40NR 2022 Alabama Individual Income Tax Return NONRESIDENTS ONLY Spouse's SSN Your social security number if joint return ___ Check if primary is deceased Check if spouse is deceased Primary's deceased date (mm/dd/yyyy) Spouse's deceased date (mm/dd/yyyy) Your first name Initial Last name Spouse's first name Initial Last name Present home address (number and street or P.O. Box number) CHECK BOX IF AMENDED RETURN ● City, town, or post office State ZIP code Check if address is outside U.S. Filing Status/ \$1,500 Married filing separate. Complete Spouse SSN • NRA \$1,500 Single 3 • **Exemptions** \$3,000 Married filing joint \$3.000 Head of Family (with qualifying person), Complete Schedule HOF. A - Alabama Tax Withheld B - All Sources C - Alabama Income 5 Wages, salaries, tips, etc. (From Schedule W-2, line 18, columns G, 5 5 5 6 6 • Total income. Add amounts in col. B then add amounts in col. C, lines 5 and 6 7 7 • Income Adjustments to income (from page 2, Part II, line 8)..... 8 and Adjusted total income. Subtract line 8 from line 7 9 9 • Adjustments Alabama percentage of adjusted total income. Divide line 9, col. C, by line 9, col. B (not over 100%)..... 10 % Other Adjustments (from page 2, Part III, line 4 and line 6)..... 11 11 Adjusted Gross Income. Subtract line 11 from line 9..... 12 Box a or b MUST be checked **Deductions** Check appropriate box. If you itemize, enter amount from Schedule A, line 30. Itemized Deductions • b Standard Deduction 13 You Must Attach a Complete copy of Federal Return, if claiming a deduction 17 Taxable income. Subtract line 17 from line 12, column C..... 18 Tax Net tax due Alabama. Check box if computing tax using Schedule OC ● ☐, otherwise enter amount from line 19...... 20 21 Alabama Income Tax withheld (from column A, line 5)..... 2022 estimated tax payments/Automatic Extension Payment..... Composite tax payments/Electing PTE credit (from Schedule CP, Section B, line 1)... 23 **Payments** Staple Form(s) W-2, Refundable Credits. Enter the amount from the Schedule OC, Section F, line F4 | 25 | W-2G, and/or 1099 here Attach Sched-Total payments. Add lines 21 through 25 26 ule W-2 to return. Amended Returns Only – Previous refund (see instructions).... 27 28 If line 20 is larger than line 28, subtract line 28 from line 20, and enter AMOUNT YOU OWE. **AMOUNT** Place payment, along with Form 40V, loose in the mailing envelope. (FORM 40V MUST ACCOMPANY PAYMENT.) 29 YOU OWE If line 28 is larger than line 20, subtract line 20 from line 28 and enter AMOUNT **OVERPAID**...... 31 **OVERPAID** 32 32 Amount of line 31 to be applied to your 2023 estimated tax..... 33 REFUNDED TO YOU. Subtract line 32 from line 31. **REFUND** 33 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. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sian Here Date Daytime Telephone Number Your Occupation In Black Ink Кеер а сору

ADOR

F I Number

Code

Daytime Telephone Number

Daytime

Telephone No

Check if Self-employed

Spouse's Occupation

Prenarer's SSN or PTIN

Date

Date

of this return

for your records

Paid Preparer's

Use Only

Spouse's Signature (if joint return, BOTH must sign)

Preparer's Signature

Firms's Name (or yours

if self employed)



				B – All Sources		C – Alabama Income	
PART I	1	Interest and dividend income (attach Schedule B if over \$1500.00)	1	•	1	1 •	
		Alimony received		•			
	3	Taxable portion of pensions and annuities (see instructions)	3	•			
	4	Business income or (loss) (attach Federal Schedule C) (see instructions)	4	•	7 4	4 •	
Other	5	Gain or (loss) from sale of Real Estate, Stocks, Bonds, etc. (attach Schedule D)	5	•	5	5 •	
Income		Rents, Royalties, Partnerships, Estates, Trusts, etc. (attach Schedule E)	_	•	6	5 ●	
(See instructions)		Farm income or (loss) (attach Federal Schedule F) (see instructions)		•	_	7 •	
monucionoj		Other income (state nature and source)	8		_	3 •	
		Total other income. Add lines 1 through 8, column B, and lines 1, 4 through 8, column C.					
		Enter here and also on page 1, line 6	9	•	و ا	•	
PART II		1 IRA deduction, Keogh retirement plan, and self-employed SEP deduction	-	•	_	1 •	
		Penalty on early withdrawal of savings		•	+		
		3 Moving Expenses (Attach Federal Form 3903)	`		1		
		Place of new employment:					
Adjustmen	s	rides of new employment.	3	•	١,	3	
to Income		4 Self-employed health insurance deduction			+	1 •	
(See		5 Payments to Alabama College Counts 529 Fund or Alabama PACT program	·	•	-	5 •	
instructions)		6 Firefighter's Insurance Premiums	`-	•	_	6 •	
		7 Contributions to an Achieving a Better Life Experience (ABLE) savings account	`—	•	_	7 •	
		Adjustments to income. Add lines 1 through 7, Column B, and lines 1, 3 through 7, Column C.	`-		+	, -	
		Enter here and also on page 1, line 8, columns B and C		•	١	8	
PART II	_	1 Alimony Paid		•	+	, -	
ranı II		2 Adoption Expenses	`	•	+		
Other		3 Health insurance deduction for small employer employee		•	+		
Adjustmen	S		·—	•	+		
(See		4 Add lines 1 through 3, enter here and on page 1, line 11, column B	`	• %	+		
instructions)		5 Enter the percentage from page 1, line 10	_	•	\exists		
PART I		6 Multiply line 4 by line 5. Enter here and also page 1, line 11, column C	- "		+	C – Alabama Federal	
FANII		If you are filing separately on your Alabama return and jointly on your Federal return, complete all lines below. Otherwise, omit lines 1 through 3.		B – Federal Adjusted Gross Income		Tax Deduction Computation	ion
		Your joint federal adjusted gross income	1	•		· ·	
Federal		2 Your federal adjusted gross income			+		
Income Tax		3 Divide line 2 by line 1. Enter percentage here			┨,	3	%
Deduction						1 •	/0
(See instructions)		4 Enter the Federal Income Tax Liability from worksheet (see instructions)			-	5 •	
instructions)		5 If you completed lines 1 through 3 above, multiply line 4 by the percentage from line 3 6 Enter the percentage from page 1, line 10			·—	6 •	%
						7 •	70
PART V		 If you completed lines 1-3 above, multiply line 5 by percentage on line 6. Otherwise, multipl Total number of dependents from Schedule DS, line 1b 	y III IE	4 by percentage on line 6	+	1 •	
raiii v		Multiply total number of dependents from scriedule bs, line 1b	 in t	ho instructions	·—	2 •	
Dependent	_				1	3 •	%
Dopondoni		3 Enter the percentage from page 1, line 10 of your return			`—	1 •	/0
PART V		4 Dependent exemption allowable. Multiply the amount on line 2 by the percentage on line 3. Name of state of which you were a legal resident in 2022	EIILE	i nere and on page 1, line 10		• •	
General		Did you file a return with that state for 2022? Yes No If no, state reason why:					
Information	1	If married, did your spouse receive a separate income for 2022? Yes No If yes	. io v	your analysis filing a congrete Ale	hom	a return? Yes	No
		If yes, enter name here.	o, 10 y	roui spouse illing a separate Ala	waiii	la letuili: les	
All Taxpayer Must Comple							
This Section							
	9	Give name and address of your present employer(s). Yours: Your Spouse's:					
(See	c	Enter the Adjusted Gross Income reported on your 2022 Federal Individual Income Tax Retu	ırn				
instructions)				·····	_ b	•	
Drivers DOB	d/yvvv	A DI # DI	date n/dd/y\	/yy) •	Exp d (mm/c	date dd/yyyy) •	
License (mm/c DOB (mm/c	d/vvv	Snouse	date	/yy) •	Exp d		
()	1111	,	11		,		





Alabama Department of Revenue Schedule A–Itemized Deductions

2022

(Schedules B, D, and E are on back) ATTACH TO FORM 40NR — SEE INSTRUCTIONS FOR SCHEDULE A

Name(s) as shown on	Forr	m 40NR				You	ur social security number	
The itemized deductionstructions before constructions	tions ompl	you may claim for the year 2022 are similar to the itemized deductions claimed deting this schedule.	on you	ır Federal return; howeve	er, th	ne an	nounts may differ. Pleas	se see
		CAUTION: Do not include expenses reimbursed or paid by others.						
Medical and	1	Medical and dental expenses	1		00			
Dental Expenses	2							
	3	Multiply the amount on line 2 by 4% (.04). Enter the result.	3		00			
		Subtract line 3 from line 1. Enter the result. If zero or less, enter –0–				4	•	00
	5	Real estate taxes.	5		00			
	6	FICA Tax (Social Security and Medicare) and Federal Self-Employment Tax	6		00			
Taxes You Paid	7	Railroad Retirement. (Tier 1 only)	7		00			
Tuntoo Tou Tunu	8	Other taxes. (List – include personal property taxes.)						
	·		8	1	00			
	9	Add the amounts on lines 5 through 8. Enter the total here.				9	•	00
	_	Home mortgage interest and points reported to you on Federal Form 1098	10a		00	_		
		Home mortgage interest not reported to you on Federal Form 1098. (If paid						
Interest You Paid	-	to an individual, show that person's name and address.)						
		an marriada, onon that poroon o mario and address.						
			10b		00			
NOTE: Personal	11	Qualified mortgage insurance premiums	11		00			
interest is not deductible.	12	Points not reported to you on Form 1098.			00			
ueuuciibie.	13	Investment interest. (Attach Form 4952A).			00			
		Add the amounts on lines 10a through 13. Enter the total here.	-			14	•	00
		CAUTION: If you made a charitable contribution and received a benefit in return,	· · · · · ·					
		see instructions.						
Gifts to Charity	15		15	(00			
ditio to onanty	16	Other than cash or check. (You MUST attach Federal Form 8283 if over \$500.)	16		00			
	17	Carryover from prior year			00			
		Add the amounts on lines 15 through 17. Enter the total here.				18	•	00
Qualified		CAUTION: Do not include medical insurance premiums.			• • •			
Long-Term Care	19	Enter Amount				19	•	00
-	20	Other (from list in the instructions). List type and amount.						
Miscellaneous					-			
Deductions					-			
					-	20	•	00
Proration of	21	Total itemized deductions to be prorated. (Add lines 4, 9, 14, 18, 19, and 20.)				21	•	00
Above Amounts	22	Enter percentage (%) from Form 40NR, page 1, line 10			_ F	22	•	%
	23	Multiply line 21 by the percentage on line 22.			_ F	23	•	00
	24a	Enter the loss from Federal Form 4684,either A \square line 15, or B \square line 16, attach copy.	24a		00			
Alabama		Enter 10% of your Adjusted Gross Income (Form 40NR, line 12, column C)						
Casualty and			24b		00			
Theft Losses	С	Subtract line 24b from line 24a. If zero or less, enter –0–				24c	•	00
	25	Unreimbursed employee expenses — job travel, union dues, job education, etc.						
Alabama		(You MUST attach Federal Form 2106 if required. See instructions.)						
Job Related		>	25		00			
Expenses	26	Other expenses (investment, tax preparation, safe deposit box, etc.). List type						
		and amount. ▶	26		00			
You may ONLY	27	Add the amounts on lines 25 and 26. Enter the total here.	27		00			
deduct expenses	28	Multiply the amount on Form 40NR, line 12, column C by 2% (.02).						
associated with your		Enter the result here.	28	1	00			
Alabama income.	29						•	00
Total Itemized	30	Add the amounts on lines 23, 24c, and 29. Enter the total here. Then			+			
Deductions		enter on Form 40NR, page 1, line 13 and check 13a, Itemized Deductions				30	•	00



