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Alabama Department of Revenue S Corporation Information/Tax Return

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FY ● 🔲	2021
SY ● 🔲	ZUZ I

For the year Jan. 1	- Dec. 31, 2021, or other tax year b	eginning •	, 2021, er	iding •	<u></u>	<u> </u>	3 Week ● 🔲	
► Important	FEDERAL BUSINESS CODE NUMBER	FED	ERAL EMPLOYE	R IDENTIFICATION NUMBER		_	ing Status: (see instruc	,
Check applicable box:	NAME						Corporation operating of Alabama.	only in
	ADDRESS			SUITE			Multistate Corporation -	
● ☐ Initial Return	•						Apportionment (Sch. C) Multistate Corporation -	
Final	CITY		STATE	9-DIGIT ZIP CODE			Accounting (Prior writte	
• Return	STATE OF INCORPORATION	NATURE OF BUSINESS		DATE QUALIFIED IN ALABAMA	A		required and must be a Schedule B.	ttached) or
Amended Return	NUMBER OF SHAREHOLDERS DURING TAX YEAR	NUMBER OF NONRESIDENT SHAREHOLDE INCLUDED IN COMPOSITE FILING ■	RS	FEDERAL AUDIT CHANGE	S STATUS ELECTION TERMINAT		ELECTING PASS-THROUGH ENTITY	• 🗌
				1. 1				
	b. Returns and allowances			. 1b ●				
		from line 1a						
Federal		deral Form 1125-A)						
Income	3. Gross Profit. Subtract line 2 fr	rom line 1c						
	1	Form 4797, Part II, line 17 (attach Fed		,				
		tatement)						
	· ' '	lines 3 through 5						
	'	-1						
	, , ,	oloyment credits)						
	· '							
						10 •		
Federal						12		
Deductions								
(see the		Federal Form 1125-A or elsewhere or				-		
instructions for limitations)	· ·		•	•				
	15. Depletion (Do not deduct oil and gas depletion) 16. Advertising							
		plans						
		ement)						
	20. Total deductions (add lines 7	through 19)				. 20 •		
	21. Federal ordinary business inc	come (loss). Subtract line 20 from line	6			. 21 •		
	22. Alabama Nonseparately State	ed Reconciliations (from Schedule A,	line 13)			. 22 •		
	23. Federal ordinary business inc	come (loss) adjusted to Alabama basi	s (add lines 2	21 and 22)		. 23 •		
	24. Net nonbusiness (income)/los	ss – Everywhere (from Schedule B, li	ne 1d, Colum	n E)				
	1	egative amount and losses as a posit						
Alabama	1	nes 23 and 24)				. 25 •		
Adjustments		r (from line 9, Schedule C)						%
	, , , , ,	Alabama (multiply line 25 by line 26)						
	· ·	s) – Alabama (from Schedule B, line		•		-	,	
		nce Premium Deduction (see instruc						
		ss) (add lines 27, 28, and 29) passive income, ● ☐ LIFO Recaptu						
		Schedule PC, Part T, line 4)						
		less line 32)						
	34. Tax Payments and Credits	Prior year line 32						
		ents and amount applied from 2020 re	eturn	. 34a •				
_		instructions)						
	c. Prior payments (original re	eturn or department adjustment)		. 34c •				
Tax Due	d. Refundable Credits (from S	Schedule PC, Part T, line 8)		. 34d •				
	e. Total payments/credits (ad	ld lines 34a, 34b, 34c, and 34d)		. 34e •				
	35. Reductions/applications of ov	erpayments						
		ax						
		Check if Form 2220AL Attached •						
		applications (add lines 3 <mark>5</mark> a through 3						
		ne 33 less line 34e, plus 35c)				. 36		
	It paying by check or money orde	r, <u>Form Pte-v Must Accompan</u>	IY PAYMENT	. It you paid electronically,	, check here • 🔲			

