20S



Alabama Department of Revenue

| • CY \square | |
|----------------|------|
| • FY 🗌 | 2012 |
| • SY | ZUIZ |

S Corporation Information/Tax Return

| For | the year January 1 – December 31, 20 | 12, or other tax year beginning ● | | , 2012, ending • | | | , | |
|------------------|--------------------------------------|-----------------------------------|--------------|---------------------------------|-------|----------------|--------------------------------|-------|
| | FEDERAL BUSINESS CODE NUMBER | FEDER | RAL EMPLOYER | IDENTIFICATION NUMBER | | 1 | Data Summary | |
| ► Important | • | • | | | | 1 | Total federal income | |
| Check | NAME | I | | | | ┨ . | • | |
| applicable | TV-VIII. | | | | | | Total federal deductions | |
| box: | ADDRESS | | | | | ∃ - | <u> </u> | |
| | N. B. I. L. G. | | | | | | Total assets as shown on Form | 1120S |
| ● Initial Return | CITY | | STATE | 9-DIGIT ZIP CODE | | $+\frac{1}{2}$ | Alabama Apportionment Factor f | from |
| | | | | • | | | Schedule C, line 27 | |
| ●☐ Final Return | STATE OF INCORPORATION | NATURE OF BUSINESS | | DATE QUALIFIED IN ALABAMA | | ┨ (| • | |
| | | | | | | | CN | |
| • Amended Return | CHECK IF THE CORPORATION | NUMBER OF SHAREHOLDERS DURING | IF YOU FILED | A RETURN FOR 2011 AND THE ABOVE | | .1 | | |
| | OPERATES IN MORE THAN ONE STATE ● | TAX YEAR ● | | DRESS IS DIFFERENT, CHECK HERE | •∟ | | | |
| | UNLESS A | COPY OF FORM 1120S IS A | TTACHED | . THIS RETURN IS INCOM | PLETE | | | |
| SCHEDULE | A – Computation of Separa | | | - | | | | |
| | 1 Federal Ordinary Income or (L | | | | | 1 | • | 00 |
| | 2 Net short-term and long-term of | 1.5 | | 2 • | 00 | • | | 100 |
| | 3 Salaries and wages reduced to | | | 3 •(| 00) | | | |
| | 4 State and local net income tax | | | 4 • | 00 | | | |
| | 5 Net income or (loss) from renta | • • | | 5 • | 00 | | | |
| Reconciliation | 6 Net income or (loss) from othe | | | 6 • | 00 | | | |
| to Alabama | 7 Net gain or (loss) under I.R.C. | | | 7 • | 00 | | | |
| Basis (see | 8 Adjustments due to the Federa | • ' | · | | | | | |
| instructions) | - | | | 8 • | 00 | | | |
| | 9 Other reconciliation items (atta | | | 9 • | 00 | | | |
| | 10 Net reconciling items (add line | • | | | | 10 | • | 00 |
| | 11 Net Alabama nonseparately st | - · | | | | 11 | • | 00 |
| | 12 Contributions | | | 2 •(| 00) | | | |
| | 13 Oil and gas depletion | | | | 00) | | | |
| | 14 I.R.C. §179 expense deduction | n (complete Schedule K) | 1 | 4 •(| 00) | | | |
| Separately | 15 Casualty losses | | 1 | 5 ●(| 00) | | | |
| Stated Items | 16 Portfolio income less expenses | s (complete Schedule K) | 1 | 6 • | 00 | | | |
| (Related to | 17 Other separately stated items | (attach schedule) | 1 | 7 • | 00 | | | |
| Business | 18 Net separately stated items (ad | | | | | 18 | • | 00 |
| Income) | 19 Total separately stated and no | | | * | | 19 | • | 00 |
| | 20 Nonseparately Stated Income | | | | | 20 | • | 00 |
| | 21 ALABAMA INCOME TAX (see | |) <u></u> | | | 21 | • | 00 |
| | 22 Tax Payments, Credits, and Do | | | | | | | |
| | a. 2012 estimated tax payment | | | | | | | |
| | | | | | 00 | | | |
| | | nts (see instructions) | 2 | 2b ● | 00 | | | |
| | c. Payments prior to amendme | | | | | | | |
| | | | | | 00 | | | |
| Tax Due, | | chedule G) (see instructions) | | | 00 | | | |
| Payments, | | 2a, 22b, 22c and 22d) | | | | 22e | | 00 |
| and | 23 NET TAX DUE (subtract line 2 | , | | | | 23 | • | 00 |
| Credits | 24 Reductions/applications of ove | | | | | | | |
| | | | | | 00 | | | |
| | | ax due only) | | | 00 | | | |
| | | 13 estimated tax | | | 00 | | | |
| | T 7 | s (add lines 24a, 24b and 24c) | | | | 24d | | 00 |
| | 25 Amount to be refunded (see in | | | | | 25 | | 00 |
| | 26 TOTAL AMOUNT DUE | | | | | 26 | | 00 |
| | | rder, FORM BIT-V MUST ACCO | WPANY PA | <u>TIVI⊂IN I</u> . | | | | |
| | If you paid electronically check | Tilere 🔲 | | | | | | |





