# Alabama Individual Income Tax Return
## RESIDENTS & PART-YEAR RESIDENTS

**For the year Jan. 1 - Dec. 31, 2020, 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

<table>
<thead>
<tr>
<th>State</th>
<th>ZIP code</th>
</tr>
</thead>
</table>

### Check if address

- [ ] is outside U.S.
- [ ] Foreign Country

### 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). Complete Schedule HOF

### Income and Adjustments

11. Check box a, if you itemize deductions, and enter amount from Schedule A, line 27.

- [ ] a Itemized Deductions
- [ ] b Standard Deduction

12. Federal tax deduction (see instructions).

### Deductions

13. Personal exemption (from line 1, 2, 3, or 4).

14. Dependent exemption (from page 2, Part II, line 15).

15. Total deductions. Add lines 11, 12, 13, and 14.

### Tax


17. Income tax due. Enter amount from tax table or check if from [ ] Form NOL-85A.

18. Net tax due Alabama. Check box if computing tax using Schedule OC [ ] otherwise enter amount from line 17.

19. Consumer Use Tax (see instructions). If you certify that no use tax is due, check box [ ]

20. Alabama Election Campaign Fund. You may make a voluntary contribution to the following:

- [ ] Alabama Democratic Party [ ] $1 [ ] $2 [ ] none
- [ ] Alabama Republican Party [ ] $1 [ ] $2 [ ] none

21. Total tax liability and voluntary contribution. Add lines 18, 19, 20a, and 20b.

### Payments

22. Alabama income tax withheld (from Schedule W-2, line 18, column G).

23. 2020 estimated tax payments/Automatic Extension Payment.

24. Amended Returns Only – Previous payments (see instructions).

25. Refundable Credits. Enter the amount from Schedule OC, Section F, line F4.


27. Amended Returns Only – Previous refund (see instructions).


### AMOUNT YOU OWE

29. If line 21 is larger than line 28, subtract line 28 from line 21, and enter AMOUNT YOU OWE. Place payment, along with Form 40V, loose in the mailing envelope. (FORM 40V MUST ACCOMPANY PAYMENT.)

30. Estimated tax penalty. Also include on line 29 (see instructions page 11).

### OVERPAID

31. If line 28 is larger than line 21, subtract line 21 from line 28, and enter OVERPAID.

### Donations

32. Amount of line 31 to be applied to your 2021 estimated tax.

33. Total Donation Check-offs from Schedule DC, line 2.

### REFUND

34. REFUNDED TO YOU. (CAUTION: You must sign this return on the reverse side.) Subtract lines 32 and 33 from line 31.

**Your social security number**

- [ ] Check if primary is deceased
- [ ] Primary’s deceased date (mm/dd/yy)

- [ ] Check if spouse is deceased
- [ ] Spouse’s deceased date (mm/dd/yy)

## CHECK BOX IF AMENDED RETURN [ ]

**[ADOR]**
PART I
1. Alimony received .................................................. $0
2. Business income or (loss) (attach Federal Schedule C or C-EZ) (see instructions) ................................................................. $0
3. Gain or (loss) from sale of Real Estate, Stocks, Bonds, etc. (attach Schedule D) ................................................................. $0
4a. Total IRA distributions .................................................. $0
4b. Taxable amount (see instructions) ........................................... $0
5a. Total pensions and annuities ............................................... $0
5b. Taxable amount (see instructions) ........................................... $0
6. Rents, royalties, partnerships, estates, trusts, etc. (attach Schedule E) ................................................................. $0
7. Farm income or (loss) (attach Federal Schedule F) ................. $0
8. Other income (state nature and source — see instructions) ......... $0
9. Total other income. Add lines 1 through 8. Enter here and also on page 1, line 7 ................................................................. $0

PART II
1a. Your IRA deduction .................................................. $0
1b. Spouse’s IRA deduction .................................................. $0
2. Payments to a Keogh retirement plan and self-employment SEP deduction ................................................................. $0
3. Penalty on early withdrawal of savings ........................................ $0
4a. Alimony paid. Recipient’s last name ........................................ $0
4b. Social security no. .................................................. $0
5. Adoption expenses .................................................. $0
6. Moving Expenses (Attach Federal Form 3903) to City State ZIP ................................................................. $0
7. Self-employed health insurance deduction ........................................ $0
8. Payments to Alabama College Counts 529 Fund or Alabama PACT Program ................................................................. $0
9. Health insurance deduction for small employer employee (see instructions) ................................................................. $0
10. Costs to retrofit or upgrade home to resist wind or flood damage ................................................................. $0
11. Deposits to a catastrophe savings account ........................................ $0
12. Contributions to a health savings account ........................................ $0
13. Deposits to an Alabama First-Time and Second Chance Home Buyer Savings Account (see instructions) ................................................................. $0
14. Firefighter’s Insurance Premiums ........................................ $0
15. Total adjustments. Add lines 1 through 14. Enter here and also on page 1, line 9 ................................................................. $0

PART III
1. Total number of dependents from Schedule DS, line 1b ............. 1
2. Amount allowed. (Multiply total number of dependents claimed on line 1 by the amount on the dependent chart on page 10 of Instructions.) Enter amount here and on page 1, line 14 ................................................................. $0

PART IV
1. Residency Check only one box ▶ Full Year ▶ Part Year From 2020 through 2020.
2. Did you file an Alabama income tax return for the year 2019? ▶ Yes ▶ No If no, state reason
3. Give name and address of present employer(s). Yours

All Taxpayers Must Complete This Section.
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) You state DL# fle date (mm/dd/yyyy) Exp date (mm/dd/yyyy)
DOB (mm/dd/yyyy) Spouse state DL# fle date (mm/dd/yyyy) Exp date (mm/dd/yyyy)

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.

Your signature Date Daytime telephone number ( ) Your occupation
Spouse’s signature (if joint return, BOTH must sign) Date Daytime telephone number ( ) Spouse’s occupation

Preparer’s signature Date Check if self-employed Preparer’s SSN or PTIN E.I. No.
Firm’s name (or yours if self-employed) and address
Daytime telephone number ( ) Zip Code

WHERE TO FILE
If you are receiving a refund, Form 40, line 34, mail your return to: Alabama Department of Revenue, P.O. Box 154, Montgomery, AL 36135-0001
If you are making a payment, Form 40, line 29, mail your return to: Alabama Department of Revenue, P.O. Box 2401, Montgomery, AL 36140-0001
If you are not receiving a refund or making a payment, mail your return to: Alabama Department of Revenue, P.O. Box 327469, Montgomery, AL 36132-7469

Mail only your 2020 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.