



ALABAMA DEPARTMENT OF REVENUE
Qualified Investment Partnership Certification

For Calendar Year 2009 or Fiscal Year

Beginning _____, 2009 and ending _____, _____

1a. LEGAL NAME OF PARTNERSHIP

1b. FEIN

2. Asset Test: According to §40-18-24.2, Code of Alabama 1975, a qualified investment partnership shall have no less than 90% of the cost of its total assets invested in qualifying investment securities and office facilities and tangible personal property reasonably necessary to carry on its activity in the State of Alabama as an investment partnership.

Average Qualifying Asset Percentage for the Taxable Year 2 %

3. Gross Income Test: According to §40-18-24.2, Code of Alabama 1975, a qualified investment partnership (QIP) shall have no less than 90% of its gross income from interest, dividends, distributions, and gains and losses from the sale or exchange of qualifying investment securities, and management fees paid by its members.

Qualifying Gross Income Percentage for the Taxable Year 3 %

- 4. Check if a nonresident owner actively participates in the day-to-day management of the QIP. Please provide the nonresident owner's name and tax identification number below.
5. Check if the QIP invests in the qualifying investment securities of any entity majority-owned by a nonresident member. Please provide the nonresident owner's name and tax identification number below.
6. Check if any nonresident owner of the QIP is also a QIP. Please provide the nonresident owner's name and tax identification number below.
7. Check if the entity, at any time during the taxable year, had as an owner or member a person who is other than a United States Person, as defined in 26 U.S.C. §7701. Please provide the nonresident owner's name and tax identification number below.

Name: _____

Tax ID: _____

I certify that for this tax period this entity meets the criteria as a Qualified Investment Partnership as required by §40-18-24.2, Code of Alabama 1975. Further, under penalties of perjury I certify that I have examined this certification and to the best of my knowledge it is true, correct, and complete.

Signature of Owner/Partner/Member: _____ Date: _____

Title: _____

In order to be considered valid, this certification must be timely filed with the Alabama partnership income tax return for the taxable year.



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1a. LEGAL NAME OF PARTNERSHIP _____

1b. FEIN _____

QIP Asset Test:

	A	B	C	D	E	F
	QUALIFYING INVESTMENT SECURITIES	OFFICE FACILITIES	TANGIBLE PERSONAL PROPERTY	TOTAL QUALIFYING ASSETS	TOTAL ASSETS	RATIO OF TOTAL QUALIFYING ASSETS TO TOTAL ASSETS
2a. Beginning of Taxable Year						
2b. End of Month 1						
2c. End of Month 2						
2d. End of Month 3						
2e. End of Month 4						
2f. End of Month 5						
2g. End of Month 6						
2h. End of Month 7						
2i. End of Month 8						
2j. End of Month 9						
2k. End of Month 10						
2l. End of Month 11						
2m. End of Month 12						
2n. Average Qualifying Asset Percentage for the Taxable Year						%

QIP Gross Income Test:

3a. Interest Income		
3b. Dividend Income		
3c. Gains and Losses from the Sale or Exchange of QIS		
3d. Management Fees Paid to the Entity by Members/Owners of the Entity		
3e. Total Qualifying Income for the Taxable Year		
3f. Gross Income for the Taxable Year		
3g. Qualifying Gross Income Percentage for the Taxable Year		%