

Florida Corporate Income/Franchise Tax Return

01-2345678 FEIN

Company ID Here F-1120, R. 01/25 Rule 12C-1.051 Florida Administrative Code Effective 01/25 Page 1 of 6

For calendar year 2024 or tax year beginning , 2024 ending

85XX02024123100020050377301234567800009

Name FDOR - Corporate Test **Address** 5050 W Tennessee Street $\textbf{City/State/ZIP} \ \texttt{Tallahassee,} \ \texttt{FL} \ 32399-0141$

Check here if any changes have been made to name or address

Computation of Florida Net Income Tax

1.	Federal taxable income (see instructions)		
	Attach pages 1–6 of federal return	Check here if negative	99999.99
2.	State income taxes deducted in computing federal taxable income		
	(attach schedule)	Check here if negative	99999.99
3.	Additions to federal taxable income (from Schedule I)	Check here if negative	99999.99
4.	Total of Lines 1, 2 and 3	Check here if negative	99999.99
5.	Subtractions from federal taxable income (from Schedule II)	Check here if negative	99999.99
6.	Adjusted federal income (Line 4 minus Line 5)	Check here if negative	99999.99
7.	Florida portion of adjusted federal income (see instructions)	Check here if negative	99999.99
8.	Nonbusiness income allocated to Florida (from Schedule R)	Check here if negative	99999.99
9.	Florida exemption		99999.99
10.	Florida net income (Line 7 plus Line 8 minus Line 9)		99999.99
11.	Tax due: 5.5% of Line 10		99999.99
	Credits against the tax (from Schedule V)		99999.99
	Total corporate income/franchise tax due (Line 11 minus Line12)		99999.99
14.	a) Penalty: F-2220 b) Other		
	c) Interest: F-2220 d) Other Line 14 Total •		99999.99
15.	Total of Lines 13 and 14		99999.99
16.	Payment credits: Estimated tax payments 16a \$		
	Tentative tax payment 16b \$		99999.99
17.	Total amount due: Subtract Line 16 from Line 15. If positive, enter amount due I		
	If the amount is negative (overpayment), enter on Line 18 and/or Line 19		99999.99
	Credit: Enter amount of overpayment credited to next year's estimated tax h		99999.99
19.	Refund: Enter amount of overpayment to be $\ensuremath{\textit{refunded}}$ here and on payment	coupon	99999.99

Company ID Here

Payment Coupon for Florida Corporate Income Tax Return YEAR ENDING___/__/

Do Not Detach

F-1120 R. 01/25

To ensure proper credit to your account, enclose your check with tax return when mailing.

Name FDOR - Corporate Test 5050 W Tennessee Street **Address** City/State/ZIP Tallahassee, FL 32399-0141 If 6/30 year end, return is due 1st day of the 4th month after the close of the taxable year, otherwise return is due 1st day of the 5th month after the close of the taxable year.

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	This return is considered incomplete un eturn is not signed, or improperly signed and verified, it will be subject to a penalty rust be completed in its entirety.			•
	Under penalties of perjury, I declare that I have examined this return, including complete. Declaration of preparer (other than taxpayer) is based on all inform		ing schedules and statements, and to the best of my knowledge and belief, it is true, correct, and n preparer has any knowledge.	
Sign he	ere Signature of officer Date)	Title	
Paid prepare	Preparer's signature Date)	Preparer check if self-employed Preparer's PTIN	
only	Firm's name (or yours if self-employed) and address		FEIN ZIP	_
	All Taxpayers Must Answer Questions	s A Throu	ugh L Below — See Instructions	
B. C. D. E.	State of incorporation: Florida Secretary of State document number: Florida consolidated return? YES NO Initial return Final return (final federal return filed) Principal Business Activity Code (as pertains to Florida) A Florida extension of time was timely filed? YES NO Corporation is a member of a controlled group? YES NO If yes, attach list.		Part of a federal consolidated return? YES NO If yes, provide: FEIN from federal consolidated return: Name of corporation: The federal common parent has sales, property, or payroll in Florida? YES NO Location of corporate books: City: State: ZIP: Taxpayer is a member of a Florida partnership or joint venture? YES NO Enter date of latest IRS audit: a) List years examined: Contact person concerning this return: a) Contact person telephone number: () b) Contact person e-mail address:	
		L.	Type of federal return filed 1120 1120S or	

