



For the year January 1 – December 31, 2020, or other tax year beginning _____, 2020, ending _____

- Check applicable box:**
- Initial return
 - Final return
 - Amended return
 - Federal audit change

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		
This company files as as part of <input type="checkbox"/> consolidated federal group <input type="checkbox"/> consolidated Alabama group					
<input type="checkbox"/> Federal Parent Name: _____			FEIN <input type="checkbox"/>		
<input type="checkbox"/> Alabama Parent Name: _____			FEIN <input type="checkbox"/>		
<input type="checkbox"/> 2220E Attached		<input type="checkbox"/> Schedule of Adjustments to FTI		<input type="checkbox"/> Schedule PCL	

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

This company's total assets: ●

1 Federal Taxable Income (see instructions)		1	
2 Federal Net Operating Loss (included in line 1)		2	
3 Reconciliation adjustments (from line 25, Schedule A)		3	
4 Federal taxable income adjusted to Alabama Basis (add lines 1, 2 and 3)		4	
5 Net nonbusiness (income)/loss- Everywhere (from Schedule C, line 2, col.E)		5	
6 Apportionable income (add lines 4 and 5)		6	
7 Alabama apportionment factor (from line 26, Schedule D-1)		7	%
8 Income apportioned to Alabama (multiply line 6 by line 7)		8	
9 Net nonbusiness income/(loss) – Alabama (from Schedule C, line 2, col.F)		9	
10 Alabama income before federal income tax deduction (line 8 plus line 9)		10	
11 Federal income tax deduction/(refund) (from line 12, Schedule E)		11	
12 Alabama income before net operating loss (NOL) (line 10 less line 11)		12	
13 Alabama NOL deduction- Schedule B (see instructions)		13	
14 Alabama Consolidated Parent Company Allocation (see Schedule PCL instructions)		14	
15 Alabama taxable income (line 12 less line 13 and line 14)		15	
16 Alabama Financial Institution Excise Tax (6.5% of line 15)		16	
17 Credits (from Schedule EC, Section G, line 3)		17	
18 Net tax due Alabama (line 16 less line 17)		18	
19 Payments			
a. Carryover from prior year (2019)	19a	●	
b. 2020 Estimated Tax Payments	19b	●	
c. 2020 composite payment(s) made on behalf of this entity (see instructions) (from Schedule CP-B, line 3)	19c	●	
d. Extension Payment	19d	●	
e. Payments prior to adjustment	19e	●	
f. Total Payments (add lines 19a through 19e)	19f	●	
20 Reductions/applications of overpayments			
a. Credit to 2021 estimated tax	20a	●	
b. Penalty Due (see instructions)			
Late Payment Estimate <input type="checkbox"/> _____ Other <input type="checkbox"/> _____	20b	●	
c. Interest Due (see instructions)			
Estimate Interest <input type="checkbox"/> _____ Interest on Tax <input type="checkbox"/> _____	20c	●	
d. Total reductions (total lines 20a, b and c)	20d	●	
21 Total amount due/(refund) (line 18 less 19f, plus 20d) If you paid electronically check here: <input type="checkbox"/>	21	●	

UNLESS A COPY OF THE FEDERAL RETURN IS ATTACHED, THIS RETURN WILL BE CONSIDERED INCOMPLETE. (SEE ALSO PAGE 4, OTHER INFORMATION, NO. 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.
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SCHEDULE C Allocation of Nonbusiness Income, Loss, and Expense – Use only if you checked Filing Status 2, page 1

Identify by account name and amount all items of nonbusiness income, loss and expense removed from apportionable income and those items which are directly allocable to Alabama.

1 Directly Allocable Items of Nonbusiness Income/Loss	ALLOCABLE GROSS INCOME / LOSS		RELATED EXPENSE		NET OF RELATED EXPENSE	
	Column A Everywhere	Column B Alabama	Column C Everywhere	Column D Alabama	Column E Everywhere	Column F Alabama
a ●	●	●	●	●	●	●
b ●	●	●	●	●	●	●
c ●	●	●	●	●	●	●
d ●	●	●	●	●	●	●
e ●	●	●	●	●	●	●
2 NET NONBUSINESS INCOME / LOSS Enter Column E total ((income)/loss) on line 5 of page 1. Enter Column F total (income/(loss)) on line 9 of page 1					Column E ●	Column F ●

SCHEDULE D-1 Apportionment Factor – Use only if Filing Status 2 or Filing Status 4 on page 1 with Multi-State Operations – Amounts must be Positive (+) Values

