4	FORM IONI Indivi	<b>R</b> dua	Alabama 2020 IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII					
Your social		NOI	RESIDENTS ONLY  Spouse's SSN if joint return					
ecurity number Check Primary's de (mm/dd/yy)	ceased		eceased  Check if spouse is deceased Spouse's deceased date (mm/dd/yy)					
Your first name			Initial Last name					
•			• •					
Spouse's first nar	me		Initial Last name					
•			• •					
Present home ad	ldress (r	numbe	and street or P.O. Box number)		CHECK BOX	IF AMENDE	D I	RETURN ● 🗌
City, town or post	office		State ZIP code		Foreign Country			
•	. 000		• •	Check if a is outside	address			
Filing Stat	us/	1	\$1,500 Single 3 • \$1,500 Ma	arried filing separate. Cor				
Exemption		2		ad of Family (with qualify	· · · · · · · · -	Schedule HOF.		
		tips,		bama Tax Withheld	B – All Sour			C – Alabama Income
H, and I.) (I	nclude	e sp	use's income if married filing joint.)		5 •		5	•
		6	Other income (from page 2, Part I, line 9)		6 •		6	•
			Total income. Add amounts in col. B then add amounts in col.		7 •		7	•
Income			Adjustments to income (from page 2, Part II, line 8)		8 •		8	•
and			Adjusted total income. Subtract line 8 from line 7		9 •		9	•
Adjustme	nts		Alabama percentage of adjusted total income. Divide line 9, co		over 100%)		10	• %
•			Other Adjustments (from page 2, Part III, line 4 and line 6)	-	11 •	<del></del>	11	•
			Adjusted Gross Income. Subtract line 11 from line 9		12 •		12	•
Deduction			Check appropriate box. If you itemize, enter amount from Sche		Box a or b MUST be		_	
		-	● a  Itemized Deductions ● b  Standard De		13 •			
You Must Attach		14	Federal Income Tax deduction (from page 2, Part IV, line 7)		14 •			
Complete copy of Federal Return, it	יידן ונ		Personal exemption (multiply line 1, 2, 3, or 4 by percentage of		15 •			
claiming a deduction line 14.			Dependent exemption (from page 2, Part V, line 4)		16 •			
OIT IIII E 14.		17	Total deductions. Add lines 13, 14, 15, and 16				17	•
		18	Taxable income. Subtract line 17 from line 12, column C				18	•
Tax		19	Tax due. Enter amount from tax table or check if from ● F		19 •			
1607		20	Net tax due Alabama. Check box if computing tax using Sche			no 10	20	•
		21	Alabama Income Tax withheld (from column A. line 5)		21 •	110 10		
		22	2020 estimated tax payments/Automatic Extension Payment		22 •			
					23 •			
<b>Payments</b>								
Staple Form(s) W-2			Refundable Credits. Enter the amount from the Schedule OC					
W-2G, and/or 1 here. Attach Sc			Total payments. Add lines 21 through 25				26	•
ule W-2 to retur	'n.		Amended Returns Only – Previous refund (see instructions)				27	
		28	Adjusted total payments. Subtract line 27 from line 26				28	•
			If line 20 is larger than line 28, subtract line 28 from line 20, and				20	
AMOUNT		23	Place payment, along with Form 40V, loose in the mailing enve			NT)	29	•
YOU OWE		30	Estimated tax penalty. Also include on line 29 (see instructions		30 •	N1.,	23	
			If line 28 is larger than line 20, subtract line 20 from line 28 and	, ,			31	•
OVERPAID			Amount of line 31 to be applied to your <b>2021 estimated tax</b>			⊢	32	•
DEELIND			REFUNDED TO YOU. Subtract line 32 from line 31				33	•
REFUND		_					აა	
Otana III.	plete.	r pen Deck	horize a representative of the Department of Revenue to discuss my re Ities of perjury, I declare that I have examined this return and accompa ation of preparer (other than taxpayer) is based on all information of wh		oelie	f, they are true, correct, and com-		
Sign Here In Black Ink Keep a copy	Your Si	Your Signature Date Daytime Telephone Number Your Occupation						
	Spouse	Spouse's Signature (if joint return, BOTH must sign)  Date  Daytime Telephone Number  Spouse's Occupate  ———————————————————————————————————						
Paid	Prepare			Check if	•	SSN or PTIN		E.I. Number
Preparer's Use Only	Firms's if self e	mploy	(or yours		Daytime Telephone No.			ZIP Code