Sch. A, B, D, & E (Form 40NR) 2022

Page 2

Nar	me(s) as shown on Form 40NR (Do not ent	ter name and socia	al security numbe	er if shown on other s	side)					Your so	ocial se	ecurity number	
SC	CHEDULE B – Interest and Divi	dend Income								В.		C	
1	Total Income from Interest and Dividends	before any exclus	ions		. ▶	1		00		Adjusted Gro Income from	SS n	Adjusted Gro	28(28
2	List all interest received from obligations of	of the Federal Gov	ernment, State of	Alabama, and	f					All Sources		in Alabama	
	political subdivisions of Alabama.												
	a					2a		00					
	b				_	2b		00					
	с				-	2c		00					
	d				-	2d		00					
3	Total. Add amounts on lines 2a, b, c, and	d				3		00					
	TOTAL TAXABLE INCOME FROM INTE				٠, ٢	-		100					
•	Enter here and also on Form 40NR, page								4	•	00	•	00
SC	CHEDULE D – Profit From Sale										100		100
	TIESTE STATE OF THE STATE OF TH	or riour Lota	10, 0100NO, D	01140, 010.						В		С	
1	Enter total gain or (loss), before any Fede	ral exclusion, from	the sale of all as	sets which is not ta	xable to	the State	of Alabama.		1	В	00	U	
	Itemize all other transactions which are ta						, , , , , , , , , , , , , , , , , , , ,	-			00	-	
	nomize an other transactions which are ta	b		<u> </u>			f						
а	Kind of Property & Location	Date	c Amount	d Depreciation	е (Cost or	Subseque	ent					
	Kind of Property & Location	Acquired	Received	Allowable Since Acquisition	Oth	ner Basis	Improveme	ents					
				710401011011									
	Totals												
	Net profit or (loss) (total of columns c and		,						4		00		00
5	TOTAL GAIN OR (LOSS) FROM SALE O												
	Enter here and on Form 40NR, page 2, P								5		00		00
	HEDULE E – Income From Re		s, Partnershi _l	ps, Estates, Tr	usts,	and S (Corporatio	ns					
	RT I — Rent and Royalty Income or	· ,								В		С	
1	Enter total income or (loss) from all rents a	and royalties which	n is not taxable to	Alabama				[1		00		
2	Itemize below all rent and royalty income	which is taxable to	Alabama.										
а			b Amount	^C Depreciation	d F	Repairs	e Other						
	Kind of Property & Location		of Rent	or Depletion	,	h itemized							
			or Royalty	(attach schedule)		list)	Itemized I	ist)					
3	Totals (columns 2b through 2e)												
	Net profit or (loss) (column b less sum of o	,	h 2e)						4		00		00
5	TOTAL INCOME FROM RENTS AND RO	DYALTIES. Add the	e amounts on line	es 1 and 4.									
	Enter the totals here and include in line 8	below						. ▶	5		00		00
PA	RT II — Income or (Loss) from Part												
	List income received from partnerships, es			2022. Income from	these s	ources no	t taxable to						
	Alabama should be listed in column B only			\ \&\ \	-\		Employer						
	from Alabama sources should be listed in	both columns B ar	nd C.	Parties of the check One	Corporation	.	Employer Identification	,					
	Name and Addre	ess	c	heck One	Is dallo		Number						
				2									
									6a		00		00
											00		00
									6b		00		00
									UD		00		00
									60		00		00
7	TOTAL INCOME OR (LOSS) FROM PAR	STNEBSHIDS S.C.	ORDOBATIONS	FOTATES AND T	Blicto				6c		00		100
'									7		00		00
D^	Add the amounts on lines 6a, b, and c. En	itel tile totals liefe	and include in lin	IE O DEIUW					7		00		00
	RT III — Summary			D O									1
ŏ	TOTAL INCOME OR (LOSS). Combine the								^		00		00
	Enter here and on Form 40NR, page 2, P	ari i, iirie 6, columi	is b and C						8		00		00





(Form 40 or 40NR)

Alabama Department of Revenue Dependents Schedule

NAME(S) AS SHOWN ON TAX RETURN

RIMARY'S SOCIAL SECURITY NUMBER SPOUSE'S SOCIAL SECURITY NUMBER

Schedule DS - Dependents Schedule

See instructions for definition of a dependent. **NOTE:** If you checked filing status 3 (Married filing separate), you may claim **only** the dependent(s) for whom you **separately** furnished over 50% of the total support.

1a Dependents. Do not include yourself or your spouse. (See Instructions)

First Name	Last Name	Dependent's Social Security Number	Dependent's Relationship to you	Did you provide more than one-half dependent's support?
		•		
		•		
		•		
		•		
		•		
		•		
		•		
		•		
		•		
		•		
		•		
		•		
1b Total number of dependents claime Form 40, Page 2, Part III, line 1 or	ed above. Enter total here and on Form 40NR, Page 2, Part V, line 1		1k) •

ADOR





PAGE 2

NAME(S) as shown on tax return (Do not enter name and social security number if shown on other side)

PRIMARY SOCIAL SECURITY NUMBER SPOUSE SOCIAL SECURITY NUMBER

Schedule HOF – Head of Family Schedule	
Complete the following information:	
Enter the dependent/qualifying person's name here:	
Dependents/qualifying person's Social Security Number:	
What is the dependent's/qualifying person's relationship to you:	
Do you rent or own the home maintained for the dependent/qualifying person?	Rent Own
Are you married, divorced, or legally separated?	Yes No
If you answered yes, please provide the following information:	
Date of Marriage?	
Date of Divorce?	
Date of Legal Separation?	
Did the dependent(s)/ qualifying person(s) reside with you in your home?	Yes No
Did you pay more than 50% of the dependent(s)/ qualifying person(s) support?	Yes No

ADOR

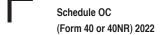




Alabama Department of Revenue Other Available Credits ATTACH TO FORM 40 OR 40NR

* Individual Credits must be submitted through My Alabama Taxes (MAT) before completion of the Schedule OC. See instructions for submission details.

before completion of the Schedule OC. See instructions for submission details.		
Name(s) as shown on Form 40 or 40NR	Your socia	Il security number
SECTION A Current Tax Period Liability. Enter tax amount from Form 40, page 1, line 17 or Form 40NR, page 1, line 19.		•
SECTION B Current Year Credits		1
PART A - Credit for Taxes Paid to Other States (Form 40 Only)		
A1. Sum of Alabama Adjusted Gross Income Attributable to all other States from Schedule CR, line 26		
A2. Alabama Adjusted Gross Income from Form 40, page 1, line 10		
A3. Total Other States' % of Alabama AGI (Divide line A1 by line A2)		
A4. Multiply the current tax liability (Section A) by line A3		
A5. Enter line 27 from Schedule CR		
A6. Credit Allowable (Enter smaller of lines A4 or A5). Enter here and on Section C, Part A, Column 3	A6	•
PART B - Alabama Enterprise Zone Credit or Exemption		
B1. Enter amount from Schedule EZK1, Part II, page 2, line 13, or Schedule EZ, Part IV, page 2, line 13. Enter here and on Section C, Part B, Column 3	B1	•
PART C - Basic Skills Education Credit		
Attach this schedule to your Alabama return along with a copy of your approved certification notice issued by the Alabama Department of Education.		
C1. Enter your assigned Department of Education Certification Number		
C2. Name of employer/firm sponsoring the education program		
C3. Name of approved providerLocation		
C4. Were all participants for whom you are claiming a tax credit continuously employed by you for at least 16 weeks?		
C5. If the answer to line C4 is yes, did employee(s) work at least 24 hours each week? Yes No		
C6. If the answer to lines C4 and C5 above is yes, enter the total expenses available for credit (see instructions)		
C7. CREDIT ALLOWABLE. Multiply line C6 by 20% (.20). Enter here and on Section C, Part C, Column 3	C7	•
PART D - Rural Physician Credit		
D1. Name of hospital and community where you live and provide medical services		
D2. Maximum Rural Physician Credit. Qualifying Physicians, enter \$5,000.		
If Married Filing Jointly (MFJ) and both spouses qualify for Rural Physician Credit, enter \$10,000		
D3. CREDIT ALLOWABLE. Enter the amount from line D2. Enter here and on Section C, Part D, Column 3	D3	•
PART E - Coal Credit*		
E1. CREDIT ALLOWABLE. Enter here and on Section C, Part E, Column 3	E1	•
PART F - Full Employment Act of 2011 Credit.* Owners of qualified employers that are entities taxed under subchapters S or K of the Inter-	nal	
Revenue Code will report their pro rata share of credit on line F6 below.		
Were you in business with 50 or fewer full and/or part-time employees on June 9, 2011? Yes No If "No", you do not qualify for this credit.		
F1 Number of full time employees on 12-31-2021		
F2 Number of full time employees on 12-31-2020		
F3 Subtract line F2 from line F1. If less than or equal to zero, STOP! You do not qualify for credit		
F4 Number of qualifying new employees from line F3 that completed their first 12 months service in 2022 F4		
F5 Multiply line F4 by \$1,000.00.	F5	
F6 Pro rata share of credit from Schedule K-1	F6	
FEIN of entity (If credit from more than one entity, attach schedule.)		
F7 CREDIT ALLOWABLE. Add line F5 and line F6. Enter here and on Section C, Part F, Column 3.	F7	•
PART G – Veterans Employment Act - Employer's Credit.* Owners of qualified employers that are entities taxed under subchapters		
S or K of the Internal Revenue Code skip Lines G1 and G2 and report your pro rata share of credit on line G3 below.		
EMPLOYER CREDIT		
G1 Number of unemployed veterans included in Part F, line F4		
G2 Multiply line G1 by \$2,000.00	G2	
G3 Pro rata share of credit from Schedule K-1	G3	
FEIN of entity (If credit from more than one entity, attach schedule.)		
G4 CREDIT ALLOWABLE. Add line G2 and line G3. Enter here and on Section C, Part G, Column 3	G4	•



PART K - Alabama Accountability Tax Credit - School Transfer Credit

K1 Enter total cost of attending nonfailing public school or nonpublic school from Schedule AATC, Line 37. Enter here and on Section C, Part K, Column 3



Name(s) as shown on Form 40 or 40NR		Your social sec	curity number
PART H - Veterans Employment Act - Business Startup Expense Credit.* For owner.	rs of qualified emplovers that are	e entities taxed under subch	apters S or K of the Internal
Revenue Code skip Lines H1 through H4 and report your pro rata share of credit on line H5 below.			-T
Did this business start up after April 2, 2012? Yes No If "No", you do not qualify for this credit	t.		
BUSINESS START-UP EXPENSES CREDIT			
H1 Name and business ID number			
H2 Enter total amount of business start-up expenses	H2		
H3 Maximum credit		\$2,000	
H4 Enter the lesser of line H2 or line H3		H4	
H5 Pro rata share of credit from Schedule K-1		H5	
FEIN of entity(If credit from more than one entity, attach schedul	le.)		
H6 CREDIT ALLOWABLE. Add line H4 and line H5. Enter here and on Section C, Part H, Column 3		Н6	•
PART I - Credit for Taxes paid to a Foreign Country (For Form 40 Only) Note: All of	dollar figures must be in U.	.S. dollars.	
I1 S Corporation/Partnership/Estate/Trust Name ●			
12 FEIN ●			
I3 Name of country income earned in ●			
14 Your pro rata share in entity.			
I5 Pro rata share of income from foreign operations	I5 •		
16 Alabama tax imposed on the pro rata share of income from foreign operations as reported on line 15	I6 •		
17 Pro rata share of tax due the foreign country as shown on that country's tax return			
18 Multiply I7 by 50% (.50)			
19 CREDIT ALLOWABLE. Enter the lesser of line I6 or line I8. Enter here and on Section C, Part I, Column	n 3		•
PART J - Qualified Irrigation System/Reservoir System Tax Credit* (Any unused Qua			carried forward for a maximum
of 5 years.)			
Type of Credit:			
Select either the purchase or conversion of irrigation system checkbox or the construction of reservoi	r checkbox. You cannot select b	oth.	
However, the pro-rata share of credit checkbox can be selected in addition to either.			
 Purchase or conversion of irrigation system. Complete lines J1 through J6 and J11 through J1 	3 below. Skip lines J7 through J	10.	
 Construction of reservoir. Skip lines J1 through J6 and complete lines J7 through J13 below. 	,		
Pro-rata share of credit from Subchapter S or K. Complete lines J12 through J13 below.			
J1 Purchase cost and installation costs of irrigation system	J1 •		
J2 Conversion costs to convert from fuel to electricity			
J3 Add lines J1 and J2	J3 •		
J4 Multiply line J3 by 20% (.20) not to exceed \$10,000	J4 •		
J5 Multiply line J3 by 10% (.10) not to exceed \$50,000			
J6 Enter the greater of line J4 or line J5			
J7 Cost of qualified reservoir construction			
J8 Multiply line J7 by 20% (.20) not to exceed \$10,000			
J9 Multiply line J7 by 10% (.10) not to exceed \$50,000			
J10 Enter the greater of line J8 or line J9			
J11 Enter the amount from either line J6 or line J10, but not both			
J12 Pro rata share of credit from Schedule K-1			
FEIN of entity ●			
J13 Maximum credit allowable. Add line J11 and line J12. Enter here and on Section C, Part J, Column 3.		J13	•