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SCHEDULE B – Allocation of Nonbusiness Income, Loss, and Expense

Identify by account name and amount all items of nonbusiness income, loss, and expense removed from apportionable income and those items which are directly allocable to Alabama. Adjustment(s) must also be made for any proration of

allowable deduction that is applicable to both business and nonbusiness income of the taxpayer shall be prorated to each class of income in determining income subject to tax as provided..." (See instructions).

| DIRECTLY ALLOCABLE ITEMS | ALLOCABL | E GROS | S INCOME / LOSS | RELATED EXPENSE | | | | NET OF RELATED EXPENSE | | | SE |
|--------------------------------------|----------------------------------|--------|----------------------|-----------------|------------------------|-----------------|---------|-----------------------------|------------|------------------|----------------------------------|
| | Column A Everywhere | | Column B Alabama | | Column C Everywhere | Colum Alabar | | Colu Every (Col. A le | where | Al | olumn F abama less Col. D) |
| Nonseparately stated items | | | | | | | | | | | |
| 1a | • | | | | | | | | | | |
| 1b | • | | | | | | | | | | |
| 1c | • | | | | | | | | | | |
| 1d Total (add lines 1a, 1b, and 1c) | | | | | | | | • | | • | |
| Separately stated items | | | | | | | | | | | |
| 1e | • | | | | | | | | | | |
| 1f | • | | | | | | | | | | |
| 1g | • | | | | | | | | | | |
| 1h Total (add lines 1e, 1f, and 1g) | | | | | | | | • | | • | |
| SCHEDULE C – Appor | tionment Facto | r Sch | edule. Do not com | plet | e if entity oper | ates excl | usively | in Alabam | ıa. | | |
| TANGIBLE PROPERT PRODUCTION OF BU | | | BEGINNING OF YEA | | BAMA END OF YEA | AR | BEGIN | E NING OF YEA | VERYW R | HERE END OF Y | /EAR |
| 1 Inventories | | 1 | • | | | | | | | | |
| 2 Land | | 2 | • | | | | | | | | |
| 3 Furniture and fixtures | | 3 | • | | | | | | | | |
| 4 Machinery and equipment | | 4 | • | | | | | | | | |
| 5 Buildings and leasehold im | provements | 5 | • | | | | | | | | |
| 6 IDB/IRB property (at cost) | | 6 | • | | | | | | | | |
| 7 Government property (at F | MV) | 7 | • | | | | | | | | |
| 8 • | | 8 | | | | | | | | | |
| 9 Less Construction in progre | ess (if included) | 9 | • | | | | | | | | |
| 10 Totals | | 10 | • | | | | | | | | |
| 11 Average owned property (E | BOY + EOY ÷ 2) | 11 | | | • | | | | • | • | |
| 12 Annual rental expense | | 12 | | x8 = | | | • | | x8 = • | • | |
| 13 Total average property (ad | d line 11 and line 12 | .) | | 13a | • | | | | 13b | | |
| 14 Alabama property factor — | · 13a ÷ 13b = line 14 | ł | | | | | | | 14 (| | % |
| | COMMISSIONS AND HE PRODUCTION OF | | | | 15a ALABAM | A | 15b EV | ERYWHERE | | 15c | |
| 15 Alabama payroll factor — 1 | $5a \div 15b = 15c \dots$ | | | | • | | | | L | | % |
| | SALES | | | | ALABAN | 1A | EV | ERYWHERE | | | |
| 16 Destination sales | | | | 16 | | | | | | | |
| 17 Origin sales | | | | 17 | • | | | | | | |
| 18 Total gross receipts from s | ales | | | 18 | • | | | | | | |
| 19 Dividends | | | | 19 | • | | | | | | |
| 20 Interest | | | | 20 | • | | | | | | |
| 21 Rents | | | | | | | | | | | |
| 22 Royalties | | | | _ | | | | | | | |
| 23 Gross proceeds from capit | al and ordinary gain | | | _ | • | | | | | | |
| 24 Other ● | | | ederal 1120S, line ● | | • | | | | | | |
| 25 Alabama sales factor — 25 | $5a \div 25b = line 25c$. | | | | 25a● | | 25b● | | | 25c● | % |
| 26 Enter the amount from line | 25c | | | | | | | | | 26 | 9 |

NOTE: If any factor is not utilized in the production of business income, it shall be eliminated and the denominator reduced accordingly (810-27-1-4-.09).