Save Time and Paperwork with Electronic Filing

You can file and pay your Florida corporate income tax return (Florida Form F-1120) electronically through the Internal Revenue Service's (IRS) Modernized e-File (MeF) Program using electronic transmitters approved by the IRS and the Florida Department of Revenue. The Department also has an online application for corporate income tax payments and filing Florida forms F-1120ES (Declaration/Installment of Florida Estimated Income/Franchise Tax), and F-7004 (Florida Tentative Income/Franchise Tax Return and Application for Extension of Time to File Return).

If Filing Paper Return Where to Send Payments and Returns

Make check payable to and mail with return to:

Florida Department of Revenue 5050 W Tennessee Street Tallahassee FL 32399-0135

If you are requesting a refund (Line 19), send your return to:

Florida Department of Revenue PO Box 6440 Tallahassee FL 32314-6440

Remember:

- Make your check payable to the Florida Department of Revenue.
- Write your FEIN on your check.
- Sign your check and return.
- Attach a copy of your federal return.
- Attach a copy of your Florida Form F-7004 (extension of time) if applicable.



FEIN 01-2345678

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NAME FEIN TAXABLE YEAR ENDING

NAMI	FEIN	TAXABLE YEAR ENDING	
Sc	chedule I — Additions and/or Adjustments to Federal Taxable In	ncome	
1.	Interest excluded from federal taxable income (see instructions)	1.	
2.	Undistributed net long-term capital gains (see instructions)	2.	
3.	Net operating loss deduction (attach schedule)	3.	
4.	Net capital loss carryover (attach schedule)	4.	
5.	Excess charitable contribution carryover (attach schedule)	5.	
6.	Employee benefit plan contribution carryover (attach schedule)	6.	
7.	Enterprise zone jobs credit (Florida Form F-1156Z)	7.	
8.	Ad valorem taxes allowable as an enterprise zone property tax credit (Florida Form F-1158Z)	8.	
9.	Guaranty association assessment(s) credit	9.	
10.	Rural and/or urban high-crime area job tax credits	10.	
11.	State housing tax credit	11.	
12.	Florida tax credit scholarship program credit (credit for contributions to nonprofit scholarship-funding organic	rganizations) 12.	
13.	New worlds reading initiative credit	13.	
14.	Strong families tax credit (credit for contributions to eligible charitable organizations)	14.	
15.	Live local program credit	15.	
16.	New markets tax credit	16.	
17.	Research and development tax credit	17.	
18.	Experiential learning tax credit program	18.	
19.	Credit for qualified railroad reconstruction or replacement expenditures	19.	
20.	Residential graywater system tax credit	20.	
21.	Credit for manufacturing of human breast milk derived human milk fortifiers	21.	
22.	s.168(k), IRC, special bonus depreciation	22.	
23.	Depreciation of qualified improvement property (see instructions)	23.	
24.	Expenses for business meals provided by a restaurant (see instructions)	24.	
25.	Film, television, and live theatrical production expenses (see instructions)	25.	
26.	Other additions (attach schedule)	26.	
27.	Total Lines 1 through 26. Enter total on this line and on Page 1, Line 3.	27.	
		· · · · · · · · · · · · · · · · · · ·	

S	chedule II — Subtractions from Federal Taxable Income	
1.	Gross foreign source income less attributable expenses (a) Enter s. 78, IRC, income \$	1.
2.	Gross subpart F income less attributable expenses (a) Enter s. 951, IRC, subpart F income \$	
	(b) less direct and indirect expenses \$ Total ▶	2.
No 3.	te: Taxpayers doing business outside Florida enter zero on Lines 3 through 6, and complete Schedule IV. Florida net operating loss carryover deduction (see instructions)	3.
4.	Florida net capital loss carryover deduction (see instructions)	4.
5.	Florida excess charitable contribution carryover (see instructions)	5.
6.	Florida employee benefit plan contribution carryover (see instructions)	6.
7.	Nonbusiness income (from Schedule R, Line 3)	7.
8.	Eligible net income of an international banking facility (see instructions)	8.
9.	s. 168(k), IRC, special bonus depreciation (see instructions)	9.
10	. Depreciation of qualified improvement property (see instructions)	10.
11.	Film, television, and live theatrical production expenses (see instructions)	11.
12	. Other subtractions (attach schedule)	12.
13	. Total Lines 1 through 12. Enter total on this line and on Page 1, Line 5.	13.