K1 •





Name(s) as sh	own on Form 40 or 40NR				Your	social s	ecurity number
PART L -	Alabama Accountability	Act Credit - Scholarship G	ranting Organization (SGO) pe	ortic	n (Any unused Alabama Accou	ntability	/ Act Credit - Scholarship Grant-
		d forward for a maximum of 3 years.			()		,
		on: •	,				
		ation:				_	
	1 0 0					_	
L3 Enter amou	unt contributed for scholarship(s)		L3	•	_	
		· ·		L4	•		
FEIN of e	ntity •						
	,			L5	•		
						. L6	\$100,000
	-		d on Section C, Part L, Column 3				
	Alabama Adoption Tax					_	
				M1	•		
						0	
	•		on C, Part M, Column 3				•
		-	For project numbers prior to 2018. (Ar				
	imum of 10 years.)		. o. p. o, o	.,			ion rax oroan may be came io
	• '	pject placed in service this year					
7 III GUIN GI	Project Number	Date Placed In Service	Credit Amount				
N1a ●		Date Flaced III GOI VICE	•				
N1b •			•				
N1c •			•				
				N2			
					+	-	
	tity •	1		INO	•		
		line N3 Enter here and an Section (C, Part N, Column 3			N4	
			ed Career – Technical Dual Enrollmen				
			Credit Certificate)			IIAXIIIIU	iiii oi o yeais.j
		•		_			
	• •	•			+	-	
		1		US	•		
	tity •	O2 and O2 Enter here and an Sect	ion C, Part O, Column 2	04			
						. 05	
							\$500,000
			and on Section C, Part O, Column 3.				•
			RWARD. Subtract line O7 from line O5.			3 00	
O9 Calculation	Of Allowable Prior Year Gredit	Column 2	ection D. If Part O, line O8 is equal to 2	zero,	Column 4		Column 5
	Oolullii i	Oolullii 2	Credit Limitation	_	Column 4		Column 3
	Credit Year	Credit Carryforward	(Line O9a, Col. 3 equals line O8. Lin	ies	Maximum Credit Carryforward		Unused Credit Limitation
	(YYYY)	Available	O9b - O9c, Col. 3 equal Col. 5, prio	r	Available This Year (Lesser of Col. 2 or Col. 3)		(Col. 3 minus Col. 4)
00			row)	_			
09a ●		•	•	•	1	•	
O9b ●		•	•	•)	•	
09c •			•	•)	•	
	•		O9b, and O9c				
		bama Jobs Act (Any unused in	vestment Credits – Alabama Jobs Act	may t	be carried forward for a maximul	n of 5 y	rears.)
Project Numbe					T ₂	_	
				P1		-	
		om Schedule K-1		P2	•		
FEIN of en	,						T-
P3 CREDIT A	LLOWABLE. Add line P1 and l	line P2. Enter here and on Section (C, Part P, Column 3			P3	●

Schedule OC (Form 40 or 40NR) 2022



Alabama Department of Revenue Other Available Credits ATTACH TO FORM 40 OR 40NR

* Individual Credits must be submitted through My Alabama Taxes (MAT) before completion of the Schedule OC. See instructions for submission details.

Marsa/-1	as shown on Form 40 or 40MD				Vous oppiel oppusitus nomber
Name(s)	as shown on Form 40 or 40NR				Your social security number
PART (Q - Port Credit - Alabam	a Renewal Act Credit (Unused	Port Credit may be carried forward for a ma	ximum of 5 years.)	1
In order	to receive credit, please attach	a copy of your Certification of Port	Credit from the Alabama Department of	Commerce.	
Company	/ Name				
FEIN or S	SSN of Qualified Project				
Q1 Port	Credit amount certified			1 •	
Q2 Pro				2 •	
FEIN	of entity •	(If credit from more than one	e entity, attach schedule.)		
			n C, Part Q, Column 3		
			(Any unused Growing Alabama Credit may	be carried forward for a ma	aximum of 5 years.)
	, ,	ation •			
	() ()			1 •	
				2 •	
	,	(if credit from more than o	, , , , , , , , , , , , , , , , , , ,		
				3 •	
	, ,	, ,			R4 ●
DE 0	ant Voar Crodit Allowahla Entor t	ha laccar of line D2 and line D4. Enter	hara and an Castian C Bart B Calumn 2		I DE LA
no Curr	ent real Credit Allowable. Litter t	ne lesser of lifte no affu lifte n4. Effice	here and on Section C, Part R, Column 3.		R5 •
			RWARD. Subtract line R5 from line R4. En		
R6 MAX	IMUM CREDIT ALLOWABLE FO	OR PRIOR YEAR CREDIT CARRYFO	· · · ·	ter here and on line R7a, C	Column 3 R6 •
R6 MAX	IMUM CREDIT ALLOWABLE FO	OR PRIOR YEAR CREDIT CARRYFO	RWARD. Subtract line R5 from line R4. En	ter here and on line R7a, C	Column 3 R6 •
R6 MAX	IMUM CREDIT ALLOWABLE FO	OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on S	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero	ter here and on line R7a, C , do not complete this sect	Column 3 R6 Column 5 Column 5 Tward Unused Credit Limitation (Col. 3 minus Col. 4)
R6 MAX	IMUM CREDIT ALLOWABLE FO ulation of Allowable Prior Year Credit Year (YYYY)	DR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on S Column 2 Credit Carryforward	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	ter here and on line R7a, C , do not complete this sect Column 4 Maximum Credit Carryfo Available This Year	Column 3 R6 Column 5 Column 5 Tward Unused Credit Limitation (Col. 3 minus Col. 4)
R6 MAX	IMUM CREDIT ALLOWABLE FO ulation of Allowable Prior Year Credit Year (YYYY)	OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on S Column 2 Credit Carryforward Available	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	ter here and on line R7a, C , do not complete this sect Column 4 Maximum Credit Carryfo Available This Year (Lesser of Col. 2 or Co	Column 3 R6 Column 5 Column 5 Tward Unused Credit Limitation (Col. 3 minus Col. 4)
R6 MAX R7 Calco	IMUM CREDIT ALLOWABLE FO ulation of Allowable Prior Year Credit Year (YYYY)	OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on second column 2 Credit Carryforward Available	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	ter here and on line R7a, C , do not complete this sect Column 4 Maximum Credit Carryfo Available This Year (Lesser of Col. 2 or Co	Column 3 R6 Column 5 Column 5 Tward Unused Credit Limitation (Col. 3 minus Col. 4)
R6 MAX R7 Calco	IMUM CREDIT ALLOWABLE FOulation of Allowable Prior Year Credit Year (YYYY)	OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on S Column 2 Credit Carryforward Available	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	ter here and on line R7a, C , do not complete this sect Column 4 Maximum Credit Carryfo Available This Year (Lesser of Col. 2 or Co	Column 3 R6 Column 5 Ward Unused Credit Limitation (Col. 3 minus Col. 4)
R6 MAX R7 Calco	IMUM CREDIT ALLOWABLE FOulation of Allowable Prior Year Credit Year (YYYY)	OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on s Column 2 Credit Carryforward Available	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	ter here and on line R7a, C , do not complete this sect Column 4 Maximum Credit Carryfo Available This Year (Lesser of Col. 2 or Co	Column 3 R6 Column 5 Ward Unused Credit Limitation (Col. 3 minus Col. 4)
R7 Calco	IMUM CREDIT ALLOWABLE FOulation of Allowable Prior Year Credit Year (YYYY)	OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on S Column 2 Credit Carryforward Available Available. Sum of Column 4, line R7a, line R7a	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	ter here and on line R7a, C , do not complete this sect	Column 3 R6 Column 5 Ward Unused Credit Limitation (Col. 3 minus Col. 4)
R6 MAX R7 Calco	IMUM CREDIT ALLOWABLE FOulation of Allowable Prior Year Credit Year (YYYY) Maximum Credit Carryforward A Apprenticeship Tax (OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on S Column 2 Credit Carryforward Available Available. Sum of Column 4, line R7a, I Credit*	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	ter here and on line R7a, C , do not complete this sect Column 4 Maximum Credit Carryfo Available This Year (Lesser of Col. 2 or Co	Column 3 R6 Column 5 Ward Unused Credit Limitation (Col. 3 minus Col. 4)
R6 MAX R7 Calci R7a R7b R7c R7d R7e PART \$ If business	IMUM CREDIT ALLOWABLE FOulation of Allowable Prior Year Credit Year (YYYY) Maximum Credit Carryforward A Apprenticeship Tax (OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on S Column 2 Credit Carryforward Available Available Available. Sum of Column 4, line R7a, Credit* by of the Alabama Apprenticeship Tax	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	ter here and on line R7a, C , do not complete this sect Column 4 Maximum Credit Carryfo Available This Year (Lesser of Col. 2 or Co	Column 3 R6 Column 5 Unused Credit Limitation (Col. 3 minus Col. 4)
R6 MAX R7 Calci R7a R7b R7c R7d R7e PART \$ If business	IMUM CREDIT ALLOWABLE FOundation of Allowable Prior Year Credit Year (YYYY) Maximum Credit Carryforward A S — Apprenticeship Tax (Ses entity is a sole proprietor, a coperation of Allowable Prior Year Credit Year (YYYY)	OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on S Column 2 Credit Carryforward Available Available Available. Sum of Column 4, line R7a, Credit* by of the Alabama Apprenticeship Tax	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	ter here and on line R7a, C , do not complete this sect Column 4 Maximum Credit Carryfo Available This Year (Lesser of Col. 2 or Co	Column 3 R6 Column 5 Unused Credit Limitation (Col. 3 minus Col. 4)
R6 MAX R7 Calci R7a R7b R7c R7d R7e PART S If busines K, skip P. Part I	IMUM CREDIT ALLOWABLE FOundation of Allowable Prior Year Credit Year (YYYY) Maximum Credit Carryforward A S - Apprenticeship Tax (See antity is a sole proprietor, a copart I and indicate your pro-rata ships a sole proprietor of the company of th	OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on S Column 2 Credit Carryforward Available Available Sum of Column 4, line R7a, line R7a	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	ter here and on line R7a, C , do not complete this sect Column 4 Maximum Credit Carryfo Available This Year (Lesser of Col. 2 or Co	Column 3 R6 Column 5 Unused Credit Limitation (Col. 3 minus Col. 4)
R6 MAX R7 Calco R7a R7b R7c R7d R7e PART \$ If busines K, skip P Part I Appr	IMUM CREDIT ALLOWABLE FOundation of Allowable Prior Year Credit Year (YYYY) Maximum Credit Carryforward A S - Apprenticeship Tax (See antity is a sole proprietor, a copart I and indicate your pro-rata ships a sole proprietor of the company of th	OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on S Column 2 Credit Carryforward Available Available. Sum of Column 4, line R7a, line R7a	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	ter here and on line R7a, C , do not complete this sect Column 4 Maximum Credit Carryfo Available This Year (Lesser of Col. 2 or Co	Column 3 R6 Column 5 Unused Credit Limitation (Col. 3 minus Col. 4)
R6 MAX R7 Calco R7a R7b R7c R7d R7e PART \$ If busines K, skip P Part I Appr	IMUM CREDIT ALLOWABLE FOulation of Allowable Prior Year Credit Year (YYYY) Maximum Credit Carryforward A S — Apprenticeship Tax (Ses entity is a sole proprietor, a copart I and indicate your pro-rata shenticeship Employer Name — enticeship Employer FEIN or SSN	OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on S Column 2 Credit Carryforward Available Available. Sum of Column 4, line R7a, line R7a	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	ter here and on line R7a, C , do not complete this sect Column 4 Maximum Credit Carryfo Available This Year (Lesser of Col. 2 or Co	Column 3 R6 Column 5 Unused Credit Limitation (Col. 3 minus Col. 4)
R6 MAX R7 Calci R7a R7b R7c R7d R7e PART S If busines K, skip P Part I Appr Appr Part II	IMUM CREDIT ALLOWABLE FOulation of Allowable Prior Year Credit Year (YYYY) Maximum Credit Carryforward A S — Apprenticeship Tax (Se entity is a sole proprietor, a copart I and indicate your pro-rata shenticeship Employer Name — enticeship Employer FEIN or SSN entition of Allowable Prior Year I and Employer FEIN or SSN entition of Allowable Prior Year I and Indicate Your Pro-rata SN enticeship Employer FEIN or SSN entition of Allowable Prior Year Credit Year (YYYY)	OR PRIOR YEAR CREDIT CARRYFO edit Carryforward - enter here and on S Column 2 Credit Carryforward Available Available. Sum of Column 4, line R7a, loredit* by of the Alabama Apprenticeship Tax are of credit on Part II, line S2.	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row)	der here and on line R7a, C , do not complete this sect Column 4 Maximum Credit Carryfo Available This Year (Lesser of Col. 2 or Co	Column 3 R6 Column 5 Unused Credit Limitation (Col. 3 minus Col. 4)
R7 Calci R7a R7a R7b R7c R7d R7e PART S If busines K, skip P Part I Appr Appr Part II S1 Cred S2 Pror	IMUM CREDIT ALLOWABLE FOulation of Allowable Prior Year Credit Year (YYYY) Maximum Credit Carryforward A S — Apprenticeship Tax (Ses entity is a sole proprietor, a copart I and indicate your pro-rata shericeship Employer Name — enticeship Employer FEIN or SSN it from Alabama Apprenticeship Tata share of credit from Schedule	Credit* Available. Sum of Column 4, line R7a, line dit Carredit* by of the Alabama Apprenticeship Tax are of credit on Part II, line S2.	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row) R7b, R7c and R7d. Credit Certificate must be attached to this r	ter here and on line R7a, C , do not complete this sect	Column 3 R6 Column 5 Unused Credit Limitation (Col. 3 minus Col. 4)
R7 Calci R7a R7a R7b R7c R7d R7e PART S If busines K, skip P Part I Appr Appr Part II S1 Cred S2 Pror	IMUM CREDIT ALLOWABLE FOulation of Allowable Prior Year Credit Year (YYYY) Maximum Credit Carryforward A S — Apprenticeship Tax (Ses entity is a sole proprietor, a copart I and indicate your pro-rata shericeship Employer Name — enticeship Employer FEIN or SSN it from Alabama Apprenticeship Tata share of credit from Schedule	Credit Carryforward - enter here and on Scolumn 2 Credit Carryforward - enter here and on Scolumn 2 Credit Carryforward Available Available Sum of Column 4, line R7a, Incredit* Pro of the Alabama Apprenticeship Tax are of credit on Part II, line S2.	RWARD. Subtract line R5 from line R4. En Section D. If Part R, line R6 is equal to zero Column 3 Credit Limitation (Line R7a, Col. 3 equals line R6. Lines R7b - R7e, Col.3 equal Co. 5, prior row) R7b, R7c and R7d. Credit Certificate must be attached to this r	ter here and on line R7a, C , do not complete this sect	Column 3 R6 Column 5 Unused Credit Limitation (Col. 3 minus Col. 4)

