L Mame Check this box if you are a member of a unitary business group and are included on a Schedule UB, combined Apportionment to Unitary Business croup. Enter the FEIN Use are amember of a unitary business group and are included on a Schedule UB, combined Apportionment to Unitary Business Croup. Enter the FEIN the member of a unitary business group and are included on a Schedule UB, combined Apportionment to Unitary Business Croup. Enter the FEIN the member of a unitary business group and are included on a Schedule UB, combined Apportionment for the member. C If this is a final return, check the applicable box(es). M Enter the city. state, and 2p code where your account greater at the total and attach it to thin return. M Enter your North American Industry Classification system (NAICS) Code. See instructions. N Enter the city. state, and 2p code where your account greater at the total and appoint box or boxes and see Apportionment Formulas. Check the appropriate box or boxes and see Apportionment Formulas. Check the appropriate box or boxes and see Apportionment partnership If wou are adapting the two-left part it, Line 10 C Check this box if you are a 25:3 wave filer. P of the the Box By and A4. P of the left part By and A4. C Hock this box if you are as 25:3 wave filer. P of the left part By and A4. P of the left part By and A4. C Hock this box if you attached to file and pay Pass-through Entity (PTE) Tax and you annualized you incom		This form is for tax years ending on or after December 31, 2024, and before For all other situations, see instructions to determine the correct form to use				
A Enter your complete legal business name. If you have a name change, check this box. If you have a name change, check this box. B Enter your mailing address. If you have a name change, check this box. If you have a name change address. Cite If you have a name change, check this box. If you are a member of a unitary business group and are included on a Schedule UB, Combined Apportionment for Unitary Business Group. Enter the FEIN of the member of a funding address. Cite First return If this is a final return, check the applicable box(es). If this is a final return because you sold this business, enter the date sold (mm dd yyyy), and the new owner's FEIN. D If this is a final return because you sold this business, enter the date sold (mm dd yyy), and the new owner's FEIN. M Enter your North American Industry Classification System (NAICS) Code. See instructions. F Check this box if you are and the new owner's FEIN. If this is a final return check the appropriate box or boxes and see Apportionment Formula instructions. G Check this box if you area an IRCS 761 election. If the check this box if you area as business income a business income election to the ret all anothusiness income a business income election to the adaption the formula 220. G Check this box if you attached Schedule Return the federal Sch. If the check this box if you attached Schedule 200. G Check this box if you attached Schedule 220. Check this box if you attached Schedule 200. G Check this bo						
Image: Image: Image: Image: Name: Image: Image: Image: Image: Image: <t< th=""><th></th><th></th><th></th><th>tification number</th></t<>				tification number		
Nume:	A					
B Enter your mailing address. initiary business group. Enter the FCIN of the member who prepared the Schedule UB, Combined Approximment for Unliag. C:			L Check this box if you are a n	nember of a		
Oo	R		unitary business group and are in	ncluded on a		
Mailing address:	U					
State: 21: return. C if this is the first or final return, check the applicable box(es). if this is a final return (Enter the date of termination. if this is a final return because you sold this business, enter the date sold D If this is a final return because you sold this business, enter the date sold M Enter your North American Industry Classification System (NAICS) Code. See instructions. B Apportionment Formulas. Check the appropriate box or boxes and see Apportionment formula instructions. M Enter your North American Industry Classification System (NAICS) Code. See instructions. C Infancial organizations Transportation companies incertain this box if you are making the business income as business income eas busine						
C If this is the first or final return, check the applicable box(es). If this is the first or final return (beck the applicable box(es). First return First return If this is a final return because you sold this business, enter the date sold (mm dd yyyy) If this is a final return because you sold this business, enter the date sold (mm dd yyyy) If this is a final return because you sold this business, enter the date sold (mm dd yyyy) If this is a final return because you sold this business, enter the date sold (mm dd yyyy) If you are sold where your accounting records are kept. (Use the two-letter postal abbreviation, e.g., IL, GA, etc.) If Apportionment Formulas. Check the appropriate box or boxes and see Apportionment Formula instructions. If you are making the business income election to the tat all nonbusiness income a business income election to the tat all nonbusiness income a business income election to the tat all nonbusiness income election to this box if you are a 52/53 week filer. C Check this box if you are a 52/53 week filer. C Check this box if you are a 52/53 week filer. C Check this box if you are a 52/53 week filer. C Check this box if you attached Binkoid 1299-A J fly ou are paying Pass-through Entity (PTE) Tax sen instructions. S check this box if you attached Binkoid 1299-A J fly ou are paying Pass-through Entity (PTE) Tax and you annualized your income or loss from the rental activities. S check this box if you attached Binkoid 1299-A J Ordinary income or loss, or equivalent from fideral Schedule K. 1 -000 </th <th></th> <th></th> <th></th> <th></th>						