8.

9.

Total carryovers apportioned to Florida (add Lines 4 through 7)

Adjusted federal income apportioned to Florida (Line 3 less Line 8; see instructions)

NAME FEIN TAXABLE YEAR ENDING

Sc	hedule III — Appo	ortionment of A	djusted Fed	eral I	ncome					
III-A	For use by taxpayers doing	g business outside Flor	ida, except those	providin	g insurance or	transpor	tation services.			
		(a) WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYW (Denominato		(c) Col. (a) ÷ Col. Rounded to Six Places		,	(d) Weight r in Column (b) is ze age 9 of the instruc		(e) Weighted Factors Rounded to Six Decimal Places
1. F	Property (Schedule III-B below)						X 2	5% or		
2. F	Payroll							5% or		
3. 8	Sales (Schedule III-C below)						X 5	60% or		
4. <i>A</i>	Apportionment fraction (Sum	of Lines 1, 2, and 3, Colu	mn [e]). Enter here	and on S	Schedule IV, Line	2.				
III-R	For use in computing avera	age value of property (u	se original cost)		WITHIN F	LORIDA		ТОТ	AL EVEF	RYWHERE
0	Tor use in companing avera	ige value of property (u	se original cost).	a. Begi	nning of year	b. E	nd of year	c. Beginning of y	ear	d. End of year
	nventories of raw material, wo	· · · · · · · · · · · · · · · · · · ·	oods							
	Buildings and other depreciab	le assets								
	and owned									
	Other tangible and intangible (1	financial org. only) assets	(attach schedule)							
6. /	Total (Lines 1 through 4) Average value of property a. Add Line 5, Columns (a) an b. Add Line 5, Columns (c) an							6b		
á	Rented property (8 times net a a. Rented property in Florida . b. Rented property Everywher	······································						7b		
á	Total (Lines 6 and 7). Enter or a. Enter Lines 6 a. plus 7 a. al Column (a) for total average b. Enter Lines 6 b. plus 7 b. al Column (b) for total average	nd also enter on Schedul e property in Florida nd also enter on Schedul	le III-A, Line 1, le III-A, Line 1,	8a				8b		
III-C S	Sales Factor							(a) THIN FLORIDA imerator)	то	(b) DTAL EVERYWHERE (Denominator)
1. 8	Sales (gross receipts)							N/A		
2. 8	Sales delivered or shipped to	Florida purchasers								N/A
3. (Other gross receipts (rents, ro	yalties, interest, etc. whe	en applicable)							
4. 7	TOTAL SALES (Enter on School	edule III-A, Line 3, Colum	nns [a] and [b])							
	Special Apportionment Frac				(a) WITHIN FLO	RIDA	(b) TOTAL	EVERYWHERE		ORIDA Fraction ([a] ÷ [b]) nded to Six Decimal Places
	nsurance companies (attach	copy of Schedule T–Anni	ual Report)							
2. 1	Fransportation services									
S	chedule IV — Con	nputation of Flo	orida Portio	n of A	diusted F	edera	l Income			
1.	Apportionable adjusted fed	•			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1.		
2.	Florida apportionment frac	ction (Schedule III-A, Line	÷ 4)					2.		
3.	Tentative apportioned adju	usted federal income (mu	Itiply Line 1 by Line	2)				3.		
4.	Net operating loss carryov	er apportioned to Florida	(attach schedule;	see instru	uctions)			4.		
5.	Net capital loss carryover	apportioned to Florida (a	ttach schedule; see	e instructi	ions)			5.		
6.	Excess charitable contribu	ition carryover apportione	ed to Florida (attach	n schedu	le; see instruction	ns)		6.		
7. Employee benefit plan contribution carryover apportioned to Florida (attach schedule; see instructions)				7.						

8. 9.



