

For Calendar Year 2022 or other fiscal year

▶ to ▶

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Check all that apply: Amended return (Include IA 102) Short Period Final Return

Type of Entity: Partnership Limited Liability Company Limited Liability Partnership Corporation Association Estate/Trust Other

Filing Pass-through Return Type: Partnership (IA 1065) S corporation (IA 1120S) Fiduciary (IA 1041)

Pass-through Entity Name and Address

Legal Name Doing Business As

Address

Address 2

City State ZIP County No.

Federal Employer Identification Number (FEIN)

Total number of members: Number of Iowa resident members: Number of Iowa nonresident members: Number of Iowa nonresident members included on this PTE-C:

Enter Dollars and Cents

1. Total Iowa composite tax from IA PTE-C Nonresident Member Schedule, Column I.....	▶ 1	<input type="text"/>	<input type="text"/>
2. Composite credits from K-1s. Include Schedule CC.....	▶ 2	<input type="text"/>	<input type="text"/>
3. Composite credits claimed on 1120F. For franchise filers only.....	▶ 3	<input type="text"/>	<input type="text"/>
4. Composite credits claimed on 1041. For estate/trust filers only.....	▶ 4	<input type="text"/>	<input type="text"/>
5. Net composite credits claimed on this PTE-C return. Line 2 minus lines 3 and 4.....	▶ 5	<input type="text"/>	<input type="text"/>



Pass-through Entity Name

▶ [Text input field]

Entity's FEIN

▶ [Text input field]

Enter Dollars and Cents

6. Overpayment carryforward from prior period. Enter \$0 for tax year 2022.....

▶ 6 [Text input field]

7. Estimated and voucher payments made for tax year 2022.....

▶ 7 [Text input field]

8. Total of payments/credits. Add lines 5, 6, and 7.....

▶ 8 [Text input field]

9. If line 8 is more than line 1, subtract line 1 from line 8. This is the amount you overpaid

▶ 9 [Text input field]

10. Amount of line 9 to be applied to 2023 IA PTE-C return

▶ 10 [Text input field]

11. Amount of line 9 to be REFUNDED. Subtract line 10 from line 9

▶ 11 [Text input field]

11a. Routing number

▶ [Text input field]

11b. Savings Checking

▶ [Text input field]

11c. Account number

▶ [Text input field]

12. If line 1 is more than line 8, subtract line 8 from line 1. This is the TOTAL AMOUNT OF TAX YOU OWE.....

▶ 12 [Text input field]

13. Penalty

▶ 13 [Text input field]

14. Interest

▶ 14 [Text input field]

15. TOTAL AMOUNT DUE. Add lines 12, 13, and 14.....

▶ 15 [Text input field]

I, the undersigned, declare under penalties of perjury or false certificate, that I have examined this return, and, to the best of my knowledge and belief, it is true, correct, and complete.

Authorized person or pass-through representative's name (printed)

▶ [Text input field]

Title

▶ [Text input field]

Phone number

▶ [Text input field]

Signature of authorized person, or pass-through representative

Sign Here

▶ [Text input field]

Date

▶ [Text input field]

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Preparer's signature

Sign Here

▶ [Text input field]

Date

▶ [Text input field]

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Preparer's name (printed)

▶ [Text input field]

Preparer's phone number

▶ [Text input field]

Preparer's Address

▶ [Text input field]

Preparer's PTIN

▶ [Text input field]

City

▶ [Text input field]

State

▶ [Text input field]

ZIP

▶ [Text input field]

Mail to: Income Tax Return Processing, Iowa Department of Revenue, PO Box 9187, Des Moines IA 50306-9187.



