

TY2024 1120-POL MeF ATS Scenario 2

TaxPeriodEndDt -- 12/31/2024

PreparerFirmGrp

PreparerFirmEIN -- n/a

PreparerFirmName -- n/a

PreparerFirmUSAddress -- none

MultSoftwarePackagesUsedInd -- no

OriginatorGrp

EFIN -- as assigned

OriginatorTypeCd -- ERO

PractitionerPINGrp

EFIN -- as assigned

PIN -- as assigned

PinEnteredByCd -- Taxpayer

SignatureOptionCd -- Pin Number

ReturnTypeCd -- 1120-POL

TaxPeriodBeginDt -- 1/1/2024

Filer

EIN -- 00-9000004

BusinessName -- National Hyrax Association

BusinessNameControlTxt -- NATI

USAddress -- 1234 Weeping Willow Lane, Anaheim, CA 92812

BusinessOfficerGrp

PersonNm -- Test U. Phrozintows

PersonTitleTxt -- Treasurer

PhoneNum -- 714-555-1212

EmailAddressTxt --

SignatureDt -- self-select

TaxpayerPIN -- self-select

DiscussWithPaidPreparerInd -- Y

PreparerPersonDetail

PreparerPersonNm -- Test J. Caesar

PTIN -- P99999998

PhoneNum -- 703-555-1212

EmailAddressTxt --

PreparationDt -- self select

SelfEmployedInd -- Y

TY2024 1120-POL MeF ATS Scenario 2 cont.

SigningOfficerGrp

PersonFirstNm - Test

PersonLastNm - Phrozintows

SSN – 999-00-9999

IRSResponsiblePrtyInfoCurrInd -- Y

binaryAttachmentCnt – 0

Form **1120-POL**
Department of the Treasury
Internal Revenue Service

U.S. Income Tax Return for Certain Political Organizations

Go to www.irs.gov/Form1120POL for instructions and the latest information.

OMB No. 1545-0123
2024

For calendar year 2024 or other tax year beginning , 2024, and ending , 20
Check the box if this is a section 501(c) organization ☐

Check if:
☐ Final return
☐ Name change
☐ Address change
☐ Amended return

Name of organization

Number, street, and room or suite no. (If a P.O. box, see instructions.)

City or town, state or province, country, and ZIP or foreign postal code

Employer identification number

Part I **Income**

1 Dividends (attach statement)

2 Interest

3 Gross rents

4 Gross royalties

5 Capital gain net income (attach Schedule D (Form 1120))

6 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)

7 Other income and nonexempt function expenditures (see instructions)

8 **Total income.** Add lines 1 through 7

1

2

3

4

5

6

7

8

Part II **Deductions**

9 Salaries and wages

10 Repairs and maintenance

11 Rents

12 Taxes and licenses

13 Interest

14 Depreciation (attach Form 4562)

15 Other deductions (attach statement)

16 **Total deductions.** Add lines 9 through 15

17 Taxable income before specific deduction of \$100. See instructions. Section 501(c) organizations show:
a Amount of net investment income
b Aggregate amount expended for an exempt function (attach statement)

18 Specific deduction of \$100 (not allowed for newsletter funds defined under section 527(g))

9

10

11

12

13

14

15

16

17c

18

Part III **Tax and Payments**

19 **Taxable income.** Subtract line 18 from line 17c. If line 19 is zero or less, see instructions

20 **Income tax.** See instructions

21a **Tax Credits.** Foreign tax credit (Form 1118)

b Other credits (see instructions)

c General business credit. Attach Form 3800 (see instructions)

d **Total tax credits.** Add lines 21a through 21c

22 **Total tax.** Subtract line 21d from line 20

23a **Payments.** Tax deposited with Form 7004

b Credit for tax paid on undistributed capital gains (attach Form 2439)

c Credit for federal tax on fuels (attach Form 4136)

d Elective payment election amount from Form 3800 (section 527 organization only)

e **Total payments.** Add lines 23a through 23d

24 **Tax due.** Subtract line 23e from line 22. See instructions for depository method of payment

25 **Overpayment.** Subtract line 22 from line 23e

19

20

21a

21b

21c

21d

22

23a

23b

23c

23d

23e

24

25

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer

Date

Title

May the IRS discuss this return with the preparer shown below?
See instructions ☐ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Firm's name

Firm's EIN

Firm's address

Phone no.

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11523K

Form **1120-POL** (2024)

Part IV **Additional Information**

- 26

At any time during the 2024 calendar year, did the organization have an interest in or a signature or other authority over a financial account (such as a bank account, securities account, or other financial account) in a foreign country? See instructions

☐ Yes ☐ No
- If "Yes," enter the name of the foreign country
- 27

During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the organization may have to file Form 3520

☐ Yes ☐ No
- 28

Enter the amount of tax-exempt interest received or accrued during the tax year

\$
- 29

Date organization formed
- 30a

The books are in care of
- b

Enter name of candidate
- c

The books are located at
- d

Telephone no.