27 Sum of lines 14, 15c, 25c, and 26 ÷ 4 = ALABAMA APPORTIONMENT FACTOR (Enter here and on line 4, Schedule E, page 3) 27

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| S | SCHEDULE D – Apportionment of Federal Income Tax | | | |
|------------|--|---------------|--------------|------------|
| | Enter the federal income tax from Federal Form 1120S | 1 | • | 00 |
| | Enter the Alabama income from line 7, Schedule E below, if applicable. (If corporation operates | | | |
| | exclusively in Alabama, do not complete lines 2-8.) | | | |
| | 2 00 | | | |
| 3 | Apportionment of separately stated items 3a • 3b x • % = 3c • 00 | | | |
| J | Apportingment Factor | | | |
| <u>/</u> 1 | Enter in line 3a the amount from line 18, Schedule A | | | |
| | | | | |
| | | | | |
| | Adjusted total income (add line 19, Schedule A to line 1h, Column E, Schedule B) | | | |
| | Federal income tax apportionment factor (line 5 divided by line 6) | 7 | | % |
| | Federal income tax apportioned to Alabama (multiply line 1 by the percent on line 7) | 8 | • | 00 |
| | SCHEDULE E – Apportionment and Allocation of Income to Alabama | | | 00 |
| | Net Alabama nonseparately stated income or (loss) from line 11, Schedule A | 1 | • | 00 |
| 2 | Nonseparately stated (income) or loss treated as nonbusiness income (line 1d, Column E, Schedule B) | 1 | | ا آ |
| | - please enter income as a negative amount and losses as a positive amount | - | • | 00 |
| | Apportionable income or (loss) (add line 1 and line 2). | - | • | 00 |
| | Apportionment ratio from line 27, Schedule C | - | • | % |
| | Income or (loss) apportioned to Alabama (multiply amount on line 3 by percent on line 4) | - | • | 00 |
| | Nonseparately stated income or (loss) allocated to Alabama as nonbusiness income (Column F, line 1d, Schedule B) | 6 | • | 00 |
| 7 | Nonseparately stated income allocated and apportioned to Alabama (add lines 5 and 6). Also enter this amount on | | | |
| | line 2, Schedule D; line 20, Schedule A; and line 1, Schedule K | 7 | !• | 00 |
| Ş | CHEDULE F – Alabama Accumulated Adjustments Account | | | |
| | Beginning balance (prior year ending balance) | 1 | • | 00 |
| | Net Alabama nonseparately stated income or (loss) (line 11, Schedule A) | 2 | • | 00 |
| | Net separately stated items (line 18, Schedule A) | 3 | • | 00 |
| | Federal income tax deduction (line 1, Schedule D) | - | • | 00 |
| | Separately stated nonbusiness items (line 1h, Column E, Schedule B) | \vdash | • | 00 |
| | Other additions/(reductions) (Do not include tax exempt income and related expenses) | 6 | • | 00 |
| | Less distributions | 7 | • | 00 |
| | Ending balance (total appropriate lines). | 8 | | 00 |
| | CHEDULE G – Tax Credits (Caution – See Instructions) | | | |
| | Employer Education Tax Credit. | 1 | • | 00 |
| | Coal Credit. | \vdash | • | 00 |
| | Capital Credit | \vdash | • | 00 |
| | Credit for Taxes Paid to Foreign Country | 4 | - | 00 |
| | Heroes for Hire Credit | 5 | <u> </u> | 00 |
| | Full Employment Act of 2011 Credit | - | • | |
| | · · | 7 | | 00 |
| | AL New Markets Development Credit. | $\overline{}$ | | 00 |
| | Enterprise Zone Credit | _ | • | 00 |
| 9 | Irrigation Credit | 9 | • | 00 |
| 10 | TOTAL (add lines 1 through 0) Fator have and an line cod 0.1.1.1.4 | | <u>L</u> | 1 <u>,</u> |
| | TOTAL (add lines 1 through 9). Enter here and on line 22d, Schedule A. | 10 | • | 00 |
| | CHEDULE H – The Following Information Must Be Entered For This Return To Be Considered Complete | | | |
| 1 | Indicate tax accounting method used: ■ Cash ■ Accrual ■ Other | | | |
| 2 | Briefly describe your Alabama operations: ● | | | |
| | Enter this company's Alabama Withholding Tax Account No.: | | | |
| | | | | |
| 4 | Person to contact for information concerning this return: | | | |
| | Name ● | | | |
| | Telephone Number () Email Address | | | |
| 5 | Location of the corporate records: ● | | | |
| | Check if an Alabama business privilege tax return was filed for this entity: If the privilege tax return was filed using a different FEIN, please provide the name and FEIN used to file the return: | | | |
| | FEIN: ● NAME: | | | |