W1 •





PART W - Income Tax Capital Credit - You must attach Form KRCC and Schedule KRCC-I to your Alabama return.

W1 Enter Capital Credit allowable from Schedule KRCC-I, Part III, line 5. Enter here and on Section C, Part W, Column 3

Name(s) as shown on Form 40 or 40NR Your social security number PART T - 2017 Alabama Historic Rehabilitation Tax Credit* - For project numbers beginning with 2018 and forward. T1 Amount of tax credit certificate issued by the Historic Tax Commission or Transfer Credit Certificate issued by the Department of Revenue for any project placed in service this year Project Number Date Placed In Service Credit Amount T1a ● • T1b ● • • T1c • • • T2 CREDIT ALLOWABLE. Add line T1a, T1b and line T1c. Enter here and on Section C, Part T, Column 3 T2 | PART U - Railroad Modernization Act of 2019* U1 Enter the amount of credit as reported on your Transfer Credit Certificate issued by the Department of Revenue. Enter here and on Section C, Part U, Column 3 U1 • PART V - Storm Shelter Credit V1 •

Schedule OC (Form 40 or 40NR) 2022



Name(s) as shown on Form 40 or 40NR

Your social security number

SECTION C Current Credit Summary

Enter the tax liability from page 1, Section A of this form into Column 4 of the first row. In Column 2 and 3, enter applicable Credits if any from Section B of form. Repeat the steps that follow for each row. Subtract the Current Credit Allowable from the Tax Due to be Offset. If the Current Credit Allowable is greater than the Tax Due to be Offset, enter the amount from Column 4 in Column 5. If the Tax Due to be Offset is greater than Column 3, enter the Current Credit Allowable (Column 3) in Column 5 and enter the difference of Column 4 and Column 6 and proceed to the next available credit. For the remaining rows, use the preceding Balance of Tax Due from Column 6 as the Tax Due to be Offset in Column 4.

For the credit carryforward (Column 7) for Parts O and R, subtract any Current Credit Applied (Column 5) from the Current Credit Available (Column 2). For all other credit carryforwards, Column 7 equals the difference between Column 3 and Column 5.

Column 1	Column 2	Column 3	Column 4	Column 5	Column 6	Column 7
Type of Credit	Current Credit Available	Current Credit Allowable	Tax Due to be Offset	Current Credit Applied	Balance of Tax Due (Col. 4 - Col. 5)	Credit Carryforward
Part A • Credit for Taxes Paid to Other State		•	•	•	•	
Part B · Alabama Enterprise Zone		•	•	•	•	
Part C • Basic Skills Education Credit		•	•	•	•	
Part D • Rural Physician Credit		•	•	•	•	
Part E • Coal Credit		•	•	•	•	
Part F • Full Employment Act of 2011		•	•	•	•	
Part G • Veterans Employment Act – Employer Credit		•	•	•	•	
Part H · Veterans Employment Act – Business Start-up Expense Credit		•	•	•	•	
Part I • Credit for Taxes paid to Foreign Country		•	•	•	•	
Part J • Qualified Irrigation Sysem/Reservoir System Tax Credit		•	•	•	•	•
Part K • Alabama Accountability Fax Credit – School Transfer Credit		•	•	•	•	
Part L • Alabama Accountability Fax Credit – Scholarship Granting Organization (SGO) portion		•	•	•	•	•
Part M · Alabama Adoption Tax Credit		•	•	•	•	
Part N • 2013 Alabama Historic Rehabilitation Tax Credit		•	•	•	•	•
Part O · Career - Technical Dual Enrollment Credit	•	•	•	•	•	•
Part P · Investment Credit – Alabama Jobs Act		•	•	•	•	•
Part Q • Port Credit – Alabama Renewal Act		•	•	•	•	•
Part R • Growing Alabama Credit	•	•	•	•	•	•
Part S • Apprenticeship Tax Credit		•	•	•	•	
Part T • 2017 Alabama Historic Rehabilitation Tax Credit		•	•	•	•	
Part U • Railroad Modernization Act of 2019 Credit		•	•	•	•	
Part V • Storm Shelter Credit			•	•	•	
Part W • Income Tax Capital Credit			•	•	•	

Schedule OC (Form 40 or 40NR) 2022

Page 7



Name(s) as shown on Form 40 or 40NR

Your social security number

SECTION D Credit Carryforward Prior Years

In Column C list any prior year credit carryforwards for application. In Column E enter the Balance of Tax Due from Section C, Column 6. If no Credits were taken in Section C, enter the tax liability from Section A of this form into the first row of Column E. Repeat the steps that follow for each carryforward: Subtract Column E from Column D. If the Column E is less than or equal to Column D, enter Column E in Column F and compute Column G (Column C – Column F). If the Column E is greater than Column D, enter Column D in Column F. For the remaining rows, use the preceding Column E minus Column F as the Balance of Tax Due in Column E. (See instructions for more details)

*For the Career - Technical Dual Enrollment Credit and Growing Alabama Credit carryforward computation, the Allowable Carryforward Credit in Column D is limited to the Maximum Credit Carryforward Available This Year in Column 4 of Section B, Part O, Line O9 and Section B, Part R, Line R7. All others Column D equals Column C.

	Column A	Column B	Column C	Column D	(Column E	Column I		Column G
	Type of Credit Carryforward	Year Carryforward Generated (YYYY)	Available Carryforward Credit	Allowable Carryforward Credit	1	alance of Tax Due	Amount Us this Perio		Remaining Unused Carryforward (Col. C - Col. F
1.	•	•	•	•	•		•		•
2.	•	•	•	•	•		•		•
3.	•	•	•	•	•		•		•
4.	•	•	•	•	•		•		•
5.	•	•	•	•	•		•		•
6.	•	•	•	•	•		•		•
7.	•	•	•	•	•		•		•
8.	•	•	•	•	•		•		•
9.	•	•	•	•	•		•		•
10.	•	•	•	•	•		•		•
11.	•	•	•	•	•		•		•
12.	•	•	•	•	•		•		•
13.	•	•	•	•	•		•		•
14.	•	•	•	•	•		•		•
15.	•	•	•	•	•		•		•
16.	•	•	•	•	•		•		•
17.	•	•	•	•	•		•		•
18.	•	•	•	•	•		•		•
19.	•	•	•	•	•		•		•
20.	•	•	•	•	•		•		•
21.	Total Prior Year Credit Car	ryforward. Total Secti	on D, Column F, lines 1 thro	ugh 20			•		
SE	CTION E Net Tax Due	Computation					-1		
Ε1	Current Year Tax Liability. E	nter amount from Sect	tion A of this form					E1 •	
2	Total Current Year Credits A	applied. Enter amount	from Section C, line 1		E	2 •			
Ξ3	Prior Year Credit Carryforwa	ards applied. Enter an	nount from Section D, line 21	l	E	3 •			
Ξ4	Total Credits Utilized This Y	ear. Add lines E2 and	E3					E4 •	
	Net Tax Due. Subtract E4 from							E5 ●	
SE	CTION F Total Refun	dable Credits			-		'		
1 .	Alabama Accountability Tax	Credit - School Tran	nsfer Credit. Subtract Section	on C, Part K, Column 5	F	1 •			
	rom Section C, Part K, Colum	nn 3							
2	Alabama Adoption Tax Cred	lit. Subtract Section C,	Part M, Column 5 from Sec	tion C, Part M, Column 3	F	2 •			
	2017 Alabama Historic Reha					3 •			
	Part T, Column 3								
4	Total Refundable Credits. Ad	dd lines E1 E2 and E3	Enter the results here and o	on Page 1. line 25 of your ret	urn (Form	40 or Form 40NF	2)	F4 •	





Alabama Department of Revenue Alabama Accountability Tax Credit

NAME(S) AS SHOWN ON TAX RETURN

PRIMARY SOCIAL SECURITY NO.	SPOUSE SOCIAL SECURITY NO.	

