



Alabama Department of Revenue Schedule A–Itemized Deductions

2019

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

| Name(s) as shown on Form 40NR | Your social security number |
|-------------------------------|-----------------------------|
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The itemized deductions you may claim for the year 2019 are similar to the itemized deductions claimed on your Federal return; however, the amounts may differ. Please see instructions before completing this schedule. CAUTION: Do not include expenses reimbursed or paid by others. 1 00 Medical and **Dental Expenses** Enter amount from Form 40NR, line 12, col. B. 2 (See page 17) 3 00 Subtract line 3 from line 1. Enter the result. If zero or less, enter –0–..... 4 00 5 00 FICA Tax (Social Security and Medicare) and Federal Self-Employment Tax..... 6 00 7 00 Taxes You Paid (See page 17) Other taxes. (List – include personal property taxes.) 8 00 Add the amounts on lines 5 through 8. Enter the total here..... 9 00 00 10a **10a** Home mortgage interest and points reported to you on Federal Form 1098. Interest You Paid b Home mortgage interest not reported to you on Federal Form 1098. (If paid (See page 18) to an individual, show that person's name and address.) NOTE: Personal 10b 00 interest is not 11 00 11 Points not reported to you on Form 1098..... deductible. 12 00 00 13 Add the amounts on lines 10a through 12. Enter the total here..... 13 CAUTION: If you made a charitable contribution and received a benefit in return, see page 17. 14 00 Gifts to Charity Contributions by cash or check..... 00 (See page 18) 16 00 17 Add the amounts on lines 14 through 16. Enter the total here..... 00 17 Qualified **CAUTION:** Do not include medical insurance premiums. Long-Term Care 18 00 18 List type and amount. (See instructions.) ▶ Miscellaneous **Deductions** (See page 19) 00 00 Proration of Total itemized deductions to be prorated. (Add lines 4, 9, 13, 17, 18, and 19.) Above Amounts Enter percentage (%) from Form 40NR, page 1, line 10. (See page 19) Multiply line 20 by the percentage on line 21. 22 • 00 00 Alabama 00 Casualty and Theft Losses 23c 00 c Subtract line 23b from line 23a. If zero or less, enter -0-. Unreimbursed employee expenses — job travel, union dues, job education, etc. Alabama (You MUST attach Federal Form 2106 if required. See instructions.) Job Related 24 00 **Expenses** Other expenses (investment, tax preparation, safe deposit box, etc.). List type (See page 19) 25 00 and amount. You may ONLY 26 00 deduct expenses Multiply the amount on Form 40NR, line 12, column C by 2% (.02). associated with your 00 Alabama income. Subtract line 27 from line 26. Enter the result. If zero or less, enter -0-. 28 00 **Total Itemized** Add the amounts on lines 22, 23c, and 28. Enter the total here. Then **Deductions** 00 enter on Form 40NR, page 1, line 13 and check 13a, Itemized Deductions.



