



SCHEDULE

B-1Alabama
Department of Revenue**2019**

ADOR

Alabama Net Operating Loss Carryforward Acquisitions

	Column A	Column B	Column C	Column D
	Name of Acquired Company	FEIN of Acquired Company	Loss Year End MM / DD / YYYY	Balance of NOL Acquired
1 ●		●	●	●
2 ●		●	●	●
3 ●		●	●	●
4 ●		●	●	●
5 ●		●	●	●
6 ●		●	●	●
7 ●		●	●	●
8 ●		●	●	●
9 ●		●	●	●
10 ●		●	●	●
11 ●		●	●	●
12 ●		●	●	●
13 ●		●	●	●
14 ●		●	●	●
15 ●		●	●	●
16 ●		●	●	●
17 ●		●	●	●
18 ●		●	●	●
19 ●		●	●	●
20 ●		●	●	●
21 ●		●	●	●
22 ●		●	●	●
23 ●		●	●	●
24 ●		●	●	●

	Column A	Column B	Column C	Column D
	Name of Acquired Company	FEIN of Acquired Company	Loss Year End MM / DD / YYYY	Balance of NOL Acquired
25 ●		●	●	●
26 ●		●	●	●
27 ●		●	●	●
28 ●		●	●	●
29 ●		●	●	●
30 ●		●	●	●
31 ●		●	●	●
32 ●		●	●	●
33 ●		●	●	●
34 ●		●	●	●
35 ●		●	●	●
36 ●		●	●	●
37 ●		●	●	●
38 ●		●	●	●
39 ●		●	●	●
40 ●		●	●	●
41 ●		●	●	●
42 ●		●	●	●
43 ●		●	●	●
44 ●		●	●	●
45 ●		●	●	●
46 ●		●	●	●
47 ●		●	●	●
48 ●		●	●	●

THIS FORM MUST BE ATTACHED TO THE FORM 20-C, 20C-C OR ET-1