PART I

ALABAMA DEPARTMENT OF REVENUE

Credit for Transferring from Failing Public School to Nonfailing Public School or Nonpublic School

1	Name of student: ●				
2	Social security number of student: •				
3	Name of failing school attended or zoned for: ●				
4	Name of school transferred to: ●				
5	Grade level at time of transfer:				
6	Date of enrollment at nonfailing public school or nonpublic school:				
7	80% of the average annual cost of attendance for an Alabama public K-12 student	7		4,512	00
8	Actual cost of attending nonfailing public school or nonpublic school	8	•		
9	Enter the lesser of line 7 or line 8	9	•		
10	Name of student: ●				
11	Social security number of student:				
12	Name of failing school attended or zoned for:				
13	Name of school transferred to:				
14	Grade level at time of transfer:				
15	Date of enrollment at nonfailing public school or nonpublic school:	_			
16	80% of the average annual cost of attendance for an Alabama public K-12 student	16		4,512	00
17	Actual cost of attending nonfailing public school or nonpublic school	17	•		
18	Enter the lesser of line 16 or line 17	18	•		
20 21 22	Name of student: Social security number of student: Name of failing school attended or zoned for: Name of school transferred to: Grade level at time of transfer:				
	Date of enrollment at nonfailing public school or nonpublic school:	_			1
25	80% of the average annual cost of attendance for an Alabama public K-12 student	25		4,512	00
	Actual cost of attending nonfailing public school or nonpublic school				
27	Enter the lesser of line 25 or line 26	27	•		
	Name of student:				
	Social security number of student:				
	Name of failing school attended or zoned for:				
	Name of school transferred to:				
	Grade level at time of transfer:				
	Date of enrollment at nonfailing public school or nonpublic school:	34		4,512	00
	80% of the average annual cost of attendance for an Alabama public K-12 student	-		4,512	. 00
	Actual cost of attending nonfailing public school or nonpublic school				+
30	Lines the leases of line 34 of line 33	00	1 -		1
37	Add the amounts from line 9, line 18, line 27, and line 36. Enter the amount here and on Schedule OC,				
	Section B, Part K, line K1	37	•		
					ADOR





Alabama Department of Revenue Alabama Adoption Tax Credit

NAME(S) AS SHOWN ON TAX RETURN

PRIMARY SOCIAL S	SECURITY NO. SPOUSE SOCIAL SECURITY NO.
PART I – Info	ormation about your eligible "child/children"
1	Name of Child •
	Social Security Number of Child •
3	
4	Name of Adoption Agency •
5	Address of Adoption Agency ●
6	Name of Child
7	Name of Child •
8	Name of Birth Mother •
9	Name of Adoption Agency •
_	Address of Adoption Agency •
10	
11	Name of Child ●
	Social Security Number of Child •
13	, _
	Name of Adoption Agency ●
15	Address of Adoption Agency
15	Address of Adoption Agency
16	Name of Child ●
	Social Security Number of Child •
18	
19	_
20	Address of Adoption Agency •
PART II – Ad	option Credit
1	Enter total number of children adopted from Part 1 here and on Schedule OC, Section B,
	Part M. line M1

ADOR





Alabama Department of Revenue Recipient's Share Of Capital Credit For Individual Taxpayers

For tax year beginning ●	, 20, and ending •		, 20					
	PART I - REC	PIPIENT INFORMA	ATION					
Recipient's Name: ●			S	ocial Security Number:	•			
	PΔRT II - PR	OJECT INFORMA	TION					
	Project 1		roject 2	Pi	roject 3			
Project Number	·	•	•	•	•			
Project's Placed in Service Date	•	•		•				
Project Entity Name	•	•		•				
Distributing Entity Name	•	•		•				
Distributing Entity FEIN	•	•		•				
	PART III - CAPIT	AL CREDIT CALC	ULATION					
			Project 1	Project 2	Project 3			
1. Recipient's share of project inco	me in Alabama (Form K-RCC, Part III, line 3)		1 •	•	•			
2. Recipient's Alabama tax liability	generated by project income (see Part IV below	for allocation method).	2 ●	•	•			
3. Recipient's share of capital cred	it available for this tax year (Form K-RCC, Part III	l, line 5)	3 ●	•	•			
4. Capital credit eligible to be appli	ed to recipient's tax liability (enter lesser of line 2	and line 3)	4 ●	•	•			
5. Total Capital credit eligible to be	applied to recipient's tax liability. Total line 4 for	all projects. Enter this a	amount here and on Scheo	dule OC, Section B,				
					5●			
PART IV	- ALLOCATION METHOD SCHEDULE	- COMPLETE ON						
			Project 1	Project 2	Project 3			
	me in Alabama (from Part III, line 1 above)							
, ,	ne (from recipient's Alabama income tax return).			•	•			
, ,	ne 1 by line 2) If line 1 is greater than line 2, enter			% ●	% • %			
, , ,	cipient's Alabama income tax return)		4 •	•	•			
5. Tax liability generated by project	, , ,							
Enter this amount on Part III, line	e 2 above		5 •	•	•			

INSTRUCTIONS

This schedule is used to calculate the recipient's tax liability generated from the qualifying project. Schedule KRCC-I and a copy of Form K-RCC (as received from the distributing entity) for each project must be attached to the income tax return. If recipient is using the allocation method to determine the Alabama tax liability generated by project income, complete Part IV. If using the with/without method, see instructions below.

Step 1 – If the with/without method is chosen, you must complete two federal income tax returns through the tax liability line. The return to be filed with the Internal Revenue Service should include the income from the project operations. A second return must be completed through the tax liability line but should not include the project income in Alabama. Any deductions limited by the amount of adjusted gross income must also be adjusted in the second return before computing the tax liability. The federal income tax deduction related to the project income in Alabama is the difference in the amount shown on the return to be filed and the second return.

Step 2 – Once you have completed the federal returns, you must complete two Alabama income tax returns through the tax liability line. The return to be filed with the Alabama Department of Revenue should include the income from the project operations. A second return must be completed through the tax liability line but should not include the project income in Alabama. Any deductions limited by the amount of adjusted gross income must also be adjusted in the second return before computing the tax liability. The applicable federal income tax deduction should be indicated from the federal returns completed in Step 1. The Alabama tax liability generated by the project income in Alabama is the difference in the amount shown on the return to be filed and the second return. The second returns should be maintained for audit purposes and are not to be filed with the first return.





Alabama Department of Revenue Recipient's Share Of Capital Credit For Individual Taxpayers

For tax year beginning ●	, 20, and ending •)	, 20			
	PART I - REC	CIPIENT INFORMA	TION			
Recipient's Name: ●			Sc	cial Security Number:	•	
	DART II - DR	OJECT INFORMA	TION			
	Project 1	1	oject 2	Pi	oject 3	
Project Number		•	-,	•	-,	
Project's Placed in Service Date		•		•		
Project Entity Name		•		•		
Distributing Entity Name	•	•		•		
Distributing Entity FEIN	•	•		•		
	PART III - CAPIT	AL CREDIT CALC	ULATION			
			Project 1	Project 2	Project 3	
1. Recipient's share of project inco	ome in Alabama (Form K-RCC, Part III, line 3) $$		1 ●	•	•	
	generated by project income (see Part IV below	,		•	•	
3. Recipient's share of capital cred	dit available for this tax year (Form K-RCC, Part II	I, line 5)	3 ●	•	•	
	lied to recipient's tax liability (enter lesser of line 2	,		•	•	
	e applied to recipient's tax liability. Total line 4 for					
					5•	
PART IV	/ - ALLOCATION METHOD SCHEDULE	- COMPLETE ON				
			Project 1	Project 2	Project 3	
	ome in Alabama (from Part III, line 1 above)			_		
, ,	me (from recipient's Alabama income tax return).			•	•	
. • •	ine 1 by line 2) If line 1 is greater than line 2, enter			•	% • %	
• • •	cipient's Alabama income tax return)		4 •	•	•	
5. Tax liability generated by project			F 📤	•		
Enter this amount on Part III, IIn	ne 2 above		5 •		•	

INSTRUCTIONS

This schedule is used to calculate the recipient's tax liability generated from the qualifying project. Schedule KRCC-I and a copy of Form K-RCC (as received from the distributing entity) for each project must be attached to the income tax return. If recipient is using the allocation method to determine the Alabama tax liability generated by project income, complete Part IV. If using the with/without method, see instructions below.

Step 1 – If the with/without method is chosen, you must complete two federal income tax returns through the tax liability line. The return to be filed with the Internal Revenue Service should include the income from the project operations. A second return must be completed through the tax liability line but should not include the project income in Alabama. Any deductions limited by the amount of adjusted gross income must also be adjusted in the second return before computing the tax liability. The federal income tax deduction related to the project income in Alabama is the difference in the amount shown on the return to be filed and the second return.

Step 2 – Once you have completed the federal returns, you must complete two Alabama income tax returns through the tax liability line. The return to be filed with the Alabama Department of Revenue should include the income from the project operations. A second return must be completed through the tax liability line but should not include the project income in Alabama. Any deductions limited by the amount of adjusted gross income must also be adjusted in the second return before computing the tax liability. The applicable federal income tax deduction should be indicated from the federal returns completed in Step 1. The Alabama tax liability generated by the project income in Alabama is the difference in the amount shown on the return to be filed and the second return. The second returns should be maintained for audit purposes and are not to be filed with the first return.





Loss Year Ending

Alabama Department of Revenue

•		
_		

Computation of Net Operating Loss

Name(s) as shown on Form 40, or 40NR				Your Social Se	ecurity Number	
	OSE OF SCHEDULE. Form NOL-85 is designed to determine the actual net operating loss so preparing this form, the loss year return must first be completed through the taxable income lin		•	-		
PAF	RT I – Excess of Nonbusiness Deductions Over Nonbusiness Income					
NONE	BUSINESS DEDUCTIONS:					
1(a)	Federal income tax claimed as a deduction on the loss year return			1a	•	
(b)	Loss on sale of nonbusiness assets			1b	•	
(c)	Payments to Individual Retirement Arrangement (IRA), Keogh retirement plan, or SEP plan			10		
(d)	Penalty on early withdrawal of savings (Form 40 only)			1c	I •	
(e)	Alimony paid			1e	•	
(f)	Adoption expenses			<u>. 1</u> f	•	
(g)	Self employed health insurance deduction from Page 2, Part II of Form 40 or 40NR			1g	ı •	
(h)	Other (explain)			1h	•	
2(a)	Enter the Standard Deduction claimed on return. Skip lines 2b, 3a-b, 4, and 5	. <u></u>		2a	•	
(b)	Enter the Total Itemized Deductions claimed on Schedule A	2b	•			
	LESS BUSINESS DEDUCTIONS:					
3(a)	Casualty or theft loss claimed on Schedule A 3a •					
(b)	Other miscellaneous business deductions					
4	Total Adjustments to Schedule A. Add lines 3a and 3b					
5	TOTAL NONBUSINESS ITEMIZED DEDUCTIONS. Subtract line 4 from line 2b				_	
6	TOTAL NONBUSINESS DEDUCTIONS. Add lines 1a through 2a and 5			▶ 6	•	
NONE	BUSINESS INCOME:					
7(a)	Interest and Dividend Income (Form 40 only)	7a				
(b)	Gain on sale of nonbusiness assets	7b				
(c)	Federal income tax refunds reported on loss year return (Form 40 only)	7c				
(d)	Taxable distributions from pensions, annuities, IRAs or other retirement plans (Form 40 only)	7d	1			
(e)	Alimony received (Form 40 only)	7e	+			
(f)	Trust and/or Estate income from Schedule E	7f	•			
(g)	Other (explain)					
	On line 7(g) include items such as director's fees, royalty income, gambling income, prizes,					
	awards, etc	7g				
8	TOTAL NONBUSINESS INCOME. Add lines 7a through 7g			🕨 🛮 8	•	

EXCESS NONBUSINESS DEDUCTIONS OVER NONBUSINESS INCOME. If line 6 exceeds line 8, subtract line 8 from line 6. Enter the result here and on line 5, Part II below. If line 8 exceeds line 6, enter -0- here and also on line 5, Part II below.

9



Form **NOL-85** – (5/22)

PA	RT II – Computation of Net Operating Loss						
1	Enter the Taxable Income from Form 40 or Form 40NR (must be a negative amount)				1	•	
Modif	ications - (enter all amounts on lines 2 through 6 below as positive amounts)						
2	Net Operating Loss claimed on the loss year return (if any)	2					
3	Personal exemption claimed on the loss year return	3	•				
4	Dependent exemption claimed on the loss year return	4	•				
5	Enter the Excess Nonbusiness Deductions Over Nonbusiness Income from line 9, Part I						
	above	5	•				
6	TOTAL MODIFICATIONS. Add lines 2, 3, 4, and 5				6	•	
7	NET-OPERATING LOSS ALLOWABLE. Combine lines 1 and 6. If the result is a negative figu	re, ei	nter here. If zero or a	a			
	positive figure – STOP – DO NOT FILE THIS FORM. You DO NOT have a net operating loss .			▶	7	•	
PA	RT III — Election to Forfeit Carryback Provision (CAUTION – Do Not Complete Pa	art III	If You Are Carrying	Loss Ba	ck)		
If the	amount on line 7, Part II above is a negative figure, you may elect to carry this loss forward or it n	nust l	be carried back 2 ye	ars (3 ye	ears p	rior to January 1, 1998)	and
any u	nused portion may then be carried forward to succeeding years (see instructions). See Part III ins	struct	ions for election to fo	orfeit car	rybac	k provision.	
Bv ch	By checking the box, I hereby elect to forfeit the carryback provision and instead						
-	elect to carryforward any allowable net operating loss for this taxable year.						