First return First return First return If this is a final reture because you sold this business, enter the date sold (m dd yyyy) If this is a final reture because you sold this business, enter the date sold (m dd yyy) If this is a final reture because you sold this business, enter the date sold (m dd yyy) If this is a final reture because you sold this business, enter the date sold (m dd yyy) If this is a final reture because you sold this business, enter the date sold (m dd yyy) If this is a final reture because you sold this business, enter the date sold (m dd yyy) If this is a final reture because you sold this business, enter the date sold (m dd yyy) If this is a final reture because you sold this business, enter the date sold (m dd yyy) If this is a final reture because you sold this business, enter the date sold (m dd yyy) If this is a final reture because you sold this business, enter the date sold (m dd yyy) If this is a final reture because you sold this business, enter the date sold (m dd yyy) If this is a final reture and the even enter the date sold (m dd yyy) If this is a final reture and the even enter the date sold (m dd yyy) If this is a final reture and the even enter sold (m dd yyy) If this is a final reture and the even enter sold (m dd yy) If this is a final reture and the even enter sold (m dd yy) If this is a final reture and the even enter sold (m dd y and tached final reture) If the detail form (sd yy) If the detail form (sd yy) If this is a final reture and the detail form (sd yy) If the detail form (sd yyy) If the detail form (sd yyy) If the d	С	-				
D If this is a final return because you sold this business, enter the date sold (m dd yyyy), and the new owner's FEIN. E Apportionment Formulas. Check the appropriate box or boxes and see Apportionment Formulas. Instructions. Financial organizations Transportation companies Financial organizations Transportation companies F Check this box if you are: Classified as an investment partnership Check this box if you area 52/53 week filer. C Check this box if you area 52/53 week filer. C Check this box if you area 52/53 week filer. C Check this box if you area 52/53 week filer. C Check this box if you area 52/53 week filer. C Check this box if you area 52/53 week filer. C Check this box if you area 52/53 week filer. C Check this box if you area 52/53 week filer. C Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Born IL-4562. C Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached		First return				
D If this is a final return because you sold this business, enter the date sold (mm dd yyyy), and the new owner's FEIN. N Enter the idly, state, and zip code where your accounting records are kept. (Use the two-letter postal abbreviation, e.g., iL, GA, etc.) E Apportionment Formulas. Check the appropriate box or boxes and see Apportionment Formulas instructions. City State Zip F Check this box if you are: City State Zip City State Zip Check this box if you are a Sizfa week filer. Check this box if you atdached partnership Check this box if you atdached Form IL-4282. City State Zip City State Zip <t< th=""><th></th><th>☐ Final return (Enter the date of termination)</th><th>System (NAICS) Code. See instr</th><th>uctions.</th></t<>		☐ Final return (Enter the date of termination)	System (NAICS) Code. See instr	uctions.		
(mm dd yyyy)	П		N Enter the city state and zip code	- where your		
Image: state of the owner of Live postal abbreviation, e.g., iL, GA, etc.) E Apportionment Formulas. Check the appropriate box or boxes and see Apportionment Formulas instructions. pinancial organizations [] ransportation companies F Financial organizations [] ransportation companies fit you are making the business income election to treat all nonbusiness income election to treat all nonbusiness income election income or loss if you are a 52/53 week filer. fit you have completed the following, check the box and attach the federal form (Live 562. G Check this box if you are a 52/53 week filer. if you are paying Pass-through Entity (PTE) Tax. See instructions. generative form (L-652. J If you are paying Pass-through Entity (PTE) Tax and you annualized your income or Form IL-2220, check this box and attach Form IL-2220. Check this box if you attached Schedule 1299-A J If you are paying Pass-through Entity (PTE) Tax and you annualized your income or loss from all rental area (state activities. Schedule form 12-652. J If you are paying Pass-through Entity (PTE) Tax and you annualized your income or loss from all rental area (state activities. Schedule form 12-220. J I creak this box if you attached Schedule 1299-A U L Ordinary income or loss from other rental activities. 1 -000 3 Net income or loss from other rental activities. 2 -000 <	U	•				
