FORM
40A 2016

Alabama Individual Income Tax Return

FULL YEAR RESIDENTS ONLY

For the year Jan. 1 - Dec. 31, 2016, or other tax year: Beginning: Ending: ●

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 is outside U.S. | Foreign Country

Your social security number ●

● ☐ Check if primary is deceased
Primary's deceased date (mm/dd/yy) ●

Spouse's social security number ●

● ☐ Check if spouse is deceased
Spouse's deceased date (mm/dd/yy) ●

▶ **CHECK BOX IF AMENDED RETURN** ● ☐

Filing Status/ Exemptions

1 ● ☐ $1,500 Single
2 ● ☐ $3,000 Married filing joint
3 ● ☐ $1,500 Married filing separate. Complete Spouse SSN
4 ● ☐ $3,000 Head of Family (with qualifying person).

		A — Alabama tax withheld	B — Income
Income and Adjustments	5a Alabama Income Tax Withheld *(from Schedule W-2, line 18, column G)*	5a ● 00	
	5b Wages, salaries, tips, etc. *(from Schedule W-2, line 18, column I plus J).*		5b ● 00
	6 Interest and dividend income. If over $1,500.00, use Form 40		6 ● 00
	7 **Total income.** Add lines 5 and 6 *(column B)*		7 ● 00
Deductions	8 Standard Deduction *(enter amount from table on page 9 of instructions)*	8 ● 00	
You Must Attach page 2 of Federal Form 1040, Federal Form 1040A, Federal Form 1040NR, or page 1 of Form 1040EZ, if claiming a deduction on line 9.	9 Federal tax deduction *(see instructions)* **DO NOT ENTER THE FEDERAL TAX WITHHELD FROM YOUR FORM W-2(S)**	9 ● 00	
	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 **Total deductions.** Add lines 8, 9, 10, and 11		12 ● 00
Tax and Payments Staple Form(s) W-2, W-2G, and/or 1099 here.	13 **Taxable income.** 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 (see instructions). If you certify that no use tax is due, check box ☐		15 ● 00
	16 You may make a voluntary contribution to: **a** Alabama Democratic Party ☐ $1 ☐ $2 ☐ none		16a ● 00
	b Alabama Republican Party ☐ $1 ☐ $2 ☐ none		16b ● 00
	17 **Total tax liability and voluntary contribution.** Add lines 14, 15, 16a, and 16b		17 ● 00
	18 **Alabama income tax withheld** *(from column A, line 5)*		18 ● 00
	19 Automatic Extension Payment		19 ● 00
	20 Amended Returns Only — Previous payments *(see instructions)*		20 ● 00
	21 **Total payments.** Add lines 18, 19 and 20		21 ● 00
	22 Amended Returns Only – Previous refund *(see instructions)*		22 ● 00
	23 **Adjusted Total Payments.** Subtract line 22 from line 21		23 ● 00
AMOUNT YOU OWE	24 If line 17 is larger than line 23, subtract line 23 from line 17, and enter **AMOUNT YOU OWE.** Place payment, along with Form 40V, loose in the mailing envelope. **(FORM 40V MUST ACCOMPANY PAYMENT.)**	24 ● 00	
OVERPAID	25 If line 23 is larger than line 17, subtract line 17 from line 23 and enter amount **OVERPAID**		25 ● 00
Donations	26 **Total** Donation Check-offs from page 2, Part IV, line 2.		26 ● 00
REFUND	27 **REFUNDED TO YOU.** Subtract line 26 from line 25. (You **MUST SIGN** 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

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ☐	Preparer's SSN or PTIN ● ◀
Firm's name (or yours if self-employed) and address ▶	Daytime telephone no. ( )		E.I. No. / ZIP Code

ADOR

PART I General Information

All Taxpayers Must Complete This Section

1 Were you (and your spouse, if married filing jointly) a resident of Alabama for the entire year 2016? ☐ 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 2015? ☐ 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 **2016 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 ●$ _____

PART II Dependents

Do not include yourself or your spouse

(See page 10)

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?
		●		
		●		
		●		
		●		

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
20,001 – 100,000	500
Over 100,000	300

Enter amount here and on page 1, line 11 ... 2 ● 00

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 ● 00

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	● 00	k	Alabama Breast & Cervical Cancer Program	● 00
b	Alabama Arts Development Fund	● 00	l	Victims of Violence Assistance	● 00
c	Alabama Nongame Wildlife Fund	● 00	m	Alabama Military Support Foundation	● 00
d	Child Abuse Trust Fund	● 00	n	Alabama Veterinary Medical Foundation Spay-Neuter Program	● 00
e	Alabama Veterans Program	● 00	o	Cancer Research Institute	● 00
f	Alabama State Historic Preservation Fund	● 00	p	Alabama Association of Rescue Squads	● 00
g	Archives Services Fund	● 00	q	USS Battleship Commission	● 00
h	Foster Care Trust Fund	● 00	r	Children First Trust Fund	● 00
i	Mental Health	● 00			
j	Alabama Firefighters Annuity and Benefit Fund	● 00			

2 **Total Donations.** Add lines 1a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, and r. Enter here and on page 1, line 26 ... ● 00

Drivers License Info

DOB (mm/dd/yyyy) ● _____ Your state ● ____ DL# ● _____ Iss date (mm/dd/yyyy) ● _____ Exp date (mm/dd/yyyy) ● _____

DOB (mm/dd/yyyy) ● _____ Spouse state ● ____ DL# ● _____ Iss date (mm/dd/yyyy) ● _____ Exp date (mm/dd/yyyy) ● _____

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 2016 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.