

For fiscal year or other taxable period beginning M M / D D 2019 and ending M M / D D / Y Y Y Y

IDENTIFICATION AND INFORMATION

Form with sections A1-A6, B1-B8, C1-C4, D1-D2, E1-E4, F1-F3, G1-G3. Includes fields for Name of Corporation, Federal Employer Identification Number, Address, and various return type checkboxes.

TAXABLE INCOME AND TAX COMPUTATION

Table with 12 rows for taxable income and tax computation. Columns include description, line number, and amount/percentage. Total tax paid is .00.

TAX PAYMENTS AND CREDITS

Table with 4 rows for tax payments and credits. Includes 13a. Credit forward (.00), 13b. Estimated payments (.00), 13c. Extension payment (.00), and 13d. Tax paid by partnership (.00). Total tax paid 13e is .00.

BALANCE DUE OR OVERPAYMENT

Form with sections BALANCE DUE, OVERPAYMENT, CREDIT FORWARD, DONATION, REFUND, ELECTRONIC REFUND OR PAYMENT DATA, and DISCLOSURE. Includes fields for balance due, overpayment, donation amounts, refund details, and disclosure checkboxes.

I declare that I have examined this return (including accompanying schedules) and to the best of my knowledge and belief, it is true, correct and complete. If prepared by a person other than the taxpayer, this declaration is based on all information of which the preparer has any knowledge.

Form with sections 21a-21d, 22a-22f, 22g-22h, 23. NACTP software number. Includes fields for date signed, signature of corporate officer, firm name, address, and date prepared.

Return is due April 30, 2020 or the last day of the fourth month after the close of tax year.

MAIL TO: City of Lansing Income Tax Division, 124 W Michigan Ave, 1st Floor, Lansing, MI 48933

SCHEDULE S – SUBCHAPTER S CORPORATION INCOME		
Schedule S is used by Subchapter S corporations to reconcile the amount reported on line 1, page 1, L-1120, with federal Form 1120S and Schedule K of federal 1120S.		
Attach federal Form 1120S and Schedule K of federal 1120S.		
1. Ordinary income (loss) from trade or business (Perfederal 1120S)	1.	.00
2. Income (loss) per Schedule K, federal 1120S, lines 2 through 10	2.	.00
3. Total income (loss) (Add lines 1 and 2)	3.	.00
4. Deductions per Schedule K, federal 1120S	4.	.00
5. Taxable income before net operating loss deduction and special deductions (Subtract line 4 from line 3; enter here and on page 1, line 1)	5.	.00

SCHEDULE C – ADJUSTMENTS PRIOR TO APPORTIONMENT			
Schedule C is used to adjust the income reported on page 1, line 1, to give effect to the requirements of the Lansing Income Tax Ordinance. The period of time used to compute items for Schedule C must be the same as the period of time used to report income on page 1, line 1. Schedule C entries are allowed only to the extent directly related to net income as shown on page 1, line 1.			
Column 1 Add – Items Not Deductible		Column 2 Deduct – Items Not Taxable, Adjustments and Allowable Deductions	
1. All expenses (including interest) incurred in connection with derivation of income not subject to city income tax (do not include nonbusiness expenses reported on line 5b.)	.00	7. Interest from U.S. obligations and from United States governmental units	.00
2. Lansing income tax paid or accrued	.00	8. Dividends received deduction	.00
3. Nondeductible portion of loss, from sale or exchange of property acquired prior to effective date of ordinance	.00	9. Dividend gross up of foreign taxes	.00
4. Reserved	.00	10. Foreign tax deduction	.00
5. Other (Identify & list amount or submit sch.)		11. Nontaxable portion of gain from sale or exchange of property acquired prior to effective date of ordinance	.00
a. Partnership loss included in corporation's income reported on page 1, line 1	.00	12. Other (Identify & list amount or submit schedule)	
b.	.00	a. Partnership income included in corporation's income reported on page 1, line 1	.00
c.	.00	b. Wages taken as a credit for IRS tax purposes	.00
6. Total additions (Add lines 1 through 5d; enter here and on page 1, line 2)	.00	c.	.00
		13. Total deductions (Add lines 7 through 12d; enter here and on page 1, line 4)	.00

SCHEDULE D – BUSINESS INCOME APPORTIONMENT			
	Column 1 Located Everywhere	Column 2 Located in LANSING	Column 3 Percentage (Column 2 divided by column 1)
1. a. Average net book value of real and tangible personal property	1a.		
b. Gross annual rent paid for real property only, multiplied by 8	1b.		
c. Totals (Add lines 1a and 1b)	1c.		%
2. Total wages, salaries, commissions and other compensation of all employees	2.		%
3. Gross receipts from sales made or services rendered	3.		%
4. Total percentages (Add the three percentages computed in column 3, lines 1c, 2 and 3)		4.	%
5. Business apportionment percentage (Line 4 divided by number of factors, usually 3; enter here and on page 1, line 6)		5.	%
In determining the business apportionment percentage (Line 5), a factor shall be excluded from the computation only when such factor does not exist anywhere insofar as the taxpayer's business operation is concerned. In such cases, the sum of the remaining percentages shall be divided by the number of factors actually used.			
6. In the case of a taxpayer authorized by the Income Tax Administrator to use one of the special formulas, attach an explanation and use the lines provided below:			
6a. Numerator		6c. Percentage (Divide line 6a by 6b; enter here and on pg. 1, ln. 6)	%
6b. Denominator		6d. Date of Administrator's approval letter	