see Apportionment Formula instructions. Financial organizations Transportation companies Financial organizations Transportation companies Check this box if you are Sales companies Check this box if you are an INVESTMENT part II. Line 10 Une statistical as a publicly-traded partnership Check this box if you are a 52/53 week filer. If you are a 52/53 week filer. I Check this box if you are a 52/53 week filer. Image: Check this box if you attached Form IL-4562. J fryou are paying Pass-through Entity (PTE) Tax. See instructions. Image: Check this box if you attached Schedule 80/20. J fryou are paying Pass-through Entity (PTE) Tax. See instructions. Check this box if you attached Schedule 80/20. J fryou are paying Pass-through Entity (PTE) Tax and you annualized your income on Form IL-2220, check this box and attach Form IL-2220. Schedule the Societ of you attached Schedule 1299-A J fryou are as from all realt real estate activities. 2 Week this box if you attached Schedule 1299-A J Check this box if you attached Schedule 1299-A Ucheck this box if you attached Schedule 1299-A J Check this box if you attached Schedule 1299-A Ucheck this box if you attached Schedule 1299-A J Check this box if you attached Schedule 1299-A Ucheck this box if you attached Schedule 1299-A J Check this box if you attached Schedule 1299-A Ucheck t			postal abbreviation, <i>e.g.</i> , IL, GA,	etc.)		
see Apportionment Formula instructions. Financial organizations Transportation companies Financial organizations Transportation companies Check this box if you are Sales companies Check this box if you are an INVESTMENT part II. Line 10 Une statistical as a publicly-traded partnership Check this box if you are a 52/53 week filer. If you are a 52/53 week filer. I Check this box if you are a 52/53 week filer. Image: Check this box if you attached Form IL-4562. J fryou are paying Pass-through Entity (PTE) Tax. See instructions. Image: Check this box if you attached Schedule 80/20. J fryou are paying Pass-through Entity (PTE) Tax. See instructions. Check this box if you attached Schedule 80/20. J fryou are paying Pass-through Entity (PTE) Tax and you annualized your income on Form IL-2220, check this box and attach Form IL-2220. Schedule the Societ of you attached Schedule 1299-A J fryou are as from all realt real estate activities. 2 Week this box if you attached Schedule 1299-A J Check this box if you attached Schedule 1299-A Ucheck this box if you attached Schedule 1299-A J Check this box if you attached Schedule 1299-A Ucheck this box if you attached Schedule 1299-A J Check this box if you attached Schedule 1299-A Ucheck this box if you attached Schedule 1299-A J Check this box if you attached Schedule 1299-A Ucheck t	F	Apportionment Formulas. Check the appropriate box or boxes and				
Financial organizations Transportation companies Federally regulated exchanges Sales companies Federally regulated exchanges Sales companies Federal for upset to treat all nonbusiness income as business income, check this box if you are: Check this box if you are: Check this box if you are as 52/53 week filer. F Check this box if you made an IRC § 761 election. F Check this box if you are a 52/53 week filer. C Check this box if you are a 52/53 week filer. C Check this box if you are a 52/53 week filer. C Check this box if you are a 52/53 week filer. C Check this box if you are a 52/53 week filer. C Check this box if you attached Bornu L-4562. C Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20.			,			
International companies Intenant andite companies <t< th=""><th></th><th></th><th></th><th></th></t<>						
F Check this box if you are: Lines 36 and 44. P I Check this box if you are: Image: S6 and 44. P I Check this box if you made an IRC § 761 election. P I Check this box if you are a 52/53 week filer. P I Check this box if you elected to file and pay Pass-through Entity (PTE) Tax. See instructions. Check this box if you attached Form IL-4562. R J If you are paying Pass-through Entity (PTE) Tax. and you annualized your income on Form IL-2220, check this box and attach Form IL-2220. Check this box if you attached Schedule 80/20. T J If you are paying Pass-through Entity (PTE) Tax and you annualized your income on Form IL-2220, check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 1299.A. J If you are paying Pass-through Entity (PTE) Tax and you annualized your income or loss of rom other rental activities. S Check this box if you attached Schedule 1299.A. S Check this box if you attached Schedule 1299.A. J Ordinary income or loss, or equivalent from federal Schedule K. 1 -O0 Check this box if you attached the Subgroup Schedule. J Ordinary income or loss, or equivalent from federal Schedule K. 1 -00 3 -00 J Ordinary income or loss.						
Step 2: Figure your ordinary income or loss 1 Ordinary income or loss, or equivalent from federal Schedule K. 2 Meta income or loss, from all rental real estate activities. 3 Net income or loss from all rental real estate activities. 4 Portfolio income or loss, or equivalent from federal Schedule K. 2 Meta income or loss from all rental real estate activities. 4 Portfolio income or loss. 5 Net IRC Section 1231 gain or loss. 700 7 Add Lines 1 through 6. This is your ordinary income or loss. 700 7 Add Lines 1 through 6. This is your ordinary income or loss. 700 7 Add Lines 1 through 6. This is your ordinary income or loss. 700 7 Add Lines 3 through 11. 13 Subtract Line 12 from Line 7. This amount is your total unmodified base income or loss. 10	F					
