



Alabama Department of Revenue

CY ●□	
FY ●□	2020
SY●□	2020
2/53 Week ●□	

Partnership/Limited Liability Company Return of Income

			_								
Im	porta	Π	For Calendar Year 2020 or Fisc								
	. Must C		I healining • Color Color	•	,		Filing Status: (see instructions)				
	plicable			AL EMPLOY	ER IDENTIFICATION NUMBER		1. Company operating				
• 🗆	Amended F		Name of Company				only in Alabama.				
		,									
•	Initial Retur	 2. Multistate Company – Apportionment (Sch. C). 									
• 📙	Final Return	n	N. J. 10: 1				3. Multistate Company –				
• 🖳	General Pa	rtners	hip Number and Street				Separate Accounting				
•	Limited Par	tners	ip City or Town Stat	a lonia	it ZIP Code		(Prior written approval				
•	LLC/LLP		City or Town Stat	e 9 Digi	It ZIP Gode		required and must be				
•	Qualified In	vestn					attached) or Sch. B				
_	Partnership		Federal Audit Change				non-business allocation				
•	Public Hous	sing	-	of Monelson	_	1	only.				
	Project	ŭ		of Members	s r•						
•	Publicly Tra	ded	State in Which Company Was Formed Nature of Business	TIC TUX TOUT		J N	onresident Members				
•	Series LLC		State in Which Company was Formed Nature of Business		1 1.		Composite Filing •				
			UNLESS A COPY OF FEDERAL FORM 1065 IS AT	TACHED							
	Ca	autic	n. Include only trade or business income and expenses on lines								
			a. Gross receipts or sales		11 22 501011. 000 1110 1110	ir dollorio i	or more unermaner.				
			b. Returns and allowances								
			c. Balance. Subtract line 1b from line 1a			1	c •				
		2	Cost of goods sold (attach Federal Form 1125-A)				2 •				
Federal Income			Gross Profit. Subtract line 2 from line 1c	3 •							
				4 •							
			Net farm profit (loss) attach Schedule F (Federal Form 1040)	5 •							
			Net gain (loss) from Federal Form 4797, Part II, line 17 (attach Federal Form 47	6 •							
			Other income (loss) (attach statement)			_	7 •				
			Total income (loss). Combine lines 3 through 7				8 •				
			Salaries and wages (other than to partners) (less employments credits)				9 •				
		10.	Guaranteed payments to partners			10	0 •				
		11.	Repairs and maintenance			<u>1</u>	1 ●				
		12.	Bad debts			12	2 ●				
		13.	Rent			13	3 ●				
Federa	l Deduction	14.	Taxes and licenses			14	4 •				
(5	see the	15.	Interest			15	5 •				
inst	tructions	16.	a. Depreciation	. 16a •							
for li	mitations)		b. Less depreciation reported on Federal Form 1125-A and elsewhere on return			16	ic •				
	,	17.	Depletion (Do not deduct oil and gas depletion)			17	7 •				
			Retirement plans, etc.			_					
			Employee benefits programs.								
			Other deductions (attach statement)								
			Total deductions. Add the amounts shown in the far right column for lines 9 thro								
22 F	deral Ordin		usiness income (loss). Subtract line 21 from line 8								
		-	tely stated Reconciliations (from Schedule A, line 9)								
			iness income (loss) adjusted to Alabama basis (add lines 22 and 23)								
		•	· · · · · · · · · · · · · · · · · · ·			_					
			come)/loss – Everywhere (from Schedule B, line 1d, Column E) enter income as	-							
			e (add lines 24 and 25)								
			nent factor (from line 27, Schedule C)								
	, ,		ioned to Alabama (multiply line 27 by line 26)	8 • %							
29. No	et nonbusine	ss ind	ome/(loss) – Alabama (from Schedule B, line 1d, Column F)			29	9 •				
30. Sr	mall Busines	s Hea	th Insurance Premium Deduction (see instructions)				D • (
31. Al	abama ordin	ary in	come (loss) (add lines 28, 29 and 30)			3	1 ●				
			ric Rehabilitation Tax Credit (from Schedule PC, Part S, line 6)				2 ●				
33. Ra	ailroad Mode	3 •									





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SCHEDULE A		(NONSEPARATELY STATED RECONCILIATION ADJUSTMENTS)		
	1.	Related members interest or intangible expenses or costs. From Schedule PAB (see instructions)	1	•
Additions	2.	Nondeductible Federal Depreciation (Economic Stimulus Act of 2008) (see instructions)	2	•
	3.	. Other reconciling items (attach schedule)		•
	4.	Total additions	4	•
	5.	Expenses not deductible on federal income tax return due to election to claim federal tax credit	5	•
	6.	Adjustments due to the Federal Economic Stimulus Act of 2008 (attach schedule)	6	•
Deductions	7.	Other reconciling items (attach schedule)	7	•
	8.	Total deductions	8	•
	9.	Total reconciliation adjustments (subtract line 8 from line 4 above)	9	•
				•

SCHEDULE B

ALLOCATION OF NONBUSINESS INCOME, LOSS, AND EXPENSE

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. Adjustment(s) must also be made for any proration of expenses under Alabama Income Tax Rule 810-27-1-.01, which states, "Any allowable deduction that is applicable to both business

and nonbusiness income of the taxpayer shall be prorated to each class of income in determining income subject to tax as provided..." (See instructions).

