

NOTE: This payment voucher replaces Form 20CD for submitting estimated tax payments and should also accompany any payment submitted with Form 20C, Form 20C-C, Form 20S, or Form PTE-C.

WHO MUST FILE. Taxpayers making a payment of less than \$750 for taxes due on a Form 20C, 20C-C, 20S or PTE-C return or as an estimated tax payment on one of the returns must complete and file Form BIT-V, unless the payment is made electronically.

WHEN TO FILE. If you are a corporation filing on a calendar year basis, you must file this voucher along with your return on or before March 15th to pay a balance due as shown on your return. Partnerships filing a composite return must file on or before April 15th. If you need to file an extension and remit a payment, please use the Form 20E. Estimate payments for calendar year corporations are due the 15th day of April, June, September and December. If you are a fiscal year filer, the filing dates for estimate payments are the 15th day of the fourth, sixth, ninth and twelfth months of your taxable year.

WHERE TO FILE.

Payment with Form 20C or Estimates for C Corporations: Alabama Department of Revenue Corporate Tax Section PO Box 327435 Montgomery, AL 36132-7435

Payment with Form 20C-C or Estimates for Consolidated Corporations: Alabama Department of Revenue Consolidated Business Tax Compliance Unit (CBTCU) PO Box 327437 Montgomery, AL 36132-7437

Payment with Form 20S or Estimates for S Corporations: Alabama Department of Revenue Pass Through Entity Section PO Box 327444 Montgomery, AL 36132-7444

Payment with Form PTE-C or Estimates for Composite: Alabama Department of Revenue Pass Through Entity Section PO Box 327444 Montgomery, AL 36132-7444

LINE INSTRUCTIONS FOR PREPARING FORM BIT-V

TAX PERIOD: Enter the last day of the taxpayer's taxable year.

FEIN: Enter the entity's Federal Employer Identification Number (FEIN).

PAYMENT TYPE: Place an X in the appropriate box to identify the payment as being made with a balance due return or as an estimate payment.

AMOUNT PAID: Enter the amount of the payment submitted with this voucher.

NAME/ADDRESS SECTION: Enter the legal name of the taxpayer and a complete mailing address for the taxpayer.

FORM TYPE: Enter an "X" in the appropriate box to identify the form for which the payment is being made.

ADDRESS CHANGE: Enter an "X" in this box if the taxpayer's mailing address has changed.

ELECTRONIC PAYMENT. Section 41-1-20 requires electronic payments for all single business tax payments of \$750 or more. Substantial penalties can be assessed for noncompliance.

Taxpayers making e-payments via ACH-Debit must have a Sign On ID and Access Code to login to the Alabama Department of Revenue (ADOR) Paperless Filing & Payment System. In order to receive a Sign On ID and Access Code, you must have filed a tax return with the ADOR within the last three years. Visit our Web site at www.revenue.alabama.gov/eservice.htm for additional information.

NOTE: Refer to our Web site at www.revenue.alabama.gov for tax payment and form preparation requirements.



DETACH ALONG THIS LINE AND MAIL VOUCHER WITH YOUR FULL PAYMENT



DO NOT STAPLE OR ATTACH THIS VOUCHER TO YOUR PAYMENT

Tax Type: BIT • Tax Period: MONTH / DAY / YEAR

Form Type: [] 20C [] 20C-C [] 20S [] PTE-C

FEIN: • [] Check if address has changed

Payment Type: • [] Return [] Estimate
CHECK ONLY ONE BOX

ADOR

Amount Paid: \$ •

LEGAL NAME

MAILING ADDRESS

CITY STATE ZIP