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SCHEDULE A	– (l	Nonseparately Stated Reconciliation Adjustments)		
	1.	State and Local income taxes paid	1	•
	2.	Related members interest and intangible expenses or costs. From Schedule PAB (see instructions)	2	•
Additions	3.	Other reconciling items (attach schedule)	3	•
Additions		Nondeductible Federal Depreciation (Economic Stimulus Act of 2008) (see instructions)		•
	5. Contributions not deductible on state income tax return due to election to claim state tax credit. New line 5		5	•
	6.	Total Additions	6	•
	7.	Expenses not deductible on federal income tax return due to election to claim federal tax credit	7	•
	8.	Refunds of state and local income taxes (due to overpayment or over accrual on federal return)	8	•
	9.	Aid or assistance provided to Alabama State Industrial Development Authority (§41-10-44.8(d))	9	•
Deductions	10.	Other reconciling items (attach schedule)	10	•
	11.	Adjustments due to Federal Economic Stimulus Act	11	•
	12.	Total Deductions	12	•
	13.	Total Reconciliation Adjustments (subtract line 12 from line 6 above)	13	•

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 GF	ROSS INCOME / LOSS	RELAT	ED EXPENSE	NET OF REL	ATED 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)		•		•	•	•	

										_
Under penalties of perjui	ry, I declare that I have examined this ret	turn and accompar	ying schedules a	nd stateme	nts, and to			dge and b	elief, they are	
Signature of Officer			Date	Day	ime Telepho	ne No.	ne No. Social Security No.			_
Title of Officer										
Preparer's Signature			Check if self-employed		Date •		•	Preparer	's PTIN	
Firm's Name (or yours ●			Telephone No.			E.I. No. ●				
and address						ZIP Code	•			
Email Address										
for information regardin	g this return:									
• ()										
	Under penalties of perjuitrue, correct, and complete Signature of Officer Title of Officer Preparer's Signature Firm's Name (or yours of self-employed) and address Email Address for information regarding	Under penalties of perjury, I declare that I have examined this rettrue, correct, and complete. Declaration of preparer (other than tax) Signature of Officer Title of Officer Preparer's Signature Firm's Name (or yours fi self-employed) and address for information regarding this return:	Under penalties of perjury, I declare that I have examined this return and accompant true, correct, and complete. Declaration of preparer (other than taxpayer) is based on Signature of Officer Title of Officer Preparer's Signature Firm's Name (or yours of self-employed) and address of self-employed and address of the self-employed and address of the self-employed and address of the self-employed and se	Under penalties of perjury, I declare that I have examined this return and accompanying schedules a true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of Signature of Officer Date	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and stateme true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer of Officer Date	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has are signature of Officer Date	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of retrue, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge of Officer Date	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowled true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of Officer Title of Officer Preparer's Signature Check if self-employed	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 be true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature	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

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SCHEDULE C – Apportionment Factor Schedule. Do not complete if entity operates exclusively in Alabama.						
SALES		ALABAMA	EVERYWHERE			
Gross receipts from sales	1	•	•			
2. Dividends	2	•	•			
3. Interest	3	•	•			
4. Rents	4	•	•			
5. Royalties	5	•	•			
6. Gross proceeds from capital and ordinary gains	6	•	•			
7. Other ●(Federal 1120S, line ●)	7	•	•			
8. Total Sales (add lines 1-7)		8a●	8b●			
9. 8a/8b=ALABAMA APPORTIONMENT FACTOR (Enter here and on line 26, page 1)				9	•	

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

SCHEDULE D – Apportionment of Federal Income Tax ("FIT") (LIFO Recapture Tax Only)		
1. Enter the LIFO recapture tax from Federal Form 1120S, line 22a	1	•
2. Alabama Apportionment Factor (Schedule C, line 9)	2	%
3. Federal income tax apportioned to Alabama (multiply line 1 by line 2) Enter here and on line 16 of Schedule K	3	•

SCHEDULE E – Alabama Accumulated Adjustments Account		
1. Balance at beginning of tax year	1	•
2. Apportionable Income (page 1, line 23)	2	•
3. Other additions	3	•
4. Other reductions.	4	•
5. Combine lines 1 through 4	5	•
6. Less distributions (page 4, line 19 federal amount)	6	• (
7. Balance at end of tax year. Subtract line 6 from line 5	7	•

SCHEDULE DE – Q-Sub/Disregarded Entity Schedule			
List all qualified subchapter S subsidiaries (Q-Sub) and/or disregarded entities. Attach additional schedule(s)) if needed.		
Entity Name	FEIN	Income (Loss) From All Sources	Alabama Source Income (Loss)
1. ●	•	•	•
2. •	•	•	•
3. ●	•	•	•
4. •	•	•	•
5. • Added lines 6-13 on Sch DE	•	•	•
6. ●	•	•	•
7. •	•	•	•
8. •	•	•	•
9. •	•	•	•
10. ●	•	•	•
11.	•	•	•
12. •	•	•	•
13. ●	•	•	•