Alabama Department of Revenue

For Year Ending

APPLICATION OF Net Operating Loss (Enter year) Carryback or Carryforward

(Enter year to which loss is being carried)

Name(s) as shown on Form 40, 40NR, or 40X		,	Your Social Security Numb	er
PURPOSE OF SCHEDULE. Form NOL-85A is designed to apply a net operating loss to the tax year to which the complete Form NOL-85 to determine the amount of net operating loss that may be carried back or forward. See	ne loss is being carried. Before Form instructions on the reverse side for f	NOL-85A curther infor	can be completed, you mation.	must first
1(a) Enter the tax year during which the net operating loss was incurred. Beginning ●	, Endi	ing •		
(b) Did you elect on Form NOL-85 to forfeit the election to carry this loss back?			′es 🗌 No	
(c) Did you timely file the subsequent year's return and claim the net operating loss thereon? .				
PART I – Computation				
2 Enter the net operating loss as shown on line 7, Part II, Form NOL-85, or				
as shown on line 7, Form NOL-85A (see instructions)		▶ 2	•	
3 Enter the taxable income as shown on Form 40, Form 40NR, or Form 40X for the				
tax year to which the loss is being carried		3	•	
MODIFICATIONS				
4(a) Personal Exemption. Enter the amount of personal exemption claimed on the				
return to which the loss is being carried	4a ●			
(b) Dependent Exemption. Enter the amount of dependent exemption claimed on the				
return to which the loss is being carried				
5 TOTAL MODIFICATIONS. Add lines 4(a) and 4(b)		5		
6 MODIFIED TAXABLE INCOME. Add lines 3 and 5. If negative enter zero		6		
7 UNUSED NET OPERATING LOSS. If line 2 exceeds line 6, subtract line 6 from line 2. Ente	er difference here and			
enter zero (0) on the tax due line of Form 40 or Form 40NR. DO NOT complete Part II below	v. The amount on line 7			
may be carried forward to the next applicable year (Form NOL-85A, line 2). If line 6 exceeds	s line 2, enter zero here			
and complete Part II below		▶ 7	•	
If the Net Operating Loss Deduction on line 2 above is:				
a. Less than the taxable income reported on line 3 above, complete lines 8 through 14 belo	DW.			
b. Equal to or greater than the taxable income reported on line 3 above, check here	▶□ ar	ıd		
SKIP lines 8 through 13, and enter zero on line 14.				

Form NOL-85A ADOR



Form **NOL-85A** – (5/22) Page 2

PAR	T II – Application					
8	Enter the Adjusted Gross Income as shown on the return (or prior adjustment or prior NOL-85A					
	loss is being carried				•	
9	Net Operating Loss to be Applied. Enter the amount from line 2, Part I above			9	•	
10	MODIFIED ADJUSTED GROSS INCOME. Subtract line 9 from line 8 and enter the result here	. (If y	ou filed Form 40NR,			
	complete Part III before completing lines 11 through 14.)			10	•	
	CTIONS			1		
11(a)	Standard Deduction. If you claimed the Standard Deduction on the return to which					
	the loss is being carried, recompute the Standard Deduction based on the Modified					
	Adjusted Gross Income shown on line 10	11a	•	1		
(b)	Itemized Deductions. If you claimed Itemized Deductions on the return to which the					
	loss is being carried, recompute the itemized deductions based on the Modified	446				
	Adjusted Gross Income shown on line 10	11b	•	-		
(c)	Federal Income Tax. Enter the federal income tax as last determined and claimed					
	as a deduction on the return to which the loss is being carried	11c	•	-		
(d)	Personal Exemption. Enter the personal exemption as claimed on the return to	44.1				
	which the loss is being carried	11d	•	-		
(e)	Dependent Exemption. Enter the dependent exemption as last determined and					
	claimed on the return, recompute the dependent exemption based on the Modified					
	Adjusted Gross Income shown on line 10, to which the loss is being carried $\ldots \ldots \ldots$			٠		
12	TOTAL DEDUCTIONS. Add lines 11a through 11e			12		
13	TAXABLE INCOME AS ADJUSTED. Subtract line 12 from line 10 and enter result here			13	•	
14	TAX DUE AFTER APPLICATION OF NET OPERATING LOSS. Compute the tax due using the					
	which the loss is being carried. Enter the result here and also on the TAX DUE line of Form 40	X, Fo	rm 40, or Form 40NR .	14		
PAF	RT III – Modified Adjusted Gross Income Percentage (This secti	on to	be completed by nonreside	nts or	nly)	
15	Adjusted Gross Income From All Sources. Enter the adjusted gross income from all sources	s as s	hown on the			
	return to which the loss is being applied				•	
16	Net Operating Loss to be Applied. Enter the amount shown on line 9, Part II	16	•			
17	Modified Adjusted Gross Income From All Sources. Subtract line 16 from line 15	17	•			
18	18 Modified Adjusted Gross Income From Alabama Sources. Enter the amount from line 10, Part II				•	
19						
	Modifications. Divide the amount on line 18 by the amount on line 17 and enter percentage here (but not over 100%) ▶					

The percentage on line 19 should be used to recompute the Standard Deduction or Itemized Deductions, Federal Income Tax Deduction, Personal Exemption, and Dependent Exemption on lines 11a through 11e, Part II. **NOTE:** If you are married and filed separate Alabama returns and a joint Federal return, **DO NOT** use the percentage on line 19 to recompute the federal income tax deduction. See Special Instructions for Nonresidents.





Alabama Department of Revenue

For Year Ending

APPLICATION OF Net Operating Loss Carryback or Carryforward

(Enter year to which loss is being carried)

	•						
Name(s)	as shown on Form 40, 40NR, or 40X				Your S	Social Security Number	er
	SE OF SCHEDULE. Form NOL-85A is designed to apply a net operating loss to the tax year to which the ke Form NOL-85 to determine the amount of net operating loss that may be carried back or forward. See ins						must first
1(a)	Enter the tax year during which the net operating loss was incurred. Beginning ●		, Endi	ng •			_,
	Did you elect on Form NOL-85 to forfeit the election to carry this loss back?				Yes -	□No	
	Did you timely file the subsequent year's return and claim the net operating loss thereon?			_		□No	
PAR	T I – Computation						
2	Enter the net operating loss as shown on line 7, Part II, Form NOL-85, or				П		
	as shown on line 7, Form NOL-85A (see instructions)			2	•		
3	Enter the taxable income as shown on Form 40, Form 40NR, or Form 40X for the						
	tax year to which the loss is being carried			3	•		
	ICATIONS						
4(a)	Personal Exemption. Enter the amount of personal exemption claimed on the						
	return to which the loss is being carried	4a	•				
(b)	Dependent Exemption. Enter the amount of dependent exemption claimed on the						
	return to which the loss is being carried	$\overline{}$					
5	TOTAL MODIFICATIONS. Add lines 4(a) and 4(b)			5	<u> </u>		
6	MODIFIED TAXABLE INCOME. Add lines 3 and 5. If negative enter zero			. 6			
7	UNUSED NET OPERATING LOSS. If line 2 exceeds line 6, subtract line 6 from line 2. Enter di						
-	enter zero (0) on the tax due line of Form 40 or Form 40NR. DO NOT complete Part II below. T						
	may be carried forward to the next applicable year (Form NOL-85A, line 2). If line 6 exceeds lin						
	and complete Part II below.			7	•		
If the N	et Operating Loss Deduction on line 2 above is:						_
	a. Less than the taxable income reported on line 3 above, complete lines 8 through 14 below.						
	b. Equal to or greater than the taxable income reported on line 3 above, check here		▶□ an	d			
	SKIP lines 8 through 13, and enter zero on line 14.						

Form NOL-85A ADOR



Form **NOL-85A** – (5/22) Page 2

PAR	T II – Application					
8	Enter the Adjusted Gross Income as shown on the return (or prior adjustment or prior NOL-85A					
	loss is being carried				•	
9	Net Operating Loss to be Applied. Enter the amount from line 2, Part I above			9	•	
10	MODIFIED ADJUSTED GROSS INCOME. Subtract line 9 from line 8 and enter the result here	. (If y	ou filed Form 40NR,			
	complete Part III before completing lines 11 through 14.)			10	•	
	CTIONS			1		
11(a)	Standard Deduction. If you claimed the Standard Deduction on the return to which					
	the loss is being carried, recompute the Standard Deduction based on the Modified					
	Adjusted Gross Income shown on line 10	11a	•	1		
(b)	Itemized Deductions. If you claimed Itemized Deductions on the return to which the					
	loss is being carried, recompute the itemized deductions based on the Modified	446				
	Adjusted Gross Income shown on line 10	11b	•	-		
(c)	Federal Income Tax. Enter the federal income tax as last determined and claimed					
	as a deduction on the return to which the loss is being carried	11c	•	-		
(d)	Personal Exemption. Enter the personal exemption as claimed on the return to	44.1				
	which the loss is being carried	11d	•	-		
(e)	Dependent Exemption. Enter the dependent exemption as last determined and					
	claimed on the return, recompute the dependent exemption based on the Modified					
	Adjusted Gross Income shown on line 10, to which the loss is being carried $\ldots \ldots \ldots$			٠		
12	TOTAL DEDUCTIONS. Add lines 11a through 11e			12		
13	TAXABLE INCOME AS ADJUSTED. Subtract line 12 from line 10 and enter result here			13	•	
14	TAX DUE AFTER APPLICATION OF NET OPERATING LOSS. Compute the tax due using the					
	which the loss is being carried. Enter the result here and also on the TAX DUE line of Form 40	X, Fo	rm 40, or Form 40NR .	14		
PAF	RT III – Modified Adjusted Gross Income Percentage (This secti	on to	be completed by nonreside	nts or	nly)	
15	Adjusted Gross Income From All Sources. Enter the adjusted gross income from all sources	s as s	hown on the			
	return to which the loss is being applied				•	
16	Net Operating Loss to be Applied. Enter the amount shown on line 9, Part II	16	•			
17	Modified Adjusted Gross Income From All Sources. Subtract line 16 from line 15	17	•			
18	18 Modified Adjusted Gross Income From Alabama Sources. Enter the amount from line 10, Part II				•	
19						
	Modifications. Divide the amount on line 18 by the amount on line 17 and enter percentage here (but not over 100%) ▶					

The percentage on line 19 should be used to recompute the Standard Deduction or Itemized Deductions, Federal Income Tax Deduction, Personal Exemption, and Dependent Exemption on lines 11a through 11e, Part II. **NOTE:** If you are married and filed separate Alabama returns and a joint Federal return, **DO NOT** use the percentage on line 19 to recompute the federal income tax deduction. See Special Instructions for Nonresidents.





