FORM
ET-C
REV. 8/01

RESET FORM

ALABAMA DEPARTMENT OF REVENUE

Election and Payment of Fee for Filing a Consolidated Financial Institution Excise Tax Return

For Tax Year
20___

Name of Parent Corporation	FEIN (Parent Corporation)
Mailing Address	Amount Due – $6,000.00
City State Zip	CN (Official Use Only) ▶
Signature of Officer ▶	
Title ▶ / Telephone Number ( )	

If payment made through Electronic Funds Transfer (EFT), check this box . . . . . ▶ ☐

As provided in Chapter 16, Title 40, **Code of Alabama 1975** as amended, the above company, as the common parent corporation of the controlled group of financial institutions listed below elects to file with them a Consolidated Return of Financial Intitutions Excise Tax for the State Tax Year shown above. Attached is taxpayer's check in the amount of $6,000.00 in payment of the fee for the privilege of filing as required by Section 40-16-3 as referenced above.

COMPLETE THE INFORMATION BELOW FOR THE CONTROLLED CORPORATIONS

	NAME	ADDRESS (CITY, STATE, AND ZIP)	FEIN
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			

IF ABOVE SPACE IS INSUFFICIENT, ATTACH ADDITIONAL SHEET(S) WITH IDENTICAL HEADINGS

Due Date: Form ET-C and remittance must be received by **April 15th** of the current tax year.

Remittance should be made payable to: Alabama Department of Revenue. Write Form ET-C, tax year, and FEIN on remittance for identification.

Mail to: Alabama Department of Revenue
Individual & Corporate Tax Division
Attention FIET
P. O. Box 327439
Montgomery, AL 36132-7439