FORM

Address \_



			B – All Sources		C – Alabama Income							
Other Income (See page 12)	1 Interest and dividend income (attach Schedule B if over \$1500.00)		1 •	1	•							
	2 Alimony received		2 •									
	3 Taxable portion of pensions and annuities (see instructions)		3 •									
	4 Business income or (loss) (attach Federal Schedule C) (see instructions)		4 •	<b>-</b> 4	•							
	5 Gain or (loss) from sale of Real Estate, Stocks, Bonds, etc. (attach Schedule D)		5 •	5	•							
	6 Rents, Royalties, Partnerships, Estates, Trusts, etc. (attach Schedule E)		6 •	6	•							
	7 Farm income or (loss) (attach Federal Schedule F) (see instructions)		7 •	7								
	8 Other income (state nature and source)	·····  -	8 •	8								
	9 Total other income. Add lines 1-8, column B, and lines 1, 4-8, column C.			+								
	Enter here and also on page 1, line 6		9 •	9								
PART II	IRA deduction, Keogh retirement plan, and self-employed SEP deduction		1 •	-	•							
raiti ii	2 Penalty on early withdrawal of savings	_	2 •	+								
			2 9	$\dashv$								
	3 Moving Expenses (Attach Federal Form 3903)											
Adjustments	Place of new employment:		3 •	3								
to Income	A Colf annulated books incorporated deducation	—  -	4 •	4								
(See page 14)	4 Self-employed health insurance deduction		5 •	5								
	5 Payments to Alabama College Counts 529 Fund or Alabama PACT program		6 •	6								
	6 Contributions to a health savings account.		7 •	<del>_</del>	•							
	7 Firefighter's Insurance Premiums.	-	1 •	+ '								
	8 Adjustments to income. Add lines 1-7, Column B, and lines 1, 3 through 7, Column			١,								
	Enter here and also on page 1, line 8, columns B and C		8 •	8	•							
PART III	1 Alimony Paid	<b>⊢</b>	1 •	4								
	2 Adoption Expenses	<b>⊢</b>	2 •	4								
Other	3 Health insurance deduction for small employer employee	<b>⊢</b>	3 •	_								
Adjustments	4 Add lines 1 through 3, enter here and on page 1, line 11, column B	_	4 •									
(See page 14)	5 Enter percentage from page 1, line 10		5 • 9	6								
	6 Multiply line 4 by line 5. Enter here and also page 1, line 11, column C		6									
PART IV	If you are filing separately on your Alabama return and jointly on your Federal return,		B – Federal Adjusted		C – Alabama Federal							
	complete all lines below. Otherwise, omit lines 1 through 3.	_	Gross Income	_	Tax Deduction Computation							
	1 Your joint federal adjusted gross income		1 •	4								
Federal	2 Your federal adjusted gross income			┙.								
Income Tax	3 Divide line 2 by line 1. Enter percentage here			_	70							
Deduction	4 Enter Federal Income Tax Liability from worksheet (see instructions)	_										
(See page 14)	5 If you completed lines 1 through 3 above, multiply line 4 by the percentage from line	`` `	•									
	6 Enter percentage from page 1, line 10		`` `	%								
	7 If you completed lines 1-3 above, multiply line 5 by percentage on line 6. Otherwise,		•									
PART V	1 Total number of dependents from Schedule DS, line 1b				•							
	2 Multiply total number of dependents claimed on line 1 by the amount on the dependent											
Dependents	3 Enter percentage from page 1, line 10 of your return			3	,,,							
	4 Dependent exemption allowable. Multiply the amount on line 2 by the percentage on line 3. Enter here and on page 1, line 16 4											
<b>PART VI</b>	Name of state of which you were a legal resident in 2020											
General	2 Did you file a return with that state for 2020? Yes No If no, state reason	n why:										
Information	3 If married, did your spouse receive a separate income for 2020?	o If yes, is	s your spouse filing a separate Al	abama	a return? Yes No							
	If yes, enter name here.											
All Taxpayers Must Complete	4 Did you file an Alabama return for 2019?   ■ Yes ■ No If no, state reason	why:										
This Section	5 Give name and address of your present employer(s). Yours:											
	Your Spouse's:											
(See page 15)	6 Enter the Adjusted Gross Income reported on your 2020 Federal Individual Income Ta	ax Return		6	•							
Drivers DOB	Your	Iss date		Exp da	ate							
License (mm/dd/y	yy)	(mm/do	/yyyy) •		d/yyyy) •							
Info (mm/dd/y	yy) • state • DL# •	(mm/do			d/yyyy) •							