Alabama Department of Revenue

For Year Ending

APPLICATION OF Net Operating Loss Carryback or Carryforward

(Enter year to which loss is being carried)

	•						
Name(s)	as shown on Form 40, 40NR, or 40X				Your S	Social Security Number	er
	SE OF SCHEDULE. Form NOL-85A is designed to apply a net operating loss to the tax year to which the ke Form NOL-85 to determine the amount of net operating loss that may be carried back or forward. See ins						must first
1(a)	Enter the tax year during which the net operating loss was incurred. Beginning ●		, Endi	ng •			_,
	Did you elect on Form NOL-85 to forfeit the election to carry this loss back?				/es	□No	
	Did you timely file the subsequent year's return and claim the net operating loss thereon?			_		□No	
PAR	T I – Computation						
2	Enter the net operating loss as shown on line 7, Part II, Form NOL-85, or						
	as shown on line 7, Form NOL-85A (see instructions)			2	•		
3	Enter the taxable income as shown on Form 40, Form 40NR, or Form 40X for the						
	tax year to which the loss is being carried			3	•		
	ICATIONS						
4(a)	Personal Exemption. Enter the amount of personal exemption claimed on the						
	return to which the loss is being carried	4a	•				
(b)	Dependent Exemption. Enter the amount of dependent exemption claimed on the						
	return to which the loss is being carried	$\overline{}$					
5	TOTAL MODIFICATIONS. Add lines 4(a) and 4(b)			5			
6	MODIFIED TAXABLE INCOME. Add lines 3 and 5. If negative enter zero			. 6			
7	UNUSED NET OPERATING LOSS. If line 2 exceeds line 6, subtract line 6 from line 2. Enter di						
-	enter zero (0) on the tax due line of Form 40 or Form 40NR. DO NOT complete Part II below. T						
	may be carried forward to the next applicable year (Form NOL-85A, line 2). If line 6 exceeds lin						
	and complete Part II below.			7	•		
If the N	et Operating Loss Deduction on line 2 above is:						_
	a. Less than the taxable income reported on line 3 above, complete lines 8 through 14 below.						
	b. Equal to or greater than the taxable income reported on line 3 above, check here		▶□ an	d			
	SKIP lines 8 through 13, and enter zero on line 14.						

Form NOL-85A ADOR



Form **NOL-85A** – (5/22) Page 2

PAR	T II – Application					
8	Enter the Adjusted Gross Income as shown on the return (or prior adjustment or prior NOL-85A	A) for	the year to which the			
	loss is being carried			8	•	
9	Net Operating Loss to be Applied. Enter the amount from line 2, Part I above	9	•			
10	MODIFIED ADJUSTED GROSS INCOME. Subtract line 9 from line 8 and enter the result here					
	complete Part III before completing lines 11 through 14.)	10	•			
	CTIONS					
11(a)	Standard Deduction. If you claimed the Standard Deduction on the return to which					
	the loss is being carried, recompute the Standard Deduction based on the Modified					
	Adjusted Gross Income shown on line 10	11a	•	-		
(b)	Itemized Deductions. If you claimed Itemized Deductions on the return to which the					
	loss is being carried, recompute the itemized deductions based on the Modified					
	Adjusted Gross Income shown on line 10	11b	•	-		
(c)	Federal Income Tax. Enter the federal income tax as last determined and claimed					
	as a deduction on the return to which the loss is being carried	11c	•	-		
(d)	Personal Exemption. Enter the personal exemption as claimed on the return to	44.1				
	which the loss is being carried	11d	•	-		
(e)	Dependent Exemption. Enter the dependent exemption as last determined and					
	claimed on the return, recompute the dependent exemption based on the Modified					
	Adjusted Gross Income shown on line 10, to which the loss is being carried $\ldots \ldots \ldots$			٠		
12	TOTAL DEDUCTIONS. Add lines 11a through 11e			12		
13	TAXABLE INCOME AS ADJUSTED. Subtract line 12 from line 10 and enter result here			13	•	
14	TAX DUE AFTER APPLICATION OF NET OPERATING LOSS. Compute the tax due using the					
	which the loss is being carried. Enter the result here and also on the TAX DUE line of Form 40	X, Fo	rm 40, or Form 40NR .	14		
PAF	RT III – Modified Adjusted Gross Income Percentage (This secti	on to	be completed by nonreside	nts or	nly)	
15	Adjusted Gross Income From All Sources. Enter the adjusted gross income from all sources	s as s	hown on the			
	return to which the loss is being applied			15	•	
16	Net Operating Loss to be Applied. Enter the amount shown on line 9, Part II			16	•	
17	Modified Adjusted Gross Income From All Sources. Subtract line 16 from line 15			17	•	
18	Modified Adjusted Gross Income From Alabama Sources. Enter the amount from line 10, F	Part II		18	•	
19	Percentage of Alabama Adjusted Gross Income to Total Adjusted Gross Income From A	II Sou	urces After			
	Modifications. Divide the amount on line 18 by the amount on line 17 and enter percentage he	19	•			

The percentage on line 19 should be used to recompute the Standard Deduction or Itemized Deductions, Federal Income Tax Deduction, Personal Exemption, and Dependent Exemption on lines 11a through 11e, Part II. **NOTE:** If you are married and filed separate Alabama returns and a joint Federal return, **DO NOT** use the percentage on line 19 to recompute the federal income tax deduction. See Special Instructions for Nonresidents.





Alabama Department of Revenue

For Year Ending

APPLICATION OF Net Operating Loss Carryback or Carryforward

(Enter year to which loss is being carried)

	•						
Name(s)	as shown on Form 40, 40NR, or 40X				Your S	Social Security Number	er
	SE OF SCHEDULE. Form NOL-85A is designed to apply a net operating loss to the tax year to which the ke Form NOL-85 to determine the amount of net operating loss that may be carried back or forward. See ins						must first
1(a)	Enter the tax year during which the net operating loss was incurred. Beginning ●		, Endi	ng •			_,
	Did you elect on Form NOL-85 to forfeit the election to carry this loss back?				/es	□No	
	Did you timely file the subsequent year's return and claim the net operating loss thereon?			_		□No	
PAR	T I – Computation						
2	Enter the net operating loss as shown on line 7, Part II, Form NOL-85, or						
	as shown on line 7, Form NOL-85A (see instructions)			2	•		
3	Enter the taxable income as shown on Form 40, Form 40NR, or Form 40X for the						
	tax year to which the loss is being carried			3	•		
	ICATIONS						
4(a)	Personal Exemption. Enter the amount of personal exemption claimed on the						
	return to which the loss is being carried	4a	•				
(b)	Dependent Exemption. Enter the amount of dependent exemption claimed on the						
	return to which the loss is being carried	$\overline{}$					
5	TOTAL MODIFICATIONS. Add lines 4(a) and 4(b)			5			
6	MODIFIED TAXABLE INCOME. Add lines 3 and 5. If negative enter zero			. 6			
7	UNUSED NET OPERATING LOSS. If line 2 exceeds line 6, subtract line 6 from line 2. Enter di						
-	enter zero (0) on the tax due line of Form 40 or Form 40NR. DO NOT complete Part II below. T						
	may be carried forward to the next applicable year (Form NOL-85A, line 2). If line 6 exceeds lin						
	and complete Part II below.			7	•		
If the N	et Operating Loss Deduction on line 2 above is:						_
	a. Less than the taxable income reported on line 3 above, complete lines 8 through 14 below.						
	b. Equal to or greater than the taxable income reported on line 3 above, check here		▶□ an	d			
	SKIP lines 8 through 13, and enter zero on line 14.						

Form NOL-85A ADOR



Form **NOL-85A** – (5/22) Page 2

PAR	T II – Application					
8	Enter the Adjusted Gross Income as shown on the return (or prior adjustment or prior NOL-85A	A) for	the year to which the			
	loss is being carried			8	•	
9	Net Operating Loss to be Applied. Enter the amount from line 2, Part I above	9	•			
10	MODIFIED ADJUSTED GROSS INCOME. Subtract line 9 from line 8 and enter the result here					
	complete Part III before completing lines 11 through 14.)	10	•			
	CTIONS					
11(a)	Standard Deduction. If you claimed the Standard Deduction on the return to which					
	the loss is being carried, recompute the Standard Deduction based on the Modified					
	Adjusted Gross Income shown on line 10	11a	•	-		
(b)	Itemized Deductions. If you claimed Itemized Deductions on the return to which the					
	loss is being carried, recompute the itemized deductions based on the Modified					
	Adjusted Gross Income shown on line 10	11b	•	-		
(c)	Federal Income Tax. Enter the federal income tax as last determined and claimed					
	as a deduction on the return to which the loss is being carried	11c	•	-		
(d)	Personal Exemption. Enter the personal exemption as claimed on the return to	44.1				
	which the loss is being carried	11d	•	-		
(e)	Dependent Exemption. Enter the dependent exemption as last determined and					
	claimed on the return, recompute the dependent exemption based on the Modified					
	Adjusted Gross Income shown on line 10, to which the loss is being carried $\ldots \ldots \ldots$			٠		
12	TOTAL DEDUCTIONS. Add lines 11a through 11e			12		
13	TAXABLE INCOME AS ADJUSTED. Subtract line 12 from line 10 and enter result here			13	•	
14	TAX DUE AFTER APPLICATION OF NET OPERATING LOSS. Compute the tax due using the					
	which the loss is being carried. Enter the result here and also on the TAX DUE line of Form 40	X, Fo	rm 40, or Form 40NR .	14		
PAF	RT III – Modified Adjusted Gross Income Percentage (This secti	on to	be completed by nonreside	nts or	nly)	
15	Adjusted Gross Income From All Sources. Enter the adjusted gross income from all sources	s as s	hown on the			
	return to which the loss is being applied			15	•	
16	Net Operating Loss to be Applied. Enter the amount shown on line 9, Part II			16	•	
17	Modified Adjusted Gross Income From All Sources. Subtract line 16 from line 15			17	•	
18	Modified Adjusted Gross Income From Alabama Sources. Enter the amount from line 10, F	Part II		18	•	
19	Percentage of Alabama Adjusted Gross Income to Total Adjusted Gross Income From A	II Sou	urces After			
	Modifications. Divide the amount on line 18 by the amount on line 17 and enter percentage he	19	•			

The percentage on line 19 should be used to recompute the Standard Deduction or Itemized Deductions, Federal Income Tax Deduction, Personal Exemption, and Dependent Exemption on lines 11a through 11e, Part II. **NOTE:** If you are married and filed separate Alabama returns and a joint Federal return, **DO NOT** use the percentage on line 19 to recompute the federal income tax deduction. See Special Instructions for Nonresidents.





Alabama Department of Revenue

For Year Ending

APPLICATION OF Net Operating Loss Carryback or Carryforward

(Enter year to which loss is being carried)

	•						
Name(s)	as shown on Form 40, 40NR, or 40X				Your S	Social Security Number	er
	SE OF SCHEDULE. Form NOL-85A is designed to apply a net operating loss to the tax year to which the ke Form NOL-85 to determine the amount of net operating loss that may be carried back or forward. See ins						must first
1(a)	Enter the tax year during which the net operating loss was incurred. Beginning ●		, Endi	ng •			_,
	Did you elect on Form NOL-85 to forfeit the election to carry this loss back?				/es	□No	
	Did you timely file the subsequent year's return and claim the net operating loss thereon?			_		□No	
PAR	T I – Computation						
2	Enter the net operating loss as shown on line 7, Part II, Form NOL-85, or						
	as shown on line 7, Form NOL-85A (see instructions)			2	•		
3	Enter the taxable income as shown on Form 40, Form 40NR, or Form 40X for the						
	tax year to which the loss is being carried			3	•		
	ICATIONS						
4(a)	Personal Exemption. Enter the amount of personal exemption claimed on the						
	return to which the loss is being carried	4a	•				
(b)	Dependent Exemption. Enter the amount of dependent exemption claimed on the						
	return to which the loss is being carried	$\overline{}$					
5	TOTAL MODIFICATIONS. Add lines 4(a) and 4(b)			5			
6	MODIFIED TAXABLE INCOME. Add lines 3 and 5. If negative enter zero			. 6			
7	UNUSED NET OPERATING LOSS. If line 2 exceeds line 6, subtract line 6 from line 2. Enter di						
-	enter zero (0) on the tax due line of Form 40 or Form 40NR. DO NOT complete Part II below. T						
	may be carried forward to the next applicable year (Form NOL-85A, line 2). If line 6 exceeds lin						
	and complete Part II below.			7	•		
If the N	et Operating Loss Deduction on line 2 above is:						_
	a. Less than the taxable income reported on line 3 above, complete lines 8 through 14 below.						
	b. Equal to or greater than the taxable income reported on line 3 above, check here		▶□ an	d			
	SKIP lines 8 through 13, and enter zero on line 14.						