NAME FEIN TAXABLE YEAR ENDING

Sc	hedule V — Credits Against the Corporate Income/Franchise Tax	
1.	Florida health maintenance organization consumer assistance assessment credit (attach assessment notice)	1.
2.	Capital investment tax credit (attach certification letter)	2.
3.	Enterprise zone jobs credit (from Florida Form F-1156Z attached)	3.
1.	Community contribution tax credit (attach certification letter)	4.
5.	Enterprise zone property tax credit (from Florida Form F-1158Z attached)	5.
	Rural job tax credit (attach certification letter)	6.
	Urban high-crime area job tax credit (attach certification letter)	7.
	Hazardous waste facility tax credit	8.
	Florida alternative minimum tax (AMT) credit	9.
0.	Contaminated site rehabilitation tax credit (voluntary cleanup tax credit) (attach tax credit certificate)	10.
1.	Child care tax credits	11.
2.	State housing tax credit (attach certification letter)	12.
3.	Florida tax credit scholarship program credit (credit for contributions to nonprofit scholarship-funding organizations) (attach certific	ate) 13.
4.	New worlds reading initiative credit (attach certificate)	14.
5.	Strong families tax credit (credit for contributions to eligible charitable organizations) (attach certificate)	15.
<u>.</u>	Live local program credit (attach certificate)	16.
7.	New markets tax credit	17.
3.	Research and development tax credit	18.
9.	Experiential learning tax credit	19.
0.	Credit for qualified railroad reconstruction or replacement expenditures	20.
1.	Residential graywater system tax credit	21.
2.	Credit for manufacturing of human breast milk derived human milk fortifiers	22.
3.	Individuals with unique abilities tax credit program	23.
4.	Other credits (attach schedule)	24.
5.	Total credits against the tax (sum of Lines 1 through 24 not to exceed the amount on Page 1, Line 11). Enter total credits on Page 1, Line 12	25.
C	hedule R — Nonbusiness Income	
е	1. Nonbusiness income (loss) allocated to Florida	
	<u>Type</u>	<u>Amount</u>
_		



NAME FEIN TAXABLE YEAR ENDING

	Estimated Tax Worksl	neet For Taxable Years	Beginning On or After Ja	nuai	ry 1, 2025
1. 2. 3. 4.	Florida exemption \$50,000 (Member Florida Form F-1120N) Estimated Florida net income (Line Total Estimated Florida tax (5.5% o	s of a controlled group, see instru- 1 less Line 2) f Line 3)	uctions on Page 15 of . \$. 2. 3.	\$
5.	Computation of installments:				
	Payment due dates and payment amounts:	Last day of 6 th month - Enter (Last day of 9 th month - Enter (th month, th - Enter 0.25 of Line 4 0.25 of Line 4 0.25 of Line 4 0.25 of Line 4	5b. 5c.	
	NOTE: If your estimated tax should below to determine the amended a		•		
1. 2.	Amended estimated tax Less: (a) Amount of overpayment from I			1.	\$
3. 4.	(b) Payments made on estimated(c) Total of Lines 2(a) and 2(b)Unpaid balance (Line 1 less Line 2	tax declaration (Florida Form F- (c))	2a \$ -1120ES) 2b \$ ents)	2c. 3.	\$

References

The following documents were mentioned in this form and are incorporated by reference in the rules indicated below.

The forms are available online at **floridarevenue.com/forms**.

Form F-2220	Underpayment of Estimated Tax on Florida Corporate Income/Franchise Tax	Rule 12C-1.051, F.A.C.
Form F-7004	Florida Tentative Income/Franchise Tax Return and Application for Extension of Time to File Return	Rule 12C-1.051, F.A.C.
Form F-1156Z	Florida Enterprise Zone Jobs Credit Certificate of Eligibility for Corporate Income Tax	Rule 12C-1.051, F.A.C.
Form F-1158Z	Enterprise Zone Property Tax Credit	Rule 12C-1.051, F.A.C.
Form F-1120N	Instructions for Corporate Income/Franchise Tax Return	Rule 12C-1.051, F.A.C.
Form F-1120ES	Declaration/Installment of Florida Estimated Income/Franchise Tax	Rule 12C-1.051, F.A.C.