Do not complete if entity operates exclusively in Alabama.

DIRECTLY ALLOCABLE ITEMS	ALLOCABLE GRO	SS INCOME / LOSS	RELATED	EXPENSE	NET OF RELATED EXPENSE			
	Column A Everywhere	Column B Alabama	Column C Everywhere	Column D Alabama	Column E Everywhere (Col. A less Col. C)	Column F Alabama (Col. B less Col. D)		
Nonseparately stated items								
1a	•	•	•	•	•	•		
1b	•	•	•	•	•	•		
1c	•	•	•	•	•	•		
1d Total (add lines 1a, 1b, and 1c)					•	•		
Separately stated items								
1e	•	•	•	•	•	•		
1f	•	•	•	•	•	•		
1g	•	•	•	•	•	•		
1h Total (add lines 1e, 1f, and 1g)	(e, 1f, and 1g)			•	•	•		

10		•	•	•	•	•		•		
1f		•	•	•	•	•		•		
1g		•	•	•	•	•		•		
1h Total (add lines	le, 1f, and 1g)		•		•	•		•		
Person to conta	ct for information	on regarding this retu	rn:							
Telephone Num	ber: ● ()								
Email: ●										
Please Sign Here	Under penalties	of perjury, I declare that	Department of Revenue to on I have examined this return arer (other than taxpayer) is	n and accompanying sched	ules and statement	ts, and to the bes	t of my knowledge s.	and belief, they are true,		
11010	0' ' '0					<u> </u>		1 10 11		
	Signature of Ger	nerai Partner				aytime Telephone	NO. S	Social Security No.		
	Preparer's Signature				Date •	Check if self-employed		Preparer's PTIN		
Paid Preparer's	Firm's name (or if self-employed)				Telephone No. ●()		E.I. No.			
Use Only	and address			ZIP Code ●						
	Email Address									





	SCHEDULE C APPORTIONMENT	NT FA	ACTOR SCHEDULE - Do no	ot co	emplete if the entity operates ex	clusi	vely in Alabama.			
	TANGIBLE PROPERTY AT COST FOR PRODUCTION OF BUSINESS INCOME	BEGINNING OF YEAR		BAMA END OF YEAR	EVERYWHERE BEGINNING OF YEAR END OF YEAR					
1.	Inventories	1	•		•	•		•		
2.	Land	2	•		•	•		•		
3.	Furniture and fixtures	3	•		•	•		•		
4.	Machinery and equipment	4	•		•	•		•		
5.	Buildings and leasehold improvements	5	•		•	•		•		
6.	IDB/IRB property (at cost)	6	•		•	•		•		
7.	Government property (at FMV)	7	•		•	•		•		
8.	•	8	•		•	•		•		
9.	Less Construction in progress (if included)	9	•		•	•		•		
10.	Totals	10	•		•	•		•		
11.	Average owned property (BOY + EOY ÷ 2)	11			•			•		
_	Annual rental expense	12	7.0	3 =		•	x8 =	•		
	Total average property (add line 11 and line 12)						13b	•		
14.	Alabama property factor — 13a ÷ 13b = line 14						14	•	%	
15.	SALARIES, WAGES, COMMISSIONS AND RELATED TO THE PRODUCTION OF Alabama payroll factor — 15a ÷ 15b = 15c	BUSI	NESS INCOME		15a ALABAMA	15b	EVERYWHERE	15c	%	
	SALES				ALABAMA	Ť	EVERYWHERE			
16.	Destination sales			16	•					
17.	Origin sales					1				
18.	Total gross receipts from sales			18	•	•				
	Dividends			19		•				
20.	Interest			20	•	•				
21.	Rents			21	•	•		-		
22.	Royalties			22		•				
23.	Gross proceeds from capital and ordinary gains					•		-		
24. Other ●(Federal 1065, line ●					•	•				
25.	Alabama sales factor — 25a ÷ 25b = line 25c				25a ●	25b	•	25c ●	%	
26.	Enter the amount from line 25c							26 ●	%	

NOTE: If any factor is not utilized in the production of business income, it shall be eliminated and the denominator reduced accordingly (Administrative Rule 810-27-1-.09).

