SCHEDULE
AAC 2017

Alabama Department of Revenue
Alabama Adoption Tax Credit

NAME(S) AS SHOWN ON TAX RETURN

_____

PRIMARY SOCIAL SECURITY NO.   SPOUSE SOCIAL SECURITY NO.

_____   _____

PART I – Information about your eligible "child/children"

1 Name of Child ● _____
2 Social Security Number of Child ● _____
3 Address of Child ● _____
4 Name of Birth Mother ● _____
5 Address of Birth Mother ● _____
6 Name of Adoption Agency ● _____
7 Address of Adoption Agency ● _____

8 Name of Child ● _____
9 Social Security Number of Child ● _____
10 Address of Child ● _____
11 Name of Birth Mother ● _____
12 Address of Birth Mother ● _____
13 Name of Adoption Agency ● _____
14 Address of Adoption Agency ● _____

15 Name of Child ● _____
16 Social Security Number of Child ● _____
17 Address of Child ● _____
18 Name of Birth Mother ● _____
19 Address of Birth Mother ● _____
20 Name of Adoption Agency ● _____
21 Address of Adoption Agency ● _____

22 Name of Child ● _____
23 Social Security Number of Child ● _____
24 Address of Child ● _____
25 Name of Birth Mother ● _____
26 Address of Birth Mother ● _____
27 Name of Adoption Agency ● _____
28 Address of Adoption Agency ● _____

PART II – Adoption Credit

1 Enter total number of children adopted from Part 1	**1** ●		
2 Allowable credit per child	**2**	$1,000	00
3 Multiply line 1 by line 2	**3** ●		
4 Enter amount from Schedule NTC, line 11	**4**		
5 Enter the lesser of line 3 or line 4. Enter amount here and on Schedule NTC, line 12	**5** ●		
6 **Refundable Amount**. Subtract line 5 from line 3. Enter amount here and on Form 40 or Form 40NR, page 1, line 26	**6** ●		

ADOR