Schedule EPT-K1 will now be combined with the Form EPT as (1) form.

**FORM** 



Alabama Department of Revenue Income Tax Administration Division

CY ●□ FY ●□ SY ●□	2022
52/53 Week ●□	

## Electing Pass-Through Entity Payment Return

For the yea	r January 1-December 31, 2022	or other tax year beginning	ng •	, 2022, e	nding •			.,		
This form is	used to make the required payment for	or an Alabama S Corporation o	r Subchapter K E	Intity that elects to be	taxed as an	Electing	g Pass-Throu	ugh Entity.	_	
Check applicable			FEDERAL BUSIN							
● Subchapter K	entity	•								
● S corporation	NAME		·							
Check if amended						su	IITE		_	
■ Amended retu										
● 2220AL Attac	CITY				STATE	ZIF	CODE			
• Federal Audit	led •	•				•				
Change	CONTACT PERSON CONCERNING					ONTACT PERSON'S PHONE NO.				
		MAIL WITH FORM SE OR	200 THIS FOR	M MUCT DE MAII	ED CERAR	ATELV	,			
1. Total Pass-Thr	ough Entity Income apportioned to Ala	R MAIL WITH FORM 65 OR			· · · · · · · · · · · · · · · · · · ·					
	Due (from Schedule EPT-K1, line 15).			·			•			
	Credits (from Schedule EPT-C, Section						•		_	
	ubtract line 3 from line 2)					_				
5. Payments and	· ·									
•						5a	•			
a. Overpayment from 2021							•			
	d WNR-V Tax Payments									
d. Current Year	's Composite Payment(s)/Electing Pas	ss-Through Entity Credit(s) from	n Schedule CP-B	line 3 (see instruction	ns)					
e. Refundable (	Credits (from Schedule EPT-C, Section	D, line 3)				Бе	•			
	yments/credits (add lines 5a through 5						•			
6. Amount to be r	emitted or (overpayment) (subtract line	e 5f from line 4)				6	•			
7. Reductions/App	olication of Overpayment						•			
a. Overpaymen	to be credited to 2023 return					7a	•			
<b>b.</b> Penalty due (	(see instructions) Late Payment E	Estimate •		Other •		7b	•			
c. Interest due	see instructions) Estimate	Interest •	Interest	on Tax •		70	•			
d. Total Reductions (total lines 7a, 7b, and 7c)										
8. Total Amount Due/(Refund) (line 6 plus line 7d)										
If paid electror	ically check here • 🗌									
•	I authorize a representative of the De	partment of Revenue to discuss m	y return and attach	ments with my preparer.						
ι	INDER PENALTIES OF PERJURY, I decla	are that I have examined this return	n and accompanying	schedules and statem	ents and, to the	e best of	mv knowleda	e and belief, the	èν	
2	re true, correct, and complete. Declaration						,		,	
Please "										
Sign Here					(	)				
nere ,	our Signature		Title or Position		Da	aytime Tel	ephone No.	Date		
	reparer's ignature			Date   •	Check if self-employed		Prep	arer's PTIN		
_				•	John Chiployed		<u> </u>	<u> </u>		
F	Preparer's Printed Name ●									
Paid -					E.I	. Number				
	irm's Name (or yours,  oolf omployed)				•					
use uniy	self-employed)				Te	lephone N	lumber			
_					•	(	)			

Make remittance payable to: Alabama Department of Revenue Write – Form EPT, tax year, and FEIN on remittance for verification purposes. Include with payment Form PTE-V available at www.revenue.alabama.gov.

Mail to: Alabama Department of Revenue - EPT P.O. Box 327444 Montgomery, AL 36132-7444

## ALABAMA DEPARTMENT OF REVENUE

Entity's FEIN

(FORM EPT)

For the year January 1 - December 31, 2022 or other tax year beginning \_\_\_\_\_\_, 20\_\_\_\_\_ ending \_

(A) Owner's/Shareholder's Name, Street Address, City, State, and ZIP	(B) Social Security Number/FEIN	(C) Entity Type	(D) Percent Ownership	(E) Taxable Income	(F) Owner's/Shareholder's Share of Tax Due (Col. E X 5%)
1 •	•	•	•	•	•
2	•	•	•	•	•
3	•	•	•	•	•
4	•	•	•	•	•
5	•	•	•	•	•
6	•	•	•	•	•
7	•	•	•	•	•
8	•	•	•	•	•
9	•	•	•	•	•
10	•	•	•	•	•
11	•	•	•	•	•
12 Totals page 2 [columns (E) through (F)]					
Add lines 12 and 13, column (F). Enter here and on Form EPT, page 1, line 2.					

## ALABAMA DEPARTMENT OF REVENUE

Entity's FEIN

(FORM EPT)

For the year January 1 - December 31, 2022 or other tax year beginning \_\_\_\_\_\_, 20\_\_\_\_ ending \_

(A) Owner's/Shareholder's Name, Street Address, City, State, and ZIP	(B) Social Security Number/FEIN	(C) Entity Type	(D) Percent Ownership	(E) Taxable Income	(F) Owner's/Shareholder's Share of Tax Due (Col. E X 5%)	
1	•	•	•	•	•	
2	•	•	•	•	•	
3	•	•	•	•	•	
4	•	•	•	•	•	
5	•	•	•	•	•	
6	•	•	•	•	•	
7	•	•	•	•	•	
8	•	•	•	•	•	
9	•	•	•	•	•	
10	•	•	•	•	•	
11	•	•	•	•	•	
12	•	•	•	•	•	
13 Add lines 1 through 12, column (E) and column (F). Enter here and on Page 2, line 13						