SCHEDULE D Full Ownership List the disregarded entities	s in which the taypayer holds f	ull ownership of 100%	
SCHEDULE D Full Ownership List the disregarded entities Name of Entity	FEIN	Income (Loss) From All Sources	AL Source Income (Loss)
•	•	•	•
•	•	•	•
•	•	•	•
•	•	•	•
•	•	•	•
•	•	•	•
•	•	•	•
•	•	•	•
•	•	•	•
•	•	•	•
•	•	•	•
•	•	•	•

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	SCHEDULE E		OTHER INFORM		ON									
1.	Indicate if company has been \bullet \square (a) dissolved \bullet \square (b) sold		• (c) incorporated											
	If company has been dissolved, sold, or incorporated, complete the following:													
	Nature of change													
	Name and address of new company, corporation, or owners													
2.	2. Check if an Alabama business privilege tax return was filed for this entity ● ☐ Check this box, if entity is exempt from BPT ● ☐													
	Enter entity's net worth													
	If the privilege tax return was filed using a different FEIN, please provide the name and FEIN used to file the return.													
	Taxpayer's email address Pid any comparation partnership trust individual catata as tay exempt experientian any discally as individual and the profit less as experient for the partnership?													
4.	Did any corporation, partnership, trust, individual, estate,or tax-exempt organization own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership?													
	● ☐ Yes ● ☐ No If Yes, attach schedule of Partners owning	-												
5.	At the end of the tax year, did the partnership own directly 50% or more of			ll clas	ses of stock entitled to	vote of any corpora	ation, or own 50% or n	nore directly or indirect-						
	ly, in the profit, loss, or capital in any partnership or in the beneficial inter	rest o	of a trust?											
	● ☐ Yes ● ☐ No If Yes, attach a schedule.													
	Multistate entities should not use Sch	nedu	ie K to allocate separa	tely s		_		T_						
Ş	SCHEDULE K Partners' Distributive Share Items				Federal	Apportionment	Apportioned Amount (C)	Enter on Alabama Schedule K-1						
					Amount (A)	Factor (B)	Amount (C)	Schedule K-1						
	COME (LOSS) Alabama Ordinary income (loca) (name 1, line 21)							Dowt III Line O						
	Alabama Ordinary income (loss) (page 1, line 31)			2	•		•	Part III, Line G						
	Net rental real estate income (loss) (attach Form 8825)			2		•		Part III, Line H						
ა.	a. Other gross rental income (loss)	3h												
	b. Expenses from other rental activities (attach statement) c. Other net rental income (loss). Subtract 3b from line 3a			3c	•	•	•	Part III, Line H						
1	Guaranteed payments			3C 4	•	•	•	Part III, Line H						
	Interest income.			5	•	•								
	Dividends			6	•	•	Part III, Line J Part III, Line J							
	Royalties			7	•	•	Part III, Line J							
	a. Short-term and long-term capital gain(loss)			,			•	r art III, Lille J						
υ.	b. Opportunity Zone Investment(from Schedule OZ, line 4)													
	c. Exemption of gain under 40-18-8.1(Tech Company)													
	d. Net short-term and long-term capital gain(loss) Add lines 8a, 8b and 8			8d	•	•	•	Part III, Line K						
9.	Net section 1231 gain (loss) (attach Form 4797)			9	•	•	•	Part III, Line K						
	Other income (loss)			10	•	•	•	Part III, Line L						
	Nonbusiness items (attach schedule) (Schedule B, Column B, line 1h)			11			•	Part III, Line M						
	DUCTIONS							,						
12.	Section 179 deduction			12	•	•	•	Part III, Line N						
	a. Contributions			13a	•	•	•	Part III, Line O						
	b. Investment interest expense			13b	•	•	•	Part III, Line P						
14.	Other deductions			14	•	•	•	Part III, Line Q						
15.	Oil and gas depletion			15	•	•	•	Part III, Line R						
16.	Casualty losses			16	•	•	•	Part III, Line S						
17.	Nonbusiness items (attach schedule) (Schedule B, Column D, line 1h) .	<u>.</u>	<u></u>	17			•	Part III, Line M						
TLC	HER													
18.	a. Tax-exempt interest income.			18a	•	•	•	Part III, Line T						
	b. Other tax-exempt income			18b	•	•	•	Part III, Line T						
	c. Nondeductible expenses			18c	•	•	•	Part III, Line U						
19.	a. Distributions of cash and marketable securities			19a	•	•	•	Part III, Line V						
	b. Distributions of other property			19b	•	•	•	Part III, Line V						
20.	a. Investment income			20a	•	•	•	Part III, Line W						
	b. Investment expenses			20b	•	•	•	Part III, Line X						
	c. Other items and amounts (attach statement)			20c	•	•	•	Part III, Line Y						
1	Total gradita (attach Cahadula DC)			21				Dart II Lino E						

22

22. Composite payment made on behalf of owner

Part III, Line Z



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	(e) Ordinary Income From Alabama Sources	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
	(d) Ordinary Income From All Sources	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
	(c) Employer Identification Number	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	A
	Estate of Trust		•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
	/ 🐼 /	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
SCHEDULE P PARTNERSHIPS, TRUSTS, AND ESTATES	Ordinary income or (loss) from Partnerships, Trusts and Estates. Name and Address Check One																				1 TOTAL INCOME OR (LOSS). Add the amounts in columns (d) and (e). Enter the total here and include the amount from line 1d on page 1, line 4