TANGIBLE PROPERTY AT COST FOR PRODUCTION OF BUSINESS INCOME	A ALABAMA		B EVERYWHERE		
	BEGINNING OF YEAR	END OF YEAR	BEGINNING OF YEAR	END OF YEAR	
1 Loans and credit card receivables	1 ●	●	1 ●	●	
2 Premises and fixed assets	2 ●	●	2 ●	●	
3 Other real estate owned	3 ●	●	3 ●	●	
4 Other real and tangible personal property	4 ●	●	4 ●	●	
5 Total (lines 1 through 4)	5 ●	●	5 ●	●	
6 Average value (total of line 5, Columns A and B, divided by 2)	6 ●		6 ●		
7 Annual rental expense	7 ●	x8 = ●	7 ●	x8 = ●	
8 Total average property (add lines 6 and 7)	8a ●		8b ●		
9 Alabama property factor — 8a ÷ 8b = line 9			9 ● %		
SALARIES, WAGES, COMMISSIONS AND OTHER COMPENSATION RELATED TO THE PRODUCTION OF BUSINESS INCOME	10a	ALABAMA	10b	EVERYWHERE	10c
10 Alabama payroll factor — 10a ÷ 10b = 10c	●		●		● %
RECEIPTS	ALABAMA		EVERYWHERE		
11 Receipts from lease or rental of real property	●		●		
12 Receipts from lease or rental of tangible personal property	●		●		
13 Interest from loans secured by real property	●		●		
14 Interest from loans not secured by real property	●		●		
15 Net gains from the sale of loans	●		●		
16 Interest from credit card receivables and fees charged to card holders	●		●		
17 Net gains from sale of credit card receivables	●		●		
18 Credit card issuer's reimbursement fees	●		●		
19 Receipts from merchant discount	●		●		
20 Loan servicing fees from loans secured by real property	●		●		
21 Loan servicing fees from loans not secured by real property	●		●		
22 Interest, dividends, net gains, and other income from investment and trading assets and activities	●		●		
23 Receipts of sales of tangible personal property	●		●		
24 Other receipts	●		●		
25 Alabama receipts factor — 25a ÷ 25b = line 25c	25a ●		25b ●		25c ● %
26 Sum of lines 9, 10c, and 25c ÷ 3 = ALABAMA APPORTIONMENT FACTOR (Enter here and on line 7, page 1)			26 ●		%



SCHEDULE E Federal Income Tax (FIT) Deduction/(Refund)

Only method 1552(a)(1) can be used to calculate the Federal Income Tax Deduction.

(a) If this corporation is an accrual-basis taxpayer and files a separate (nonconsolidated) federal income tax return with the IRS, skip to line 6 and enter the amount of federal income tax liability shown on Form 1120.

(c) If this corporation is a member of an affiliated group which files a consolidated federal return, enter the separate company income from line 30 of the proforma 1120 for this company on line 1. You must complete lines 1-5 before moving on to line 6.

(b) If this corporation is a cash-basis taxpayer and files a separate (nonconsolidated) federal income tax return with the IRS, skip to line 6 and enter the amount of federal income tax paid during the year.

Items excluded from Alabama Taxable Income must be added to adjusted total income on line 8b to calculate the Federal Income Tax deduction. (This includes any amounts listed on Schedule A lines 12, 14, 15, 16, 17, and 22).

1 This company's separate federal taxable income	1	●	
2 Total positive consolidated federal taxable income	2	●	
3 This company's percentage (divide line 1 by line 2)	3	●	%
4 Consolidated federal income tax (liability/payment)	4	●	
5 Federal income tax for this company (multiply line 3 by line 4)	5	●	
6 Federal income tax to be apportioned	6	●	
7 Alabama income, page 1, line 10	7	●	
8a Adjusted total income, page 1, line 4	8a	●	
8b Income excluded from Alabama Taxable Income (include any amounts listed on Schedule A lines 12, 14, 15, 16, 17, and 22)	8b	●	
8c Adjusted Total Income including items excluded from Alabama Taxable Income (add lines 8a and 8b)	8c	●	
9 Federal income tax ratio (divide line 7 by line 8c)	9	●	%
10 Federal income tax apportioned to Alabama (multiply line 6 by line 9)	10	●	
11 Less refunds or adjustments	11	●	
12 Net federal income tax deduction / <refund> (enter on page 1, line 11)	12	●	

Other Information

- Briefly describe your Alabama operations. ● _____
- List other states in which financial institution operates, if applicable. ● _____
- Indicate your tax accounting method: ● Accrual ● Cash ● Other
- If this taxpayer is a member of an affiliated group which files a consolidated federal return, the following information **must be provided**:
 - Copy of Federal Form 851, Affiliations Schedule.** Identify by asterisk or underline the names of those corporations subject to tax in Alabama.
 - Signed copy of consolidated Federal Form 1120, pages 1-6,** as filed with the IRS.
 - Copy of the spreadsheet of income statements; all supporting schedules for all legal entities that file as part of the consolidated federal group** including (but not limited to) a copy of the spreadsheet of income statements (which includes a separate column that identifies the eliminations and adjustments used in completing the federal consolidated return), beginning and ending balance sheets, Schedule M-3 for the entire federal consolidated group.
 - Copy of federal Schedule K-1** for each tax entity that the corporation holds an interest in at any time during the taxable year.
 - Copy of federal Schedule(s) UTP.**
- Enter this financial institution's federal net income (see instructions for page 1, line 1) for the last three (3) years, as last determined (e.g.: per amended federal return or IRS audit).
 2019 ● _____ 2018 ● _____ 2017 ● _____
- Check if currently being audited by the IRS ● ● Periods _____
- Location of the corporate records:
 Street address: ● _____
 City: ● _____ State: ● _____ Zip Code: ● _____
- Person to contact for information concerning this return:
 Name: ● _____ Email Address: ● _____ Telephone: ● _____
- Files Business Privilege Tax Return: ● FEIN: ● _____

Paid Preparer's Use Only	Preparer's signature ● _____	Date ● _____	Check if self-employed ● <input type="checkbox"/>	Preparer's Tax Identification Number ● _____
	Firm's name (or yours, if self-employed) and address ● _____	Tel. No. ● () _____	E.I. No. ● _____	ZIP Code ● _____

Mail to: Alabama Department of Revenue
 Individual and Corporate Tax Division
 Financial Institution Excise Unit
 PO Box 327439
 Montgomery, AL 36132-7439