

FORM **40A** Alabama **2009**  
Individual Income Tax Return  
FULL YEAR RESIDENTS ONLY



For the year Jan. 1 - Dec. 31, 2009, or other tax year: Beginning: Ending: ●

Your social security number Spouse's SSN if joint return

Your first name Initial Last name

Spouse's first name Initial Last name

Present home address (number and street or P.O. Box number)

City, town or post office State ZIP code

Check if address Foreign Country is outside U.S.

▶ CHECK BOX IF AMENDED RETURN ●

<b>Filing Status/ Exemptions</b>	1 ● <input type="checkbox"/> \$1,500 Single	3 ● <input type="checkbox"/> \$1,500 Married filing separate. Complete Spouse SSN				
	2 ● <input type="checkbox"/> \$3,000 Married filing joint	4 ● <input type="checkbox"/> \$3,000 Head of Family (with qualifying person).				
<b>Income and Adjustments</b>	5 Wages, salaries, tips, etc. (list each employer and address separately).	A — Alabama tax withheld		B — Income		
	a	5a ●	00	5a	00	
	b	5b ●	00	5b	00	
	c	5c ●	00	5c	00	
	d	5d ●	00	5d	00	
	6 Interest and dividend income. If over \$1,500.00, use Form 40	6 ●			00	
	7 <b>Total income.</b> Add lines 5a through 5d and 6 (column B)	7 ●			00	
	<b>Deductions</b>	8 Standard Deduction (enter amount from table on page 9 of instructions)	8 ●	00		
		9 Federal tax deduction (see instructions)	9 ●	00		
		<b>DO NOT ENTER THE FEDERAL TAX WITHHELD FROM YOUR FORM W-2(S)</b>				
10 Personal exemption (from line 1, 2, 3, or 4)		10 ●	00			
11 Dependent exemptions (from page 2, Part II, line 2)		11 ●	00			
12 <b>Total deductions.</b> Add lines 8, 9, 10, and 11	12 ●			00		
13 <b>Taxable income.</b> Subtract line 12 from line 7. Enter the result	13 ●			00		
14 Find the tax for the amount on line 13. Use the tax table in the Instruction Booklet.	14 ●			00		
15 Consumer Use Tax (use worksheet on page 9)	15 ●			00		
16 You may make a voluntary contribution to:	a Alabama Democratic Party	<input type="checkbox"/> \$1	<input type="checkbox"/> \$2	<input type="checkbox"/> none	16a ●	00
	b Alabama Republican Party	<input type="checkbox"/> \$1	<input type="checkbox"/> \$2	<input type="checkbox"/> none	16b ●	00
17 <b>Total tax liability and voluntary contribution.</b> Add lines 14, 15, 16a, and 16b	17 ●				00	
18 <b>Alabama income tax withheld.</b> Add lines 5a thru 5d, column A	18 ●				00	
19 Automatic Extension Payment	19 ●				00	
20 Amended Returns Only — Previous payments (see instructions)	20 ●				00	
21 <b>Total payments.</b> Add lines 18, 19 and 20	21 ●				00	
22 Amended Returns Only — Previous refund (see instructions)	22 ●				00	
23 <b>Adjusted Total Payments.</b> Subtract line 22 from line 21	23 ●				00	
<b>AMOUNT YOU OWE</b>	24 If line 17 is larger than line 23, subtract line 23 from line 17, and enter <b>AMOUNT YOU OWE.</b> Place payment, along with Form 40V, loose in the mailing envelope. (FORM 40V MUST ACCOMPANY PAYMENT.)	24 ●			00	
<b>OVERPAID</b>	25 If line 23 is larger than line 17, subtract line 17 from line 23 and enter amount <b>OVERPAID</b>	25 ●			00	
<b>Donations</b>	26 <b>Total Donation Check-offs</b> from page 2, Part IV, line 2	26 ●			00	
<b>REFUND</b>	27 <b>REFUNDED TO YOU.</b> Subtract line 26 from line 25. (You <b>MUST SIGN</b> this return before your refund can be processed.)	27 ●			00	

**Sign Here In Black Ink**

●  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.

Keep a copy of this return for your records.	Your signature	Date	Daytime telephone number ( )	Your occupation
	Spouse's signature (if joint return, BOTH must sign)	Date	Daytime telephone number ( )	Spouse's occupation
<b>Paid Preparer's Use Only</b>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
	Firm's name (or yours if self-employed) and address	Daytime telephone no. ( )	E.I. No.	ZIP Code



**PART I**

- 1 Were you (and your spouse, if married filing jointly) a resident of Alabama for the entire year 2009?  Yes  No  
If you checked no, **DO NOT COMPLETE THIS FORM.** See "Which Form To File" on page 5 of instructions.
- 2 Did you file an Alabama income tax return for the year 2008?  Yes  No  
If you checked no, state the reason for not filing. \_\_\_\_\_
- 3 Give name and address of your present employer:  
Yourself \_\_\_\_\_  
Your Spouse \_\_\_\_\_
- 4 Your occupation \_\_\_\_\_ Spouse's occupation \_\_\_\_\_
- 5 Enter the Federal Adjusted Gross Income ●\$ \_\_\_\_\_ and Federal Taxable Income ●\$ \_\_\_\_\_ as reported on your 2009 Federal Individual Income Tax Return.
- 6 Do you have income which is reported on your Federal return, but not reported on your Alabama return?  Yes  No  
If yes, enter source(s) and amount(s) below (other than state income tax refund):  
Source \_\_\_\_\_ Amount \$ \_\_\_\_\_  
Source \_\_\_\_\_ Amount \$ \_\_\_\_\_  
Source \_\_\_\_\_ Amount \$ \_\_\_\_\_

