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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

(Rev. December 2025) Department of the Treasury

Internal Revenue Service

Interest Computation Under the Look-Back Method for Completed Long-Term Contracts

Go to www.irs.gov/Form8697 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. 97

For the filing year beginning , a		nd ending					. See instructions.			
Name						A Ide	ntifying number			
Number, street, and apt., room, or suite no. If a P.O. box, see instructions.							B Check applicable box to show type of taxpayer:			
City or town State		State or province ZIP or foreign postal co				eign postal code		Individual Estate or trust	S corporation Partnership	
C	you were an owner of an interest in a pass omputation relates, enter the name and en lame of entity							ong-term contr	acts to which this interest	
Pai	rt I Regular Method (see i	nstructions)								
1	Taxable income or loss for the prior years shown on tax			ing year		Redetermination years			(c) Totals (Add columns (a) and (b).)	
	return (or as previously adjusted) before net operating loss or capital loss carrybacks (other than carrybacks that must		Year ended		(a) Year ended		(b) Year ended			
	section 460) (see instructions). If y Form 8697 for an earlier year, income for the prior years from lir	be taken into account to properly compute interest under section 460) (see instructions). If you were required to file Form 8697 for an earlier year, enter adjusted taxable income for the prior years from line 3, Form 8697, for the most recent filing year that affects the prior years		yr.	mo.	yr.	mo.	yr.		
2	Adjustment to income to reflect to (a) the amount of income requirements post-February 1986 contracts of during the tax year based on the and costs, and (b) the amount of incontracts based on estimated contracts based on estimated contracts and attach a separate contract, unless you interest in a pass-through entity from Schedule K-1 or a similar state.	ed to be allocated for completed or adjusted e actual contract price acome reported for such contract price and costs. schedule listing each were an owner of an reporting this amount								
3	Adjusted taxable income for Combine lines 1 and 2. If line 3 is instructions									
4	Income tax liability on line 3 am effect for the prior years (see instru									
5	Income tax liability shown on readjusted) for the prior years (see in required to file Form 8697 for an amount required to be reported of the most recent filing year that affer	nstructions). If you were n earlier year, enter the n line 4, Form 8697, for								
6	Increase or decrease in tax for the interest is due (or is to be refunded line 4	ed). Subtract line 5 from								
7	Interest due on increase, if any, instructions)	shown on line 6 (see								
8	Interest to be refunded on decre line 6 (see instructions)	•								
9a		Net interest to be refunded to you. If line 8, column (c), is greater than line 7, column (c), enter the excess. File Form 8697 separately. Do not attach it to your tax return (see instructions)								
	b Routing number					ngs				
	d Account number									
10	Net interest you owe . If line 7, col	, , ,			ter the	excess. File F	orm 869	97 with your		

TREASURY/IRS AND OMB USE ONLY DRAFT

Form 8697 (Rev. 12-2025)

Part	Ц	Simplified Marginal	Impact Metho	d (SMIM) (see	nstruction	ons)				
						Date of e		year to wh		erest	
1	Adjus	ustment to regular taxable income to reflect the					computa	ation relate	es		(d) Totals
		ence between: (a) the				(a)		(b)		(c)	(Add columns (a),
		ed to be allocated for pos			Yea	ar ended	Yea	ır ended)	ear ended	(b), and (c).)
	contra	leted or adjusted during that act price and costs, and	e lax year based or l (b) the amount	of such	no.	yr.	mo.	yr.	mo.	yr.	
		e reported for such cont									
		act price and costs. See									
		ule listing each separate									
		mer of an interest in a pa mount from Schedule K-1									
		ar tax increase or decrea		-							
		in each column by the									
		nstructions)	· ·								
	`	,									
3		ljustment to alternative minimum taxable income (AMTI) reflect the difference between: (a) AMTI required to be									
		ect the difference betwee ted for post-February 198									
		ed during the tax year									
	price	and costs, and (b) AMTI r	eported for such c	ontracts							
		on estimated contract									
		ctions and attach a sche act, unless you were an									
	pass-	through entity reporting the	nis amount from S	chedule							
4	Altern	ative minimum tax (AMT)	increase or decre	ease for							
	prior	years. Multiply line 3	in each column	by the							
	applic	able AMT rate (see instruc	ctions)								
5	Enter	the larger of line 2 or line	4. See instructions	if either							
	amou	nt is negative									
	Pass-	through entities: Skip lin	e 6 and enter on lii	ne 7 the							
		nt from line 5.									
6	Overp	ayment ceiling. For each of	column in which lin	e 5 is a							
		egative number, enter your total tax liability for the prior year,									
	as ad	usted for past application	s of the look-back	method							
		fter net operating loss, cap	·								
		cts loss, and credit carryo									
	•	For each column in which ine 6 blank and enter on line	•								
				-							
		se or decrease in tax for									
		st is due (or is to be refu		I .							
		or line 6. Treat both number	•	١							
		omparison, but enter the an	-	-							
8		Interest due on increase, if any, shown on line 7 (see									
		ctions)									
9		st to be refunded on de		own on							
		(see instructions)									
		et interest to be refunded to you. If line 9, column (d), is greater than line 8, column (d), enter the excess. File									
	Form	m 8697 separately. Do not attach it to your tax return (see instructions)									
	b Ro	Routing number C Type: Checking Savings									
	d Ac	count number									
						, , , , , , , , , , , , , , , , , , ,					
11		terest you owe. If line 8,	` '.	-		. ,.				•	
Cianat		. See instructions for when									
Signat	ure(s	Lomplete this section Under penalties of perjury, I dea									owledge and helief it is true
		correct, and complete. Declaration									
Sign		Your signature Date							Date		
Here									Doto		
		Spouse's signature. If a joint return, both must sign							Date		
		Droporor's name		Dropers!-	ianat: ::			D-1-			DTIN
Paid		Preparer's name		Preparer's s	ignature	;		Date		Check if	PTIN
Preparer Use Only										self-employed	
		Firm's name								Firm's EIN	
		Firm's address Phone no.									