Image: Classified as a publicly-traded partnership Image: Classified as a publicly-traded partnership Image: Classified as a publicly-traded partnership Image: Classified as a publicly-traded partnership Image: Classified as a publicly-traded partnership Image: Classified as a publicly-traded partnership Image: Classified as a publicly-traded partnership Image: Classified as a publicly-traded partnership Image: Classified as a publicly-traded partnership Image: Classified as a publicly-traded partnership Image: Classified as a publicly-traded partnership Image: Classified as a publicly-traded partnership Image: Classified as a publicly-traded partnership Image: Classified as a publicly traded partnership Image: Classified as a publicly traded partnership Image: Classified as a publicly traded partnership Image: Classified as a publicly traded partnership Image: Classified as a publicly traded partnership Image: Classified as a publicly traded partnership Image: Classified as a publicly traded partnership Image: Classified as a publicly traded partnership Image: Classified as a publicly traded partnership Image: Classified as a publicly traded partnership Image: Classified traded partnership Image: Classified traded partnership Image: Classified traded	•					
G Check this box if you made an IRC § 761 election. Check this box if you attached Form IL-4562. H Check this box if you elected to file and pay Pass-through Entity (PTE) Tax. See instructions. Check this box if you attached Illinois Schedule M (for businesses). Check this box if you attached Schedule 80/20. J If you are paying Pass-through Entity (PTE) Tax and you annualized your income on Form IL-2220, check this box and attach Form IL-2220. S Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. J Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. J Tordinary income or Form IL-2220, check this box and attach Form IL-2220. U Check this box if you attached Schedule 80/20. U Check this box if you attached Schedule 80/20. J Ordinary income or loss, or equivalent from federal Schedule K. U Check this box if you attached the Subgroup Schedule. J Ordinary income or loss from other rental activities. 2 -000 J Net income or loss from other rental activities. 2 -000 J Net income or loss from 1065. See instructions. Identify: 6 -000 J Add Lines 1 through 6. This is your ordinary income or loss. 7 -000 Step 3:						
H Check this box if you are a 52/53 week filer. Check this box if you elected to file and pay Pass-through Entity (PTE) Tax. See instructions. J If you are paying Pass-through Entity (PTE) Tax and you annualized your income on Form IL-2220, check this box and attach Form IL-2220. S Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 80/20. T Ordinary income or loss, or equivalent from federal Schedule K. A Portfolio income or loss. S Net IRC Section 1231 gain or loss. All other items of income or loss. All other items of income or loss. Figure your unmodified base income or loss. Add Lines 1 through 6. This is your ordinary income or loss. S Expense deduction under IRC Section 179. Add Lines 8 through 11. S Ubtract Line 12 from Line 7. This amount is your total unmodified base income or loss. Add Lines 8 through 11. S ubt	G			art II, Line 10		
I Check this box if you elected to file and pay Pass-through Entity (PTE) Tax. See instructions. J If you are paying Pass-through Entity (PTE) Tax and you annualized your income on Form IL-2220, check this box and attach Form IL-2220. S Check this box if you attached Schedule 80/20. T Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U Check this box if you attached the Subgroup Schedule. V Check this box if you attached the Subgroup Schedule. V Check this box if you attached the Subgroup Schedule. V Check this box if you attached the Subgroup Schedule. V Check this box if you attached the Subgroup Schedule. V Check this box if you attached the Subgroup Schedule. V Check this box if you attached the Subgroup Schedule. V Check this box if you attached the Subgroup Schedule. V Check this box if you attached the Subgroup Schedule. V Check this box if you attached the Subgroup Schedule. V The form attached the subgroup Schedule. V The form income or loss from other rental activities. S Net IRC Section 1231 gain or loss. S Net IRC Section 1231 gain or loss. S Charitable contributions. S Check the subgroup Schedule as outlined of	н					
Entity (PTE) Tax. See instructions. I J If you are paying Pass-through Entity (PTE) Tax and you annualized your income on Form IL-2220, check this box and attache Form IL-2220. S Check this box if you attached Schedule 80/20. I T Check this box if you attached Schedule 209-A. U Check this box if you attached Schedule 1299-A. U U Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U V Check this box if you attached Schedule Public Law 86-272. V V Check this box if you attached the Subgroup Schedule. V Step 2: Figure your ordinary income or loss (Whole dollars only) 1 -00 1 Ordinary income or loss, or equivalent from federal Schedule K. 1 -00 2 Net income or loss from all rental real estate activities. 2 -00 3 Net income or loss from other rental activities. 3 -000 4 Portfolic income or loss. 5 -000 5 Net IRC Section 1231 gain or loss. 6 -000 6 Add Lines 1 through 6. This is your ordinary income or loss. 7 -000 Step 3: Figure your unmodified base income or loss. </th <th></th> <th></th> <th></th> <th>nois</th>				nois		
J If you are paying Pass-through Entity (PTE) Tax and you annualized your income on Form IL-2220, check this box and attach Form IL-2220. T Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. U Check this box if you attached Schedule 1299-A. V Check this box if you attached Schedule 1299-A. U Check this box if you attached the Subgroup Schedule. V Check this box if you attached the Subgroup Schedule. U Check this box if you attached the Subgroup Schedule. V Ordinary income or loss, or equivalent from federal Schedule K. 1	-		· · · · · · · · · · · · · · · · · · ·			