Form NOL-85A ADOR



Form **NOL-85A** – (5/22) Page 2

PAR	T II – Application					
8	Enter the Adjusted Gross Income as shown on the return (or prior adjustment or prior NOL-85A	A) for	the year to which the			
	loss is being carried			8	•	
9	Net Operating Loss to be Applied. Enter the amount from line 2, Part I above	9	•			
10	MODIFIED ADJUSTED GROSS INCOME. Subtract line 9 from line 8 and enter the result here					
	complete Part III before completing lines 11 through 14.)	10	•			
	CTIONS					
11(a)	Standard Deduction. If you claimed the Standard Deduction on the return to which					
	the loss is being carried, recompute the Standard Deduction based on the Modified					
	Adjusted Gross Income shown on line 10	11a	•	-		
(b)	Itemized Deductions. If you claimed Itemized Deductions on the return to which the					
	loss is being carried, recompute the itemized deductions based on the Modified					
	Adjusted Gross Income shown on line 10	11b	•	-		
(c)	Federal Income Tax. Enter the federal income tax as last determined and claimed					
	as a deduction on the return to which the loss is being carried	11c	•	-		
(d)	Personal Exemption. Enter the personal exemption as claimed on the return to	44.1				
	which the loss is being carried	11d	•	-		
(e)	Dependent Exemption. Enter the dependent exemption as last determined and					
	claimed on the return, recompute the dependent exemption based on the Modified					
	Adjusted Gross Income shown on line 10, to which the loss is being carried $\ldots \ldots \ldots$			٠		
12	TOTAL DEDUCTIONS. Add lines 11a through 11e			12		
13	TAXABLE INCOME AS ADJUSTED. Subtract line 12 from line 10 and enter result here			13	•	
14	TAX DUE AFTER APPLICATION OF NET OPERATING LOSS. Compute the tax due using the					
	which the loss is being carried. Enter the result here and also on the TAX DUE line of Form 40	X, Fo	rm 40, or Form 40NR .	14		
PAF	RT III – Modified Adjusted Gross Income Percentage (This secti	on to	be completed by nonreside	nts or	nly)	
15	Adjusted Gross Income From All Sources. Enter the adjusted gross income from all sources	s as s	hown on the			
	return to which the loss is being applied			15	•	
16	Net Operating Loss to be Applied. Enter the amount shown on line 9, Part II			16	•	
17	Modified Adjusted Gross Income From All Sources. Subtract line 16 from line 15			17	•	
18	Modified Adjusted Gross Income From Alabama Sources. Enter the amount from line 10, F	Part II		18	•	
19	Percentage of Alabama Adjusted Gross Income to Total Adjusted Gross Income From A	II Sou	urces After			
	Modifications. Divide the amount on line 18 by the amount on line 17 and enter percentage he	19	•			

The percentage on line 19 should be used to recompute the Standard Deduction or Itemized Deductions, Federal Income Tax Deduction, Personal Exemption, and Dependent Exemption on lines 11a through 11e, Part II. **NOTE:** If you are married and filed separate Alabama returns and a joint Federal return, **DO NOT** use the percentage on line 19 to recompute the federal income tax deduction. See Special Instructions for Nonresidents.





2022

Alabama Department of Revenue Wages, Salaries, Tips, etc.

Schedule W-2 must be completed fully and included with your return in order to receive proper credit for your Alabama income tax withheld. Attach a copy of all withholding statements to your return.

NAME(S) AS SHOWN ON TAX RETURN	PRIMARY'S SOCIAL SECURITY NO.	SPOUSE'S SOCIAL SECURITY NO.
--------------------------------	-------------------------------	------------------------------

	Α	B Employer's	С	D Schedule	E	F Alabama	G	Н	I	J
	Employee's Social Security Number	Identification Number (EIN)	Statutory Employee	C/C-EZ	State Code	Employer's State ID Number	Alabama State Income Tax Withheld	Federal Wages (Box 1 of Form W-2)	Alabama State Wages (Box 16 of Form W-2)	Additional Taxable Wages – Other States
1	•	•	• 🗌	• 🗌	•	•	•	•	•	•
2	•	•	• 🗌	• 🗌	•	•	•	•	•	•
3	•	•	• 🗌	• 🗌	•	•	•	•	•	•
4	•	•	• 🗌	• 🗌	•	•	•	•	•	•
5	•	•	• 🗌	• 🗌	•	•	•	•	•	•
6	•	•	• 🗌	• 🗌	•	•	•	•	•	•
7	•	•	• 🗌	• 🗌	•	•	•	•	•	•
8	•	•	• 🗌	• 🗌	•	•	•	•	•	•
9	•	•	• 🗌	• 🗌	•	•	•	•	•	•
10	•	•	• 🗌	• 🗌	•	•	•	•	•	•
11	•	•	• 🗌	• 🗌	•	•	•	•	•	•
12	•	•	• 🗌	• 🗌	•	•	•	•	•	•
13	•	•	• 🗌	• 🗌	•	•	•	•	•	•
14	•	•	• 🗌	• 🗌	•	•	•	•	•	•
15	•	•	• 🗌	• 🗌	•	•	•	•	•	•
	TOTAL ALABAMA TAX WI						•			
17	ALABAMA TAX WITHHELD from all Form 1099s and Form									
	these statements						•			
18	TOTAL WAGES AND TOTAL									
	See instructions						•	•	•	•

THIS SCHEDULE CAN ONLY BE SUBMITTED AND/OR PRINTED VIA LANDSCAPE





2022

Alabama Department of Revenue

Composite Payments/Electing PTE Credits

NAME(S) AS SHOWN ON TAX	RETURN		YOUR SOCIAL SECURI	TY NUMBER				
f you are claiming o	composite payme	ent(s)/Electing PTE credits	, complete the fo	llowing informati	on.			
SECTION A			•					
A Taxpayer's Social Security Number on Schedule K-1	B Check if this Taxpayer is a Disregarded Entity	C Disregarded Entity's Na	me C	D Disregarded Entity's FEIN	S-Cor Partnershi Trus	E poration's, p's, Estate's or t's Name	F S-Corporation's, Partnership's, Estate's or Trust's FEIN	G Amount of payment made by the S Corporation, Partnership, Estate or Trust on your behalf
•								•
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SECTION B 1. Total	Composite Payme	nt/Electing PTE Credits. Total	of Column G enter h	nere and on Form 40.	, page 1, line 26 or For	m 40NR, page 1, line	23	•





Alabama Department of Revenue Investment Interest Expense Deduction 2022

ATTACH TO YOUR TAX RETURN

Name(s) as shown on your return	Identifying number		
Type of return	Trust		
1 Interest expense on investment debts paid or accrued in 2022 (see instructions)		1	
2 Disallowed investment interest expense from 2021 Form 4952A, line 5		2	
3 Total investment interest expense. Add lines 1 and 2		3	
4 Net investment income (see instructions).		4	
5 Disallowed investment interest expense to be carried forward to 2023. Subtract line 4 from line	e 3. If zero or less, enter –0–	5	
6 Investment interest expense deduction. Enter the smaller of line 3 or line 4 (see instructions),		6	

GENERAL INSTRUCTIONS

PURPOSE OF FORM

Interest expense paid by an individual, estate, or trust on a loan that is allocable to property held for investment (defined below), may not be fully deductible in the current year. Form 4952A is used to figure the amount of investment interest expense deductible for the current year and the amount, if any, to carry forward to future years.

For more details, refer to Federal Publication 550, Investment Income and Expenses.

CAUTION: The investment interest deduction for Alabama is computed as if the federal passive income limitation did not exist. Net capital gain from the disposition of investment property is included in investment income for Alabama purposes.

WHO MUST FILE

If you are an individual, estate, or trust, and you claim a deduction for investment interest expense, you must complete and attach Form 4952A to your tax return unless all of the following apply:

- Your only investment income was from interest or dividends,
- · You have no other deductible expenses connected with the production of interest or dividends,
- · Your investment interest expense is not more than your investment income,
- · And you have no carryovers of investment interest expense from 2021.

ALLOCATION OF INTEREST EXPENSE UNDER TEMPORARY FEDERAL **REGULATIONS SECTION 1.163-8T**

If you paid or accrued interest on a loan and you used the proceeds of the loan for more than one purpose, you may have to allocate the interest paid. This is necessary because of the different rules that apply to investment interest, personal interest, trade or business interest, and home mortgage interest. See Federal Publication 550, Investment Income and Expenses.

SPECIFIC INSTRUCTIONS

LINE 1 - INVESTMENT INTEREST EXPENSE

Enter the investment interest paid or accrued during the tax year, regardless of when the indebtedness was incurred. Include interest paid or accrued on a loan (or part of a loan) that is allocable to property held for investment.

Be sure to include investment interest expense reported to you on Schedule K-1 from a partnership or an S corporation. Include amortization of bond premium on taxable bonds purchased after October 22, 1986, but before January 1, 1988, unless you elected to offset amortizable bond premium against the interest payments on the bond. A taxable bond is a bond on which the interest is includible in gross income.

Investment interest expense does not include the following:

- · Home mortgage interest,
- · Any interest expense that is capitalized, such as construction interest subject to Federal Section 263A.

LINE 4 - NET INVESTMENT INCOME

Net investment income is the excess, if any, of investment income over investment expenses. Include investment income and expenses reported to you on Schedule K-1 from a partnership or an S corporation. Also, include net investment income from an estate or a trust.

INVESTMENT INCOME

Investment income includes income (not derived in the ordinary course of a trade or business) from interest, dividends (reduced by qualified dividends per federal instructions), annuities, royalties, and net gain from the disposition of property held for investment (including capital gain distributions from mutual funds).

PROPERTY HELD FOR INVESTMENT

Property held for investment includes property that produces investment income. Property held for investment also includes an interest in an activity of conducting a trade or business in which you did not materially participate. INVESTMENT EXPENSES

Investment expenses are your allowed deductions, other than interest expense, directly connected with the production of investment income. For example, depreciation or depletion allowed on assets that produce investment income is an investment expense.

If you have investment expenses that are included as a miscellaneous itemized deduction on line 21 of Schedule A (Form 40), or line 26 of Schedule A (Form 40NR), you may not have to use all of the amount for purposes of line 4 of Form 4952A. The 2% adjusted gross income limitation on Schedule A may reduce the amount.

To figure the amount to use, compare the amount of the investment expenses included on line 21 of Schedule A (Form 40) with the total miscellaneous expenses on line 24 of Schedule A. If you filed Schedule A (Form 40NR), compare the amount on line 26 with the amount on line 29. The smaller of the investment expenses included on line 21 (or line 26) or the total of line 24 (or line 29) is the amount to use to figure the investment expenses from Schedule A for line 4.

Example: Assume line 21 of Schedule A (Form 40) includes investment expenses of \$3,000, and line 24 is \$1,300 after the 2% adjusted gross income limitation. Investment expenses of \$1,300 are used to figure the amount of investment expense for line 4. If investment expenses of \$800 were included on line 21 and line 24 was \$1,300, investment expenses of \$800 would be used.

If you have investment expenses reported on a form or schedule other than Schedule A, include those expenses when figuring investment expenses

LINE 6 - INVESTMENT INTEREST EXPENSE DEDUCTION

This is the amount you may deduct as investment interest expense. **INDIVIDUALS**

Enter the amount from line 6 on line 13 of Schedule A (Form 40 or 40NR), even if all or part of it is attributable to a partnership or an S corporation. However, if any portion of this amount is attributable to royalties, enter that portion of the interest expense on Schedule E (Form 40 or 40NR).

ESTATES AND TRUSTS

Enter on Form 41, Page 3, Schedule C, Column C, Line 10.

Federal Income Tax Deduction Worksheet

1 Enter the tax as shown on line 22 on 2022 Form 1040/Form 1040-SR/Form 1040NR		[1		00		
2 Net Investment Income Tax. Enter amount from line 17, 2022 Form 8960		2		00			
3 Federal Tax. Add Lines 1 and 2.	3		00				
4a Earned Income Credit (EIC). Enter the amount from line 27 of 2022 Form 1040/Form 1040-SR.	4a	00					
4b Additional Child Tax Credit. Enter the amount from Line 28 of 2022 Form 1040/Form							
1040-SR	4b	00					
4c American Opportunity Credit. Enter the amount from line 29 of 2022 Form 1040/Form 1040-SR.							
4d Credits from Forms 2439. Enter the amount from Schedule 3, Part II, line 13a of 2022							
Form 1040/Form 1040-SR/Form1040NR	4d	00					
5 Add lines 4a,b, c and d	5 Add lines 4a,b, c and d						
6 Subtract line 5 from line 3. If amount is negative enter zero also enter on line 12 of Form 40,							
Part IV, line 4 of Form 40NR.			6		00		