

For the tax year beginning



ALABAMA DEPARTMENT OF REVENUE INCOME TAX ADMINISTRATION DIVISION

Subchapter K Affidavit of Exemption by Nonresident

and ending

This form is to be completed by a nonresident member to certify exemption from AL Code §40-18-24.2. This form should be returned to the entity before the original due date of the entity's return and a copy should be attached to the entity's composite and income tax return each year.						
	TO BE COMPLETED BY NO	NRESIDI	ENT MEMBER			
NAME OF NO	DNRESIDENT MEMBER		FEIN OF NONRESIDENT MEMBER	TELEPHONE NUMBER		
STREET ADI	DRESS			-1		
CITY		STATE		ZIP		
	INFORMATION OF ENTITY RI	<u> </u> EQUESTII	NG EXEMPTION			
NAME			FEIN OF ENTITY	TELEPHONE NUMBER		
STREET ADI	DRESS					
CITY		STATE		ZIP		
• <u> </u>	Real Estate Investment Trust (REIT) Must not be a captive REIT pursuant to AL Code §40-18- This election is required only once. Copies of original affidate By checking the box above, the above named member here! a. Agrees to be subject to the personal jurisdiction in this liabilities due for all years in which it is a member and derives income from AL sources. b. Has provided the requesting entity the signed original the entity's income tax return for the taxable year for w. c. Will make estimated income tax payments if required; d. Certifies that it will not owe any taxes as a result of the Exempt organization (annual election required) The above named member hereby certifies that its share of the business taxable income. Insurance company member (annual election required) The above named member hereby certifies that it pays to Alaincome tax.	vit should by certifies state for a the entity of this form which the cand e dividends taxable inc	s that it: all income tax purposes, file owns property in AL, does b on on or before the due date omposite exemption is bein s paid deduction entitled to I	s returns and pays all AL tax usiness in AL, or otherwise (without extension) for filing g requested. REITS. oes not result in unrelated		
• 🗌 4.	Pre-Approved Tiered Structure Exemption (prior written	approval	required and a copy mus	t be attached each year)		

- By checking the box above, the above named member hereby certifies that it:

 a. Elects to remit a composite payment on behalf of its nonresident members' shares of the taxable income sourced to this
 - a. Elects to remit a composite payment on behalf of its nonresident members' shares of the taxable income sourced to this state in the same manner and subject to the same requirements as the entity in which it owns a direct interest.
 - b. Agrees to be subject to the personal jurisdiction in this state for all income tax purposes together with related interest and penalties; and
 - c. Has provided the requesting entity the signed original of this form 30 days before the due date (without extension) for filing the entity's income tax return for the taxable year for which the composite exemption is being requested.



Email Address



• 5. Capital Credit Exemption (annual election required)					
By checking the box above, the above named member her	eby certifies that it:				
a. Has only AL sourced income that is derived from the offset by the capital credit.	•	xpects all of its po	otential liability to be fully		
 Agrees to be subject to the personal jurisdiction in the and penalties; and 	s state for all income ta	x purposes toget	ther with related interest		
c. Has provided the requesting entity the signed origina the entity's income tax return for the taxable year for 6. C Corporations with losses (annual election required)					
By checking the box above, the above named member her	eby certifies that it:				
 a. Is a C-Corporation that has been in a loss position for tion for the current. 	•	tax years and ex	pects to be in a loss posi-		
b. Has provided this form to the entity in which it is a member on or before the due date (without extension) for filing the					
entity's income tax return for the taxable year for which the composite payment is required; and					
c. Will make estimated income tax payments, if require	d.				
returned to the entity before the original due date of the entity's and income tax return each year. I authorize a representative of the Department of Revenue to dispreparer named below. UNDER PENALTIES OF PERJURY, I swear that the above informat complete.	scuss this form with the	entity requesting	exemption and any		
Signature of authorized person(s)		Date			
Print name(s) and title(s) of the authorized person(s)					
Paid Preparer's Use Only					
Preparer's Signature	Check if self-employed	Date	Preparer's PTIN		
	Telephone No.	ELN	,		
Firm's Name (or yours if self-employed)and address	()	E.I. No.			

ZIP Code