U Check this box if your business activity is protected under Public Law 86-272. V Check this box if you attached the Subgroup Schedule. V Schedule. V Schedule. V Schedule. V Schedule. V Schedule. V Schedule.	J	If you are paying Pass-through Entity (PTE) Tax and you annualized your	-			
V Check this box if you attached the Subgroup Schedule. V Check this box if you attached the Subgroup Schedule. I Ordinary income or loss, or equivalent from federal Schedule K. 1 -00 2 Net income or loss form all rental real estate activities. 2 -00 3 Net income or loss from other rental activities. 3 -00 4 Portfolio income or loss. 4 -00 5 Net IRC Section 1231 gain or loss. 5 -00 6 All other items of income or loss that were not included in the computation of income or loss on Page 1 of federal Form 1065. See instructions. Identify: 6 -00 7 Add Lines 1 through 6. This is your ordinary income or loss. 7 -00 5 Step 3: Figure your unmodified base income or loss. 8 -00 9 Expense deduction under IRC Section 179. 9 -00 10 Interest on investment indebtedness. 10 -00 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify: 11 -00 10 Interest on investment indebtedness. 10 -00 -00		income on Form IL-2220, check this box and attach Form IL-2220.	-			
Step 2: Figure your ordinary income or loss (Whole dollars only) 1 Ordinary income or loss, or equivalent from federal Schedule K. 2 Net income or loss from all rental real estate activities. 3 Net income or loss from other rental activities. 4 Portfolio income or loss. 5 Net IRC Section 1231 gain or loss. 6 All other items of income or loss. 7 Add Lines 1 through 6. This is your ordinary income or loss. 8 Charitable contributions. 9 Expense deduction under IRC Section 179. 9 expense deduction under IRC Section 179. 9 expense deduction under IRC Section 179. 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify: 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify: 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify: 12 Add Lines 8 through 11. 13 Subtract Line 12 from Line 7. This amount is your total unmodified base income or loss. 13 Uniter 2 from Line 7. This amount is your total unmodified base income or loss. 14 This form is authorized as outlined by the lilinois income Tax Act. Disclosure of this						
 Step 2: Figure your ordinary income or loss 1 Ordinary income or loss, or equivalent from federal Schedule K. 2 Net income or loss from all rental real estate activities. 3 Net income or loss from other rental activities. 4 Portfolio income or loss. 5 Net IRC Section 1231 gain or loss. 6 All other items of income or loss that were not included in the computation of income or loss on Page 1 of federal Form 1065. See instructions. Identify: 7 Add Lines 1 through 6. This is your ordinary income or loss. 7 Add Lines 1 through 6. This is your ordinary income or loss. 8 Charitable contributions. 9 Expense deduction under IRC Section 179. 9 Expense deduction under IRC Section 179. 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify: 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify: 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify: 12 Add Lines 8 through 11. 13 Subtract Line 12 from Line 7. This amount is your total unmodified base income or loss. 1300 			V Check this box if you attached the	e Subgroup		
 1 Ordinary income or loss, or equivalent from federal Schedule K. 2 Net income or loss from all rental real estate activities. 3 Net income or loss from other rental activities. 4 Portfolio income or loss. 5 Net IRC Section 1231 gain or loss. 6 All other items of income or loss that were not included in the computation of income or loss on Page 1 of federal Form 1065. See instructions. Identify:			Schedule.			
 2 Net income or loss from all rental real estate activities. 3 Net income or loss from other rental activities. 4 Portfolio income or loss. 5 Net IRC Section 1231 gain or loss. 6 All other items of income or loss that were not included in the computation of income or loss on Page 1 of federal Form 1065. See instructions. Identify: 7 Add Lines 1 through 6. This is your ordinary income or loss. 7	▼	Step 2: Figure your ordinary income or loss	(Whol	e dollars only)		
 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify:	re.	1 Ordinary income or loss, or equivalent from federal Schedule K.	1			
 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify:	V he					
 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify:	065-					
 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify:	Ē					
 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify:	orm	-	-	000		
 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify:	Ъ			•00		
 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify:	nt ar					
 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify:	/mer					
 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify:	. pay		8	•00		
 10 Interest on investment indebtedness. 11 All other items of expense that were not deducted in the computation of ordinary income or loss on Page 1 of federal Form 1065. See instructions. Identify:	your	9 Expense deduction under IRC Section 179	9			
 Page 1 of federal Form 1065. See instructions. Identify:	ach	I0 Interest on investment indebtedness.	10			
 Page 1 of federal Form 1065. See instructions. Identify:	Atta	11 All other items of expense that were not deducted in the computation of or	linary income or loss on			
13 Subtract Line 12 from Line 7. This amount is your total unmodified base income or loss. 1300		Page 1 of federal Form 1065. See instructions. Identify:	11			
IR NS DR This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this		-				
				<u>00</u>		
· · · · · · · · · · · · · · · · · · ·				Page 1 of 5		