**General Information**

**All Taxpayers Must Complete This Section**

**PART II**

1a Dependents: (1) First name	Last name	(2) Dependent's social security number.	(3) Dependent's relationship to you.	(4) Did you provide more than one-half dependent's support?
		●		
		●		
		●		
		●		

**Dependents**

Do not include yourself or your spouse

(See page 10)

b Total number of dependents claimed above ..... ●

2 **Amount allowed.** (Multiply the total number of dependents claimed on line 1b by the amount from the dependent chart below.)

Use the following chart to determine the per-dependent exemption amount:

Amount on Line 7, Page 1	Dependent Exemption
0 - 20,000	1,000
20,000 - 100,000	500
Over 100,000	300

Enter amount here and on page 1, line 11 ..... **2** ●

**PART III**

**Federal Tax Liability Deduction**

1 Enter the Federal Income Tax Liability from worksheet (see instructions) here and on line 9, page 1 ..... **1** ●

**PART IV**

**Donation Check-offs**

1 You may donate all or part of your overpayment. (Enter the amount in the appropriate boxes.)

a Senior Services Trust Fund.....	●	<input type="text" value="00"/>	j Neighbors Helping Neighbors.....	<input type="text" value="00"/>
b Alabama Arts Development Fund.....	●	<input type="text" value="00"/>	k Alabama Breast & Cervical Cancer Program.....	<input type="text" value="00"/>
c Alabama Nongame Wildlife Fund.....	●	<input type="text" value="00"/>	l Alabama 4-H Club.....	<input type="text" value="00"/>
d Child Abuse Trust Fund.....	●	<input type="text" value="00"/>	m Alabama Organ Center Donor Awareness Fund.....	<input type="text" value="00"/>
e Alabama Veterans Program.....	●	<input type="text" value="00"/>	n Alabama National Guard Foundation Incorporated.....	<input type="text" value="00"/>
f Alabama Indian Children's Scholarship Fund.....	●	<input type="text" value="00"/>	o Cancer Research Institute.....	<input type="text" value="00"/>
g Penny Trust Fund.....	●	<input type="text" value="00"/>	p Alabama Alternative Fuels Fund.....	<input type="text" value="00"/>
h Foster Care Trust Fund.....	●	<input type="text" value="00"/>	q Alabama Military Support Foundation.....	<input type="text" value="00"/>
i Mental Health.....	●	<input type="text" value="00"/>		

2 **Total Donations.** Add lines 1a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, and q. Enter here and on page 1, line 26 ..... ●

If an addressed envelope came with your return, please use it and follow the instructions on the envelope. If you do not have one, mail your return to one of the addresses below.

**WHERE TO FILE FORM 40A**



**If you are not making a payment, mail your return to:**  
Alabama Department of Revenue  
P. O. Box 327465  
Montgomery, AL 36132-7465

**If you are making a payment, mail your return, Form 40V, and payment to:**  
Alabama Department of Revenue  
P. O. Box 327477  
Montgomery, AL 36132-7477

Mail **only** your 2009 Form 40A to one of the above addresses. Prior year returns, amended returns, and all other correspondence should be mailed to Alabama Department of Revenue, P.O. Box 327464, Montgomery, AL 36132-7464.

# Federal Income Tax Deduction Worksheet

<b>1</b> Enter the tax as shown on line 55, Form 1040, line 37 on Form 1040A, line 11 on Form 1040EZ or line 57 on Form 1040NR .....		<b>1</b>		
<b>2a Making work pay and government retiree credits.</b> Enter the amount from line 63, Form 1040, line 40 on Form 1040A, line 8 on Form 1040EZ or line 60 on Form 1040NR. .	<b>2a</b>			
<b>2b Earned income credit (EIC).</b> Enter the amount from line 64a, Form 1040, line 41a on Form 1040A or line 9a on Form 1040EZ .....	<b>2b</b>			
<b>2c Additional child tax credit.</b> Enter the amount from line 65, Form 1040, line 42 on Form 1040A, or line 61 on Form 1040NR .....	<b>2c</b>			
<b>2d Refundable education credit.</b> Enter the amount from line 66, Form 1040 or line 43 on Form 1040A .....	<b>2d</b>			
<b>2e First-time homebuyer credit.</b> Enter the amount from line 67, Form 1040 .....	<b>2e</b>			
<b>2f Credits from Forms 2439, 4136, 8801, 8885.</b> Enter the amount from line 70, Form 1040 or line 64 on Form 1040NR .....	<b>2f</b>			
<b>3</b> Add lines 2a, b, c, d, e and f .....		<b>3</b>		
<b>4</b> Subtract line 3 from line 1 and enter on line 12 on Form 40, line 9 Form 40A or line 4, Part IV, page 2 on Form 40NR. <b>If amount is negative enter zero.</b> .....		<b>4</b>		