



Alabama Individual Income Tax Return RESIDENTS & PART-YEAR RESIDENTS

For the year Jan. 1 - Dec. 31, 2017, or other tax year: Beginning: Ending:

Personal information section including first name, spouse's first name, address, city, state, ZIP code, and foreign country options.

Section for social security numbers and deceased status for primary filer and spouse.

CHECK BOX IF AMENDED RETURN ADOR

Filing Status/Exemptions section with options for single, married, or head of family.

Income and Adjustments table with columns for Alabama tax withheld and Income, including lines 5a through 10.

Deductions table with options for itemized or standard deductions and lines 11 through 15.

Tax table including income tax due, net tax due, and Alabama Election Campaign Fund contributions (lines 16 through 21).

Payments table including Alabama income tax withheld, estimated tax payments, and refundable portions (lines 22 through 29).

AMOUNT YOU OWE section with lines 30 and 31.

OVERPAID section with line 32.

Donations section with line 33.

REFUND section with line 34.

Final summary lines 35 and 36.



**PART I**

1	Alimony received	1	●	00
2	Business income or (loss) (attach Federal Schedule C or C-EZ) (see instructions)	2	●	00
3	Gain or (loss) from sale of Real Estate, Stocks, Bonds, etc. (attach Schedule D)	3	●	00
4a	Total IRA distributions	4a	●	00
4b	Taxable amount (see instructions)	4b	●	00
5a	Total pensions and annuities	5a	●	00
5b	Taxable amount (see instructions)	5b	●	00
6	Rents, royalties, partnerships, estates, trusts, etc. (attach Schedule E)	6	●	00
7	Farm income or (loss) (attach Federal Schedule F)	7	●	00
8	Other income (state nature and source — see instructions)	8	●	00
9	<b>Total other income.</b> Add lines 1 through 8. Enter here and also on page 1, line 7.	9	●	00

**PART II**

1a	Your IRA deduction	1a	●	00
b	Spouse's IRA deduction	1b	●	00
2	Payments to a Keogh retirement plan and self-employment SEP deduction	2	●	00
3	Penalty on early withdrawal of savings	3	●	00
4	Alimony paid. Recipient's last name _____ Social security no. ● _____	4	●	00
5	Adoption expenses	5	●	00
6	Moving Expenses (Attach Federal Form 3903) to City _____ State _____ ZIP _____	6	●	00
7	Self-employed health insurance deduction	7	●	00
8	Payments to Alabama College Counts 529 Fund or Alabama PACT Program	8	●	00
9	Health insurance deduction for small employer employee (see instructions)	9	●	00
10	Costs to retrofit or upgrade home to resist wind or flood damage	10	●	00
11	Deposits to a catastrophe savings account	11	●	00
12	<b>Total adjustments.</b> Add lines 1 through 11. Enter here and also on page 1, line 9	12	●	00

**PART III**

**Dependents**

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?
●					
●					
●					
●					

Do not include yourself or your spouse

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 on page 10.)  
Enter amount here and on page 1, line 14. 2 ● 00

**PART IV**

**General Information**

1 **Residency** Check only one box  Full Year  Part Year From \_\_\_\_\_ 2017 through \_\_\_\_\_ 2017.

2 Did you file an Alabama income tax return for the year 2016?  Yes  No If no, state reason \_\_\_\_\_

3 Give name and address of present employer(s). Yours \_\_\_\_\_  
Your Spouse's \_\_\_\_\_

4 Enter the Federal Adjusted Gross Income ●\$ \_\_\_\_\_ and Federal Taxable Income ●\$ \_\_\_\_\_ as reported on your 2017 Federal Individual Income Tax Return.

5 Do you have income which is reported on your Federal return, but not reported on your Alabama return (other than your state tax refund)?  Yes  No  
If yes, enter source(s) and amount(s) below: (other than state income tax refund)

Source	Amount	●	00
Source	Amount	●	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) ● _____

**Sign Here In Black Ink**

Keep a copy of this return for your records.

●  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.

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 <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

**WHERE TO FILE FORM 40**

<b>If you are <u>not</u> making a payment, mail your return to:</b>	<b>If you are making a payment, mail your return, Form 40V, and payment to:</b>
Alabama Department of Revenue P.O. Box 154 Montgomery, AL 36135-0001	Alabama Department of Revenue P.O. Box 2401 Montgomery, AL 36140-0001

Mail **only** your 2017 Form 40 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.

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