14	Enter your unmodified base income or loss from Line 13.			14	<u>•00</u>	
15	State, municipal, and other interest income excluded from Line 14. 150					
16	6 Illinois taxes deducted in arriving at Line 14. See instructions. 16				•00	
17	Illinois Special Depreciation addition. Attach Form IL-4562.				<u>•00</u>	
18					<u>•00</u>	
19	Distributive share of additions. Attach Schedule(s) K-1-P or K-1-T.	19	<u>•00</u>			
20	Guaranteed payments to partners from federal Form 1065.			20	<u>•00</u>	
21	The amount of loss distributable to a partner subject to replacement tax. A	ttach Schedule	3.	21	<u>•00</u>	
22				22	•00	
23	Add Lines 14 through 22. This amount is your income or loss.			23	<u>•00</u>	
Step	5: Figure your base income or loss					
-	Interest income from U.S. Treasury or other exempt federal obligations.	24	•00			
	August 1,1969, valuation limitation amount. Attach Schedule F.	25	•00			
	Personal service income or reasonable allowance for compensation					
	of partners.	26	•00			
27	Share of income distributable to a partner subject to replacement tax.					
	Attach Schedule B.	27	•00			
28	River Edge Redevelopment Zone Dividend subtraction.					
	Attach Schedule 1299-A.	28	•00			
29	High Impact Business Dividend subtraction. Attach Schedule 1299-A.	29	•00			
30	Illinois Special Depreciation subtraction. Attach Form IL-4562.	30	•00			
31	Related-Party Expenses subtraction. Attach Schedule 80/20.	31	•00			
32	Distributive share of subtractions. Attach Schedule(s) K-1-P or K-1-T.	32	•00			
33		33	•00			
34	Total subtractions. Add Lines 24 through 33.			34	•00	
35	Base income or loss. Subtract Line 34 from Line 23.			35	<u>•00</u>	
	A If the amount on Line 35 is derived inside Illinois only, check the	nis box and ente	r the amount	from Step 5,		
	Line 35 on Step 7, Line 47. You may not complete Step 6. (You					
STO	<i><u>≡Note</u></i> If you are a unitary filer, do not check this box. Check the	he box on Line E	B and comple	ete Step 6.		
	B If any portion of the amount on Line 35 is derived outside Illino	•	•	check this box		
	and complete <u>all lines</u> of Step 6. (Do not leave Lines 40 through	n 42 blank.) See i	nstructions.			
Step	6: Figure your income allocable to Illinois (Complete only if you che	ecked the box on L	ine B, above.)			
36	Nonbusiness income or loss. Attach Schedule NB.			36	<u>•00</u>	
37	Business income or loss included in Line 35 from non-unitary partnerships	s, partnerships				
	included on a Schedule UB, S corporations, trusts, or estates. See instruct	tions.		37	<u>•00</u>	
38	Add Lines 36 and 37.			38	<u>•00</u>	
39	Business income or loss. Subtract Line 38 from Line 35.			39	•00	
40	1 Total sales everywhere. This amount cannot be negative. 40					
41	Total sales inside Illinois. This amount cannot be negative. 4100					
42	42 Apportionment factor. Divide Line 41 by Line 40. Round to six decimal places. 42					
43	Business income or loss apportionable to Illinois. Multiply Line 39 by Line 42. 43			<u>•00</u>		
44	Nonbusiness income or loss allocable to Illinois. Attach Schedule NB. 44			<u>•00</u>		
45	Business income or loss apportionable to Illinois from non-unitary partnerships, partnerships					
	included on a Schedule UB. S corporations. trusts. or estates. See instruct	tions		45	•00	