Sch. A, B, D, & E (Form 40NR) 2019



| Name(s) as shown on Form 40NR (Do not enter name and social security number if shown on other side) | | | | | | | | | Your social security number | | | | |
|---|--|------------------------|---------------------|--------------------------------|----------------|-------------|----------------------------|---------------|-----------------------------|-----------------------------|----------|-----------------------------|----------|
| SC | CHEDULE B - Interest and Div | vidend Income | | | | | | | | В | | С | |
| 1 | Total Income from Interest and Dividends | s before any exclus | ions | | . ▶ | 1 | | 00 | | Adjusted Gro Income from | SS | Adjusted Gro Income Earn | ed ed |
| 2 | List all interest received from obligations | of the Federal Gov | ernment, State of | Alabama, and | | | | | | All Sources | | in Alabama | |
| | political subdivisions of Alabama. | | | | | | | | | | | | |
| | a | | | | | 2a | | 00 | | | | | |
| | h | | | | - | 2b | | 00 | | | | | |
| | | | | | - | 2c | | 00 | | | | | |
| | d | | | | - | 2d | | 00 | | | | | |
| 2 | Total. Add amounts on lines 2a, b, c, and | 4 4 | | | _ | 3 | | 00 | | | | | |
| | TOTAL TAXABLE INCOME FROM INTI | | | | | ٠ | | 00 | | | | | |
| 4 | | | | | | | | | 4 | | 00 | • | 00 |
| | Enter here and also on Form 40NR, page | | | | | | | . • | 4 | | 00 | | 00 |
| <u> </u> | CHEDULE D – Profit From Sale | e of Real Esta | ie, Stocks, Bo | onas, etc. | | | | | | T - | | | |
| 1 | Enter total gain or (loss), before any Fed | eral exclusion from | the cale of all acc | eate which is not ta | vahla t | o the State | of Alahama | | 1 | В | 00 | С | T |
| | Itemize all other transactions which are to | | | | λαυίο ι | o ine State | oi Alabailia. | - | 1 | | 00 | | |
| | iternize an other transactions which are to | | | Ť | | | Τ, | | | | | | |
| а | | b Date | c Amount | d Depreciation | е | Cost or | f Subseque | ent | | | | | |
| | Kind of Property & Location | Acquired | Received | Allowable Since Acquisition | | her Basis | Improveme | vements | | | | | |
| | | | | Acquisition | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 3 | Totals | | | | | | | | | | | | |
| 4 | Net profit or (loss) (total of columns c and | d d less total of colu | mns e and f) | | | | | | 4 | | 00 | | 00 |
| 5 | TOTAL GAIN OR (LOSS) FROM SALE | OF REAL ESTATE | , STOCKS, BON | DS, ETC. Add the a | amount | s on lines | 1 and 4. | | | | | | |
| | Enter here and on Form 40NR, page 2, F | Part I, line 5, column | ns B and C | | | | | . ▶ | 5 | | 00 | | 00 |
| SC | CHEDULE E – Income From R | ents, Royalties | s, Partnership | os, Estates, Tr | usts, | and S | Corporation | ns | | | | | |
| PA | ART I — Rent and Royalty Income o | r (Loss) | | | | | | | | В | | С | |
| 1 | Enter total income or (loss) from all rents | 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 _l | Repairs | e Other | | | | | | |
| | Kind of Property & Location | 1 | of Rent | or Depletion | | ch itemized | Expenses (a | attach | | | | | |
| | | | or Royalty | (attach schedule) | | list) | Itemized I | ist) | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 3 | Totals (columns 2b through 2e) | | | | | | | | | | | | |
| | Net profit or (loss) (column b less sum of | | h 2e) | | | | | | 4 | | 00 | | 00 |
| | TOTAL INCOME FROM RENTS AND R | | , | | | | | F | | | | | |
| | Enter the totals here and include in line 8 | | | | | | | . ▶ | 5 | | 00 | | 00 |
| PA | ART II — Income or (Loss) from Par | | | | | | | | | | | | |
| | List income received from partnerships, e | • • | • | 2019. Income from | these s | sources no | t taxable to | | | | | | |
| | Alabama should be listed in column B on | | | \ \6.\ s | | | | | | | | | |
| | from Alabama sources should be listed in | n both columns B ar | nd C. | Partolete | Copp | | Employer Identification | | | | | | |
| | Name and Addr | ress | C | heck One Ship | Corporalio | 2 | Number | | | | | | |
| | | | | meen one b | \cap | | | | | | | | |
| | | | | | | | | | 6a | | 00 | | 00 |
| | | | | | | | | | | | | | - |
| | | | | | | | | | 6b | | 00 | | 00 |
| | | | | | | | | | | | | | 1 |
| | | | | | | | | | 6c | | 00 | | 00 |
| 7 | TOTAL INCOME OR (LOSS) FROM PA | RTNERSHIPS, S C | ORPORATIONS | , ESTATES, AND T | RUST | S | | | | | <u> </u> | | 1 |
| | Add the amounts on lines 6a, b, and c. E | | | | | | | . ▶ | 7 | | 00 | | 00 |
| PA | ART III — Summary | | | | | | | | | | | | - |
| _ | TOTAL INCOME OR (LOSS). Combine | the amounts on line | es 5 and 7, column | ns B and C. | | | | $\overline{}$ | | | | | |
| | Enter here and on Form 40NR, page 2, F | | | | | | | . ▶ | 8 | | 00 | | 00 |
| _ | 71 3- 7 | | | | | | | | | | | | |