



FORM EPT



Alabama Department of Revenue
Income Tax Administration Division

CY, FY, SY, 52/53 Week

2021

Electing Pass-Through Entity Payment Return

For the year January 1-December 31, 2021 or other tax year beginning, 2021, ending

This form is used to make the required payment for an Alabama S Corporation or Subchapter K Entity that elects to be taxed as an Electing Pass-Through Entity.

Check applicable box: Subchapter K entity, S corporation. Check if amended: Amended return, 2220AL Attached, Federal Audit Change. Fields for FEDERAL EMPLOYER IDENTIFICATION NUMBER, FEDERAL BUSINESS CODE, NAME, ADDRESS, SUITE, CITY, STATE, ZIP CODE, CONTACT PERSON CONCERNING THIS FORM, CONTACT PERSON'S PHONE NO.

DO NOT ATTACH TO OR MAIL WITH FORM 65 OR 20S, THIS FORM MUST BE MAILED SEPARATELY.

Table with 8 main rows and sub-rows (a-d) for payments and credits. Columns include line numbers and checkboxes for amounts.

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.

Please Sign Here

Signature line with fields for Your Signature, Title or Position, Daytime Telephone No., and Date.

Preparer's Signature, Date, Check if self-employed, Preparer's PTIN

Preparer's Printed Name

Paid Preparer's Use Only

Firm's Name (or yours, if self-employed) and Address, E.I. Number, Telephone Number

Make remittance payable to: Alabama Department of Revenue. Write - Form EPT, tax year, and FEIN on remittance for verification purposes. Include with payment Form PTE-V available at www.revenue.alabama.gov.

Mail to: Alabama Department of Revenue - EPT, P.O. Box 327444, Montgomery, AL 36132-7444



SCHEDULE
EPT-K1



ALABAMA DEPARTMENT OF REVENUE

2021

Entity's FEIN

(FORM EPT)

For the year January 1 - December 31, 2021 or other tax year beginning _____, 20____ ending _____, 20____

	(A) Owner's/Shareholder's Name, Street Address, City, State, and ZIP	(B) Social Security Number/FEIN	(C) Entity Type	(D) Percent Ownership	(E) Taxable Income	(F) Owner's/Shareholder's Share of Tax Due (Col. E X 5%)
1	●	●	●	●	●	●
2	●	●	●	●	●	●
3	●	●	●	●	●	●
4	●	●	●	●	●	●
5	●	●	●	●	●	●
6	●	●	●	●	●	●
7	●	●	●	●	●	●
8	●	●	●	●	●	●
9	●	●	●	●	●	●
10	●	●	●	●	●	●
11	●	●	●	●	●	●
12	Totals page 2 [columns (E) through (F)]					
13	Summary totals for additional pages [columns (E) through (F)]					
14	Add lines 12 and 13, column (E). Enter here and on Form EPT, page 1, line 1.					
15	Add lines 12 and 13, column (F). Enter here and on Form EPT, page 1, line 2.					

IF MORE THAN 11 OWNERS/SHAREHOLDERS, ATTACH ADDITIONAL PAGES AND ENTER SUMMARY TOTALS ON LINE 13 ABOVE.



SCHEDULE
EPT-K1



ALABAMA DEPARTMENT OF REVENUE

2021

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1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13 Add lines 1 through 12, column (E) and column (F). Enter here and on Page 2, line 13					