

— FOR C-CORPORATIONS AND OTHER SPECIFIED TAX ENTITIES —

Type of taxpayer (*check only one*):

- 1a C Corporation
- 1b Insurance Company (*See definitions*)
- 1c LLE Taxed as Corporation
- 1d Financial Institution Group Member
- 1e Real Estate investment Trust (REIT)
- 1f Business Trust

Determination Period:

- 2a Beginning
____/____/____
(mm/dd/yyyy)
- 2b Ending
____/____/____
(mm/dd/yyyy)
- 2c CY (Calendar Year)
- 2d FY (Fiscal Year)
- 2e SY (Short Year)

TAXPAYER INFORMATION

3a LEGAL NAME OF TAXPAYER		3b FEIN	
3c MAILING ADDRESS			
3d CITY	3e STATE	3f ZIP CODE	3g FEDERAL BUSINESS CODE NUMBER (NAICS)

RETURN INFORMATION

- 4a Address Change for Corporation
- 4b Corporate President Information Change on Attached Schedule AL-CAR (Corporation Annual Report)
- 4c Corporate Secretary Information Change on Attached Schedule AL-CAR (Corporation Annual Report)

5 Check Box if an Amended Return

C

6 Check Box if an Initial Return – Schedule BPT-IN Must Be Attached

NOTE: Initial returns must be filed within 2-1/2 months of incorporation or qualification – See instructions.

COMPUTATION OF AMOUNT DUE OR REFUND DUE

		Amount Due		FOR DEPARTMENT USE ONLY
7	Secretary of State corporate annual report fee \$10 (corporations only)	7		
8	Less: Annual report fee previously paid for this period	8		
9	Net annual report fee due (<i>line 7 less line 8</i>)	9		
10	Privilege tax due (<i>enter amount from Page 2, Part B, line 20</i>)	10		
11	Less: Privilege tax previously paid for this period	11		
12	Net privilege tax due (<i>line 10 less line 11</i>)	12		
13	Penalty due (<i>see instructions</i>)	13		
14	Interest due (<i>see instructions</i>)	14		
15	Total privilege tax due (<i>add lines 12, 13 and 14</i>)	15		
16	Net tax due (<i>add lines 9 and 15</i>)	16		
17	Payment due with return if line 16 is positive	17		
18	Amount to be refunded if line 16 is negative	18		
19	EFT Indicator if payment made through Electronic Funds Transfer (EFT) check this box and see instructions.		<input type="checkbox"/>	

Make check payable to: **Alabama Department of Revenue** Telephone number: (334) 353-7923 Web Site: www.revenue.alabama.gov
 Mail to: Alabama Department of Revenue, Business Privilege Tax Section, P.O. Box 327431, Montgomery, AL 36132-7431

Form CPT is to be filed only by C-Corporations and the Taxpayers Specified Above

I authorize a representative of the Department of Revenue to discuss my return and attachments with my preparer.
UNDER PENALTIES OF PERJURY, I declare that I have examined this return and accompanying schedules and statements and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Please Sign Here

	Your Signature**	Title	Date
Paid Preparer's Use Only	Preparer's signature	Phone number	Preparer's social security no.
	Firm's name (or yours, if self-employed) and address	E.I. No.	
		ZIP Code	

**Paid preparers may sign in lieu of an officer IF a power of attorney is on file with the Department of Revenue or attached to this return.

ALABAMA DEPARTMENT OF REVENUE
Alabama Business Privilege Tax
C-Corporation Privilege Tax Computation Schedule

1a FEIN ▶	1b TAXPAYER NAME	1c Determination Period End Date (Balance Sheet Date): ____/____/____ (mm/dd/yyyy)
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Part A – Net Worth Computation.

Corporations & Entities Taxed as Corporations		
1 Issued capital stock and additional paid in capital (without reduction for treasury stock) but not less than zero.	1	
2 Retained earnings, but not less than zero, including dividends payable. For LLC's taxed as corporations and non-stock issuing entities such as business trusts, enter assets minus liabilities . .	2	
3 Amount of related party debt exceeding the sums of line 1 and 2.	3	
4 All payments for compensation or similar amounts in excess of \$500,000.	4	
5 Total net worth (add lines 1-4)		5

Part B – Privilege Tax Exclusions and Deductions

Exclusions (Attach supporting documentation)		
1 Net worth from line 5 above.		1
2 Book value of the investments by the taxpayer in the equity of other taxpayers doing business in Alabama.	2	
3 Financial institutions, only – Book value of the investments in other corporations or LLE's that are not doing business in Alabama if the taxpayer owns more than 50 percent of the corporation or LLE.	3	
4 Unamortized portion of goodwill and core deposit intangibles resulting from a direct purchase. . . .	4	
5 Unamortized balance of properly elected post-retirement benefits pursuant to FASB 106.	5	
6 Financial institutions, only – The amount adjusted net worth exceeds six percent of total assets (see instructions)	6	
7 Total exclusions (sum of lines 2-6)		7
8 Net worth subject to apportionment (line 1 less line 7)		8
9 Apportionment factor (see instructions)	9	_____ %
10 Total Alabama net worth (multiply line 8 by line 9)		10

Deductions (Attach supporting documentation)		
11 Net investment in bonds and securities issued by the State of Alabama or political subdivision thereof, when issued prior to January 1, 2000.	11	
12 Net investment in all air, ground, or water pollution control devices in Alabama.	12	
13 Reserves for reclamation, storage, disposal, decontamination, or retirement associated with a plant, facility, mine or site in Alabama	13	
14 Book value of amount invested in qualifying low income housing projects (see instructions).	14	
15 Total deductions (add lines 11-14)		15
16 Taxable Alabama net worth (line 10 less line 15)		16
17a Federal Taxable Income (see instructions)	17a	
17b Tax rate (see instructions)	17b	_____
18 Gross privilege tax calculated (multiply line 16 by line 17b)		18
19 Alabama enterprise zone credit (see instructions)	19	
20 Privilege Tax Due (line 18 less line 19) (minimum \$100, for maximum see instructions) Enter also on Form CPT, page 1, line 10, Privilege Tax Due.		20

With the exception of initial returns, an Alabama Schedule AL-CAR, Corporation Annual Report, ***must be completed and attached to this return.***
Also, a \$10 Secretary of State Corporate Annual Report fee must be recorded on page 1, line 7, of this form.