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| SCHEDULE | K. Distribution Observations | | | | | | |
|---|---|-------|----------------------------|---|--|----------------|--|
| | K – Distributive Share Items | | | | | | |
| | | | Federal Amount | Apportionmen Factor | t Appo | rtioned Amount | Enter on Alabam Schedule K-1 |
| 1 Alabama no | nseparately stated income (Schedule E, line 7) | 1 | | | • | | Part III, Line M |
| Separately | Stated Items: | | | | | | |
| 2 Contribution | ns | 2 | • | | | | Part III, Line S |
| 3 Oil and gas | depletion | 3 | • | | | | Part III, Line Z |
| 4 I.R.C. §179 | expense deduction | 4 | • | | | | Part III, Line O |
| 5 Casualty los | sses | ı | • | | | | Part III, Line W |
| 6 Portfolio inc | ome | 1 | • | | | | Part III, Line Q |
| 7 Interest exp | ense related to portfolio income | 7 | • | | | | Part III, Line P |
| 8 Other expen | nses related to portfolio income (attach schedule) | 8 | • | | | | Part III, Line R |
| Other separ | ately stated business items (attach explanation) | 9 | • | | | | Part III, Line T |
| 0 Small busin | ess health insurance premiums (attach explanation) | 10 | | | • | | Part III, Line Y |
| I Separately | stated nonbusiness items (attach schedule) | 11 | • | | • | | Part III, Line AA |
| 2 Composite | payment made on behalf of owner/shareholder | 12 | | | • | | Part III, Line U |
| 3 U.S. taxes | paid (attach explanation) | 13 | • | | | | Part III, Line V |
| Alabama ex | empt income (attach explanation) | 14 | • | | | | Part III, Line AB |
| Reemploym | ent Act of 2010 deduction (attach explanation) | 15 | | | • | | Part III, Line AC |
| Transactio | ns with Owners: | | | 100% | | | |
| 6 Property dis | stributions to owners | 16 | • | 10076 | • | | Part III, Line X |
| | | | | | | | |
| ign | I authorize a representative of the Departmen Under penalties of perjury, I declare that I have exa true, correct, and complete. Declaration of preparer (Signature of Officer Title of Officer | amine | ed this return and accompa | nying schedules and state all information of which p | ments, and to | ny knowledge. | rledge and belief, they a Social Security No. |
| ign | Under penalties of perjury, I declare that I have exact true, correct, and complete. Declaration of preparer (Signature of Officer Title | amine | ed this return and accompa | nying schedules and state all information of which p | ements, and to preparer has a | ny knowledge. | |
| lease ign ere aid reparer's | Under penalties of perjury, I declare that I have exa true, correct, and complete. Declaration of preparer (Signature of Officer Title of Officer Preparer's | amine | ed this return and accompa | nying schedules and state all information of which pate | ments, and to preparer has a Daytime Telepho | ny knowledge. | Social Security No. |

CHECK LIST

| HAVE THE FOLLOWING FORMS BEEN ATTACHED TO THE FORM 20S: |
|---|
| ALABAMA SCHEDULE K-1 (one for each shareholder) |
| ALABAMA SCHEDULE NRA (if applicable) |
| FEDERAL FORM 1120S (entire form as filed with IRS) |
| FEDERAL FORM 1120S PROFORMA (if applicable) |
| FORM BIT-V (if applicable) |
| |

Returns without Payments

MAIL TO: Alabama Department of Revenue

Pass Through Entity PO Box 327441 Montgomery, AL 36132-7441

Returns with Payments

MAIL TO: Alabama Department of Revenue

Pass Through Entity PO Box 327444

Montgomery, AL 36132-7444