

ALABAMA DEPARTMENT OF REVENUE INCOME TAX ADMINISTRATION DIVISION



S-Corporation / Partnership Income Tax Declaration for Electronic Filing

	For the tax period	, 20	, through			,	20	
NAME C	DF COMPANY					FEDERAL EMPLO	YER IDENTIFICATION NUMBER	7
ADDRES	SS OF COMPANY					TELEPHONE NUM	BER	
PAR	Tax Return Information (Whole Do	ollars Only)						
1 Ala	abama Ordinary Income or Loss (Form 20S, line	e 30; Form 65, line 31) .			. 1			
2 Tot	al tax liability (Form 20S, line 31; Form PTEC, li	line 1; Form EPT, line 4)			. 2			
3 Tot	al payments and credits (Form 20S, line 34e; Form 20S, line 34e; F	orm PTEC, line 5d; Forr	n EPT, line 5	if)	. 3			
4 Tot	al reductions/applications (Form 20S, line 35c; I	Form EPT, line 7d)			. 4			
5 Re	fund (Negative number reported on Form 20S, I	line 36; Form PTEC, line	ə 7b; Form E	PT, line 8)	. 5			
6 Am	nount due (Positive amount reported on Form 20	0S, line 36; Form PTEC,	, line 6; Form	n EPT, line 8)	6			
7 Am	nount of payment remitted electronically				. 7			
mediate To the tand acc an ackn	penalties of perjury, I declare that I am an officer/partner of e service provider (ISP) and the amounts in Part I above ago best of my knowledge and belief, the company's return is to companying schedules and statements to the Alabama De nowledgment of receipt of transmission and an indication o and software to prepare and transmit this business return	ree with the amounts on the c rue, correct, and complete. I epartment of Revenue. I also of whether or not the company	corresponding lin consent to my E consent to the y's return is acc	nes of the comp ERO, transmitte Alabama Depar cepted, and, if re	any's Ala r, and/or tment of ejected, t	bama S-Corporatio ISP sending the cor Revenue sending n he reason(s) for the	n/Partnership income tax retu mpany's return, this declaration ny ERO, transmitter, and/or IS rejection. By using a compu	rn on SF tei
🗌 l a	siness return and to the electronic transmission of this busi authorize the Alabama Department of Revenue and its des and in the tax preparation software for payment of the corpor	signated Financial Agent to ini	itiate an electro	nic funds withdr		, .		t
la	authorize a representative of the Department of Revenue to	o discuss my return and attac	chments with my	y preparer.				
Sign Here					•			
	Signature of Officer/Partner		Date	I	Title			_
PAR	TIII Declaration of Electronic Return O	riginator (ERO) and F	Paid Prepar	er <i>(See Ins</i>	tructio	ns)		
not resp I will giv and Par I am als knowled of all int	e that I have reviewed the above company's return and that consible for reviewing the return and only declare that this for re the officer a copy of all forms and information to be filed rticipation, and Pub. 4163, Modernized e-File Information for so the Paid Preparer, under penalties of perjury I declare t dge and belief, they are true, correct, and complete. By usi formation pertaining to my use of the system and software ue.This Paid Preparer declaration is based on all information	form accurately reflects the da with the Alabama Departmer for Authorized IRS e-file Provi that I have examined the abc sing a computer system and s e to create my client's return a	ata on the return at of Revenue, a iders and Pub. ove company's oftware to prepa and to the elect	. The company and have followe AL4164 Softwa return and acco are and transmi	's officer ed all oth re Develo mpanying t my cliei	will have signed this er requirements in F opers and Transmitt g schedules and sta nt's return electronic	form before I submit the retu Pub. 3112, IRS e-file Applicati ters Guidelines and Schemas atements, and to the best of r cally, I consent to the disclosu	rn ior . I my ure
ERO'	s signature	Date		Check if also paid preparer		heck if elf-employed	ERO's PTIN	
Use	Eirm's name (or yours					FIN		

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.

Paid	Preparer's signature		Chec self-e	k if employed	Prepare	r's PTIN
Preparer's	Firm's name (or yours if self-employed),			EIN		
Use Only	address and ZIP code			Phone No. ()	

ERO must retain this form for a period of three years from the due date of the return or the date the return was filed, whichever is later. Do not submit this form to the Alabama Department of Revenue unless requested to do so.

Only

Firm's name (or yours if self-employed), address and ZIP code EIN

Phone No. (

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