SCHEDULE G – SUMMARY OF ADJUSTMENTS AFTER APPORTIONMENT		
1. Allocated partnership income (Enter income as a positive and losses as a negative) (From Schedule G, line 1, Explanation, column 4, line 7)	1.	.00
2. Allocated capital loss carryover (Enter as a negative amount) (From Schedule G, line 2, Explanation, column 5, line 8)	2.	.00
3. Allocated net operating loss deduction (Enter as a negative amount) (From Schedule G, line 3, Explanation, column 5, line 8)	3.	.00
4. Total adjustments (Add lines 1 through 4; enter here and on page 1, line 10)	4.	.00

EXPLANATION FOR SCHEDULE G – ADJUSTMENTS AFTER APPORTIONMENT

Schedule G, line 1, Explanation - Allocated Partnership Income/Loss

A corporation that is a partner in a business activity taxed as partnership by the city must report their allocated portion of the partnership's current year city taxable income or loss.

	Column 1 Name of Partnership	Column 2 Partnership's Tax Identification Number	Column 3 City Allocated Partnership Income or Loss	Column 4 Total
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.	Total allocated partnership income/loss (Add Lines 1-10, enter here and on pg. 2, Sch G, line 1)			

Schedule G, line 2, Explanation - Capital Loss Carryovers

Capital loss carryovers must be allocated at the apportionment percentage of the tax year in which the loss was generated. Enter current year capital loss carryovers as negative amounts.

	Column 1 Tax Year of Capital Loss	Column 2 Capital Loss Carryover Generated	Column 3 Previously Utilized Capital Loss Carryover	Column 4 Remaining Capital Loss Carryover	Column 5 Total Capital Loss Carryover Used this Year
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.	Total capital loss available (Add col. 5, lines 1-10, enter here and on pg. 2, Sch. G, line 2)				

Schedule G, line 3, Explanation - Allocated Net Operating Loss (NOL) Deduction

NOL's must be allocated at the apportionment percentage of the tax year in which the NOL was generated. Enter NOL's as negative amounts.

	Column 1 Tax Year of NOL	Column 2 NOL Generated	Column 3 Previously Utilized NOL	Column 4 Remaining NOL	Column 5 NOL Used this Year
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.	Net operating loss deduction used this tax year (Add col. 5, lines 1-10, enter here and on pg. 2, Sch. G, line 3)				

SCHEDULE I - CONSOLIDATED RETURN - IDENTIFICATION OF INCLUDED ENTITIES

Revised 01/17/2020

E N T I T Y R	NAME AND ADDRESS OF ALL INCLUDED ENTITIES
	Enter data for each shareholder. Enter the entity tax ID, name, DBA, ownership percentage, and address as follows: a) tax ID; b) name; c) DBA; d) ownership percentage; e) street number, street name and suite number; f) city; g) state; and h) zip code.
	Enter entity's tax ID, name, DBA, ownership percentage and address as per example below

	a Entity Tax ID	b Entity name	c Entity DBA	d Ownership %
	e Street number, street name and apartment or suite number		f City	g State
0				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

SCHEDULE L - LOCATION OF CORPORATE BUSINESS ACTIVITY IN CITY

Revised 01/17/2020

L O N G C O R P O R A T I O N	LISTING OF ALL LOCATIONS WHERE CORPORATION HAS EMPLOYEES OR PROPERTY IN THE CITY								
	Enter data for each location in the city where an entity included in this return has: an employee (including leased employees, professional employee organization employees, etc.); and/or personal or real property leased or owned. Enter the entity's tax ID, name, DBA, number of employees, and physical address as follows: a) tax ID; b) name; c) DBA; d) number of employees; e) street number, street name and suite number; f) city; g) state; and h) zip code. Enter entity's tax ID, name, DBA, number of employees and location address in the city as per example below								
	a	b	c	d	e	f	g	h	
0	Entity Tax ID	Entity name	Entity DBA	# of employees	Street number, street name and apartment or suite number		City	State	Zip code
1	a	b	c	d	e		f	g	h
2	a	b	c	d	e		f	g	h
3	a	b	c	d	e		f	g	h
4	a	b	c	d	e		f	g	h
5	a	b	c	d	e		f	g	h
6	a	b	c	d	e		f	g	h
7	a	b	c	d	e		f	g	h
8	a	b	c	d	e		f	g	h
9	a	b	c	d	e		f	g	h
10	a	b	c	d	e		f	g	h
11	a	b	c	d	e		f	g	h
12	a	b	c	d	e		f	g	h
13	a	b	c	d	e		f	g	h
14	a	b	c	d	e		f	g	h
15	a	b	c	d	e		f	g	h

Corporation's name

Corporation's tax ID

2019 Form L-1120 Schedule N

SCHEDULE N - SUPPORTING NOTES AND STATEMENTS

Revised 01/17/2020

Blank area for supporting notes and statements.