

Note: The draft you are looking for begins on the next page.

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Most forms and publications have a page on IRS.gov: IRS.gov/Form1040 for Form 1040; IRS.gov/Pub501 for Pub. 501; IRS.gov/W4 for Form W-4; and IRS.gov/ScheduleA for Schedule A (Form 1040), for example, and similarly for other forms, pubs, and schedules for Form 1040. When typing in a link, type it into the address bar of your browser, not a Search box on IRS.gov.

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TREASURY/IRS AND OMB USE ONLY DRAFT

Form (Rev. December 2025) Department of the Treasury Internal Revenue Service

Corporation Application for Tentative Refund

Go to www.irs.gov/Form1139 for instructions and the latest information. Do not file with the corporation's income tax return-file separately. Keep a copy of this application for your records.

OMB No. 1545-0123

Name						Employer identification n	umber			
Numbe	r and street. If a P.O. box,	see instructions.			Room or suite no.	Date of incorporation				
City or	town	foreign postal code	Daytime phone number							
1	Reason(s) for filing.	See instructions—at	tach computation.							
а	Net operating loss ((NOL)				\$				
b										
С										
d										
2			overpayment under sect							
а	_									
b										
С										
d	Service center where filed									
3	If this application is for an unused credit created by another carryback, enter ending date for the tax year of the first carryback									
4	business credit that	at was released beca	oreign tax credit, or is t ause of the release of a nded return to carry back	foreign tax	credit? See inst	a general	□ No			
5a	Was a consolidated return filed for any carryback year or did the corporation join a consolidated group? See instructions									
b	If "Yes," enter the tax year ending date and the name of the common parent and its EIN, if different from above. See instructions									
6a			tension of time granted for				☐ No			
b	If "Yes," enter the o	late to which extension	on was granted			· · · · <u></u>				
С	Enter the date Form	n 1138 was filed .				<u></u>				
d	Unpaid tax for which	ch Form 1138 is in eff	ect			\$				
7	If the corporation cl	hanged its accounting	g period, enter the date p	ermission to	change was grar	nted				
8	If this is an applicat	ion for a dissolved co	orporation, enter date of o	dissolution .		· · · ·				
9			Tax Court for the year o		ich the carryba	ck is to be	□ No			
10		ecrease in tax due to es," attach Form 888	a loss or credit resulting			required to	□ No			
For Pa	perwork Reduction A	ct Notice. see separat	e instructions.	Cat. No. 11170F	For	m 1139 (Rev. 12-2025) Cr	eated 5/30/2			

TREASURY/IRS AND OMB USE ONLY DRAFT

Page 2 Form 1139 (Rev. 12-2025)

		Com	putation of De See instruc		X			
Note: If only filing for an unused general business credit (line 1c),			preceding	1	preceding	i	preceding	
		tax year ended		tax year ended		tax year ended		
skip l	ines 11 through 15.	(a) Before carryback	(b) After carryback	(c) Before carryback	(d) After carryback	(e) Before carryback	(f) After carryback	
11	Taxable income from tax return							
12	Capital loss carryback (see instructions)							
13	Subtract line 12 from line 11.							
14	NOL deduction (see instructions)							
15	Taxable income. Subtract line 14 from line 13							
16	Income tax							
17	Alternative minimum tax							
18	Base erosion minimum tax (attach Form 8991)							
19	Add lines 16 through 18							
20	General business credit (see instructions)							
21	Other credits (see instructions)							
22	Total credits. Add lines 20 and 21							
23	Subtract line 22 from line 19.							
24	Personal holding company tax (Sch. PH (Form 1120)) .							
25	Other taxes (see instructions)							

29	Overpayment of tax due to a claim of right adjustment under section 1341(b)(1) (attach computation)										29											
30	Complete the dire	ect	dep	oos	it in	forr	nati	on f	or a	ny i	efu	nd f	rom	line	e(s)	28	and	or	line 29. See i	nstructions.		
а	Routing number														b	Ту	pe:		Checking	☐ Savings		
С	Account number																					

Sign Here

26

27

28

Total tax liability. Add lines

Enter amount from "After carryback" column on line 26 for each year

Decrease in tax. Subtract line 27 from line 26

23 through 25

Under penalties of perjury, I declare that I have examined this application and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete.

	Signature of officer	Date	Title	
Paid	Preparer's name	Preparer's signature	Date	Check if self-employed PTIN
Prepare				Firm's EIN
Use On	Firm's address	Phone no.		