Step 4: Figure your income or loss

•00

45 ____

46 ____



Step 7	: Figure your net income	
47	Base income or net loss from Step 5, Line 35, or Step 6, Line 46.	47 <u>•00</u>
48	Illinois net loss deduction. If Line 47 is zero or a negative amount, enter zero. Attach Schedule NLD. Check this box and attach a detailed statement if you have merged losses.	48
49	Income after NLD. Subtract Line 48 from Line 47.	49
50	Enter the amount from Step 5, Line 35.	50 • <u>00</u>
51	Divide Line 47 by Line 50. Round the result to six decimal places. This figure cannot be greater than one.	51
52	Exemption allowance. See instructions before completing.	52
53	Net income. Subtract Line 52 from Line 49.	53
Step 8	: Figure your net replacement tax (Skip this section if you are an investment partnership.)	
54	Replacement tax. Multiply Line 53 by 1.5% (.015).	54
55	Recapture of investment credits. Attach Schedule 4255.	55 • <u>00</u>
	Replacement tax before investment credits. Add Lines 54 and 55.	56 00
	Investment credits. Attach Form IL-477.	57
	Net replacement tax. Subtract Line 57 from Line 56. If the amount is negative, enter zero.	58 00
): Figure the taxes, withholding, and penalty you owe	
59	Withholding. Attach Schedule B. See instructions.	
	a Pass-through withholding you owe on behalf of your members 59a	
	b Investment partnership withholding 59b00	
	Total Withholding. Add Lines 59a and 59b.	59 00
60	Pass-through entity income. See instructions.	
61	Pass-through entity tax. See instructions.	• <u>00</u>
-	Total net replacement tax, withholding, and pass-through entity tax you owe. Add Lines 58, 59, and 61.	62 00
	Underpayment of estimated tax penalty from Form IL-2220. See instructions.	63 00
	Total taxes, withholding, entity tax, and penalty. Add Lines 62 and 63.	6400
-	0: Figure your refund or balance due	
65	Payments. See instructions.	
	a Credits from previous overpayments. 65a00	
	b Total payments made before the date this return is filed. 65b00	
	c Pass-through withholding reported to you. Attach Schedule(s) K-1-P or K-1-T. 65c00	
	d Illinois income tax withholding. Attach Form(s) W-2G. 65d00	
66	Total payments. Add Lines 65a through 65d.	66 • <u>00</u>
67	Overpayment. If Line 66 is greater than Line 64, subtract Line 64 from Line 66.	67 • <u>00</u>
68	Amount to be credited forward. See instructions. Check this box and attach a detailed statement if this carryforward is going to a different FEIN.	• 68 • <u>00</u> 🚸
69	Refund. Subtract Line 68 from Line 67. This is the amount to be refunded.	69
70	Complete to direct deposit your refund	
	Routing Number	
	Account Number	
71	Tax Due. If Line 64 is greater than Line 66, subtract Line 66 from Line 64. This is the amount you owe. <i>Special</i> Note	71• <u>00</u> provided.
Step '	1: Sign below - Under penalties of perjury, I state that I have examined this return and, to the best of my knowledg	e it is true correct and complete
Sign		Check if the Department
Here		may discuss this return with the
	Signature of partner Date (mm/dd/yyyy) Title Phone	paid preparer shown in this step.
Daid		Check if
Paid	Print/Type paid preparer's name Paid preparer's signature Date (mm/dd/yyyy) St	elf-employed Paid Preparer's PTIN
Prepa Use (Firm's name	EIN 🕨
036 (Firm's address Firm's	ohone▶()
_	If a payment is enclosed, mail your Form IL-1065 to: ILLINOIS DEPARTMENT OF REVENUE PO BOX 19053 SPRINGFIELD IL 62794-9053 ILLINOIS DEPARTMENT PO BOX 19051 SPRINGFIELD IL 62794-9053	IENT OF REVENUE
	IL-1065 (R-12/24)	Page 3 of 5



