

FORM ET-1C



Alabama Department of Revenue
Consolidated Financial
Institution Excise Tax Return

CY
 FY
 SY

2024

For the year January 1 – December 31, 2023, or other tax year beginning _____, 2023, ending _____

Check applicable box:

Initial return

Final return

Amended return

Federal audit change

This company files as part of a consolidated federal return.

2220E Attached

FEDERAL BUSINESS CODE NUMBER _____

FEDERAL EMPLOYER IDENTIFICATION NUMBER _____

NAME _____

ADDRESS _____ SUITE, FLOOR, ETC. _____

CITY _____ STATE _____ COUNTRY (IF NOT U.S.) _____ 9-DIGIT ZIP CODE _____

STATE OF INCORPORATION _____ DATE OF INCORPORATION _____

DATE QUALIFIED IN ALABAMA _____ NATURE OF BUSINESS IN ALABAMA _____

Name _____ FEIN _____

Taxable Year Beginning Date for most recent ET-C : _____ Group's total combined assets: _____

- Filing Status:** (see instructions)
- 1. Corporation operating only in Alabama.
 - 2. Multistate Corporation – Apportionment (Sch. L).
 - 3. Multistate Corporation – Separate Accounting (Prior written approval required and must be attached).
 - 4. Alabama Consolidated Return. (Caution: see instructions)

1	Alabama Taxable Income (sum of all Proforma ET-1(s), line 15)	1	•
2	FINANCIAL INSTITUTION EXCISE TAX (6.5% of line 1)	2	•
3	Credits (sum of all proforma ET-1(s), line 17)	3	•
4	Net tax due Alabama (line 2 less line 3)	4	•
5	Payments		
	a. Carryover from prior year	5a	•
	b. Current year's Estimated tax payments	5b	•
	c. Current year's Composite Payment(s)/Electing Pass-Through Entity Credit(s) from Schedule CP-B line 3 [sum of all proforma ET-1(s), line 19c] (see instructions)	5c	•
	d. Extension Payment	5d	•
	e. Payments prior to adjustment	5e	•
	f. Total Payments (add lines 5a through 5e)	5f	•
6	Reductions/applications of overpayments		
	a. Credit to subsequent year's estimated tax	6a	•
	b. Penalty Due (see instructions)		
	Late Payment Estimate _____ Other _____	6b	•
	c. Interest Due (see instructions)		
	Estimate Interest _____ Interest on Tax _____	6c	•
	d. Total reductions (total lines 6a, b and c)	6d	•
7	Total amount due/(refund) (line 4 less 5f, plus 6d)	7	•

– UNLESS A COPY OF THE FEDERAL INCOME TAX RETURN IS ATTACHED, THIS RETURN WILL BE CONSIDERED INCOMPLETE (SEE FORM ET-1, PROFORMA, PAGE 4, OTHER INFORMATION, NUMBER 4) –

Please Sign Here

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.

Signature _____ Title _____ Date _____ Daytime Telephone No. _____

Paid Preparer's Use Only

Preparer's Signature _____ Date _____ Check if self-employed Preparer's Tax Identification Number _____

Firm's Name (or yours, if self employed) _____ Telephone No. _____ E.I. No. _____

Firm's Address _____ ZIP Code _____

Person to contact for information concerning this return: Name _____ Telephone No. _____

Email address _____

Mail to: Alabama Department of Revenue
Income Tax Administration Division
Financial Institution Excise Unit
PO Box 327437
Montgomery, AL 36132-7437