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SCHEDULE G – Other Information Indicate tax accounting method used: ● ☐ Cash ● ☐ Accrual ● ☐ Other									
1.	1. Briefly describe your Alabama operations: ●								
2.	ocation of the corporate records: •								
3.	f the privilege tax return was filed using a different FEIN, please provide the name and FEIN used to file the return:								
	EIN: ● NAME: ●								
4.	f the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the								
	basis of any other property) in the hands of the C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-								
	n gain reduced by net recognized built-in gain from prior years \$ •								
5.	inter the accumulated earnings and profits of the corporation at the end of the tax year. \$								
	uring the tax year, did the corporation have any non-shareholder debt that was canceled, forgiven, or modified terms so as to reduce the principal amount of the debt? • \(\subseteq \text{ Yes} \) \(\subseteq \subseteq \subseteq No								
	uring the tax year, was a qualified subchapter S election terminated or revoked? ✓ Yes ✓ No								
	Did the corporation make any payments in 2021 that would require it to file Form(s) 1099? ● ☐ Yes ● ☐ No								
SCHEDULE K – Shareholder's Distributive Share Items					Amenticament Amenticaed Enter on Aleberra				
Multistate entities should not use Schedule K to allocate separately stated business income. See instructions for Schedule B.					Federal Amount	Apportionment Factor	Apportioned Amount	Enter on Alabama Schedule K-1	
INCOME (LOSS)									
	Ordinary income (loss) (page 1, line 30)			1			•	Part III, Line G	
	let rental real estate income (loss) (attach Form 8825)			2	•	•	•	Part III, Line H	
	a. Other gross rental income (loss)							Fait III, Line II	
٠.	b. Expenses from other rental activities (attach statement)			-					
	c. Other net rental income (loss). Subtract line 3b from line 3a			0-				Dort III 1 in a 11	
1	Interest income.			3c	•	•	•	Part III, Line H	
	ridends			4	•	•	•	Part III, Line J	
	alties		5	•	•	•	Part III, Line J		
				6	•	•	•	Part III, Line J	
7.	a. Short-term and long-term capital gain(loss)			4					
	b. Opportunity Zone Investment(from Schedule OZ, line 4)	-		1					
	c. Exemption of gain under 40-18-8.1(Tech Company)		,	7d					
		Net short-term and long-term capital gain(loss), Add lines 7a, 7b and 7c			•	•	•	Part III, Line K	
	et section 1231 gain (loss) (attach Form 4797)			8	•	•	•	Part III, Line K	
	ther income (loss)			9	•	•	•	Part III, Line L	
	Nonbusiness items (attach schedule) (Schedule B, Column B, line 1h)			10			•	Part III, Line M	
DEDUCTIONS									
11.	Section 179 deduction			11	•	•	•	Part III, Line N	
12.	a. Contributions.			12a	•	•	•	Part III, Line O	
	. Investment interest expense			12b	•	•	•	Part III, Line P	
13.	ther deductions			13	•	•	•	Part III, Line Q	
14.	il and gas depletion			14	•	•	•	Part III, Line R	
15.	Casualty losses			15	•	•	•	Part III, Line S	
16.	J.S. taxes paid.			16			•	Part III, Line AA	
17.	Nonbusiness items (attach schedule) (Schedule B, Column D, line 1h) \dots			17			•	Part III, Line M	
OTH	OTHER								
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.	istributions (attach statements if required)			19	•	•	•	Part III, Line V	
20.	a. Investment income			20a	•	•	•	Part III, Line W	
	b. Investment expenses				•	•	•	Part III, Line X	
	c. Other items and amounts (attach statement)			20c	 	•	•	Part III, Line Y	
21.	Total credits (attach Schedule PC)			21			•	Part II, Line F	
	Composite payment made on behalf of owner			22			•	Part III, Line Z	
	Repayment of loans from shareholders			23	•	•	•	Part III, Line AB	
	Dividend distributions paid from accumulated earnings and profits			24	•	•	•	Part III, Line AC	
	Electing Pass-Through Entity Tax (Form EPT, line 2).			25			•	T GIT III, EIIIO 710	
							1		