Attach to your Form IL-1065 or Form IL-1120-ST.

Partners' or Shareholders' Information



Month Year IL Attachment No. 1

Enter your name as shown on your Form IL-1065 or Form IL-1120-ST.

Enter your federal employer identification number (FEIN).

Read this information first

- You must read the Schedule B instructions and complete Schedule(s) K-1-P and Schedule(s) K-1-P(3) or Schedule(s) K-1-P(4) before completing this schedule.
- You must complete Section B of Schedule B and provide all the required information for your partners or shareholders before completing Section A of Schedule B.
- Investment partnerships should attach documentation to their return that supports their status as an investment partnership.
- **ENOTE** Failure to follow these instructions may delay the processing of your return or result in you receiving further correspondence from the Illinois Department of Revenue. You may also be required to submit further information to support your filing.

Section A: Total members' information (from Schedule(s) K-1-P and Schedule B, Section B)

Before completing this section you must first complete Schedule(s) K-1-P, Schedule(s) K-1-P(3) and Schedule B, Section B. You will use the amounts from those schedules when completing this section. See instructions before completing.

Totals from Schedule(s) K-1-P

STOP

1 Enter the total of all nonbu		er the total of all nonbusiness income or loss you reported on Schedule(s) K-1-P for your members.	1	
2	Enter the total of all income and replacement tax credits you reported on Schedule(s) K-1-P for your members.			
Тс	otals	from Schedule B, Section B		
3	Add the amounts shown on Schedule B, Section B, Line E for all partners or shareholders on all pages for which you have checked the box indicating the entity is subject to Illinois replacement tax or an ESOP. Enter the total here.		3	
4	Enter the total pass-through withholding or investment partnership withholding you reported on all pages of your Schedule B, Section B, Line J for your			
	a.	nonresident individual members.	4a	
	b.	nonresident estate members.	4b	
	c.	partnership and S corporation members.	4c	
	d.	nonresident trust members.	4d	
	e.	C corporation members.	4e	
5	 Add Line 4a through Line 4e. This is the total pass-through withholding or investment partnership withholding you owe on behalf of all your nonresident partners or shareholders. This amount should match the total amount from Schedule B, Section B, Line J for all nonresident partners or shareholders on all pages. Enter the total here and on; Form IL-1120-ST (Form IL-1120-ST-X), Line 59; Form IL-1065 (Form IL-1065-X), Line 59a, for pass-through withholding; or 		5	
~	Form IL-1065 (Form IL-1065-X), Line 59b, for investment partnership withholding.			
	Enter the total pass-through entity tax credit paid on all pages of Schedule B, Section B, Line K.		6	
7		er the total pass-through entity tax credit received and distributed on all pages of Schedule B, tion B, Line L.	7	

Attach all pages of Schedule B, Section B behind this page.





Ente	er your name as shown on y	our Form IL-1065 or Form IL-1120-ST.	Enter your fede	Enter your federal employer identification number (FEIN).		
Section B: Members' information (See instructions before completing.)						
		Member 1	Member 2	Member 3		
A	Name _					
	C/O					
	Address 1					
	Address 2					
	City _					
	State, ZIP					
в	Entity type					
С	SSN/FEIN _					
D	Subject to Illinois replacement tax or an ESOP					
E	Member's distributable amount of base income or loss					
F	Excluded from pass-through withholding					
G	Share of Illinois income subject to pass-through withholding or investment partnership withholding					
н	Pass-through withholding or investment partnership withholding before credits					
I	Distributable share of credits					
J	Pass-through withholding or investment partnership withholding amount					
κ	PTE tax credit paid to members					
L	PTE tax credit received and distributed to members					

<u>ENote</u> If you have more members than space provided, attach additional copies of this page as necessary.