



Alabama Department of Revenue Schedule A–Itemized Deductions

2020

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

name(s) as snown on	Fori	11 4UNH			YO	our social security number	
The itemized deductinstructions before co		s you may claim for the year 2020 are similar to the itemized deductions claimed leting this schedule.	on you	r Federal return; however,	the a	mounts may differ. Plea	ise see
		CAUTION: Do not include expenses reimbursed or paid by others.					
Medical and	1	Medical and dental expenses.	1	00			
Dental Expenses		Enter amount from Form 40NR, line 12, col. B 2 00					
•		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			
Taxes You Paid	6	FICA Tax (Social Security and Medicare) and Federal Self-Employment Tax	6	00	1		
	7	Railroad Retirement. (Tier 1 only)	7	00	1		
	8	Other taxes. (List – include personal property taxes.)			1		
	·		8	00			
	۵	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.		00	+-		
		Home mortgage interest and points reported to you on Federal Form 1098. (If paid	100	- 00	1		
Interest You Paid	b	to an individual, show that person's name and address.)					
interest rour aid		to an individual, show that person's hame and address.)					
			10b	00			
NOTE: Personal		Our life of more transported in the contract of the contract o	11		1		
interest is not		Qualified mortgage insurance premiums	\vdash	00	-		
deductible.	12	,	-	00	-		
	13	Investment interest. (Attach Form 4952A)		00			00
	14	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.	45				
Gifts to Charity		Contributions by cash or check.	-	00	4		
	16	Other than cash or check. (You MUST attach Federal Form 8283 if over \$500.)		00	4		
	17	Carryover from prior year.	_	00	1		
	18	3			18	•	00
Qualified		CAUTION: Do not include medical insurance premiums.	l				
Long-Term Care	19	Enter Amount			19	•	00
Miscellaneous	20	List type and amount. (See instructions.)					
Deductions							
					20	•	00
	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			22	•	%
	23	Multiply line 21 by the percentage on line 22			23	•	00
Alabama	24a	Enter the loss from Federal Form 4684,either ${\bf A} \ \square$ line 15, or ${\bf B} \ \square$ line 16, attach copy.	24a	00	1		
Casualty and	b	Enter 10% of your Adjusted Gross Income. (Form 40NR, line 12, column C)					
Theft Losses		if box B checked, otherwise enter zero	24b	00	1		
	С	Subtract line 24b from line 24a. If zero or less, enter -0			24c	•	00
Alabama	25	Unreimbursed employee expenses — job travel, union dues, job education, etc.					
Job Related		(You MUST attach Federal Form 2106 if required. See instructions.)					
Expenses		•	25	00			
F	26	Other expenses (investment, tax preparation, safe deposit box, etc.). List type					
		and amount. ▶	26	00			
You may <u>ONLY</u>	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 Alabama income.		Enter the result here.	28	00]		
niavailia IIICUIIIE.	29	Subtract line 28 from line 27. Enter the result. If zero or less, enter –0–			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) 2020

Page 2

Name(s) as shown on Form 40NR (Do not enter name and social security number if shown on other side)							Your social security number						
S	CHEDULE B - Interest and Div	ridend Income							+	В		С	
1							00	_	Adjusted Gross Income from		Adjusted Gross Income Earned		
2	List all interest received from obligations	of the Federal Gov	ernment, State of	Alabama, and	İ			Ť		All Sources		in Alabama	
	political subdivisions of Alabama.		,	,									
	a					2a	1	00					
	b				- 1	2b		00					
	c				- †	2c		00					
	d				— †	2d		00					
3	Total. Add amounts on lines 2a, b, c, and	1 d			- ⊳	3		00					
	TOTAL TAXABLE INCOME FROM INTI				[•			╁				
•	Enter here and also on Form 40NR, page						ì	▶ 4	•)	00	•	00
50	CHEDULE D – Profit From Sale								_		00		00
<u> </u>	CHEDOLE D - 1 TOIL 1 TOIL SAIR	or riear Lsia	ie, Stocks, D	orius, etc.									
1	Enter total gain or (loss), before any Fed	oral ovaluaion from	the cale of all ac	cote which is not to	vahla t	n tha Stata	of Alahama	١,		В	00	С	1
	Itemize all other transactions which are t				ixable li	o lile State	UI Alaballia.	1	+		00		
2	itemize all other transactions which are t			Ť	_		1.						
а		b Date	c Amount	d Depreciation	e	Cost or	Subsequent						
	Kind of Property & Location	Acquired	Received	Allowable Since Acquisition		her Basis	Improvement						
_				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
	TOTAL GAIN OR (LOSS) FROM SALE								T				
	Enter here and on Form 40NR, page 2, F							▶ 5			00		00
S	CHEDULE E - Income From R							_					
_	ART I — Rent and Royalty Income o		· ·				•			В		С	
_	Enter total income or (loss) from all rents	_ ` _ ′	is not taxable to	Alabama				_ 1			00		
	Itemize below all rent and royalty income	•									"		
 a	• • •		h	C	d p		e Other						
a	Kind of Property & Location		b Amount C Depreciation d Repairs e Other of Rent or Depletion (attach itemized Expenses (atta			ch							
	0		or Royalty	(attach schedule)		list)	Itemized list						
_							+						
_													
_							+						
_							-						
_													
	Totals (columns 2b through 2e)								_				
	Net profit or (loss) (column b less sum of	-						. 4			00		00
5	TOTAL INCOME FROM RENTS AND R												
_	Enter the totals here and include in line 8							5			00		00
P/	ART II — Income or (Loss) from Par	tnerships, S Cor	porations, Est	ates, or Trusts									
6	List income received from partnerships, e			2019. Income from	these s	ources not	taxable to						
	Alabama should be listed in column B on			1 1/6/2 / 5	2		Employer						
	from Alabama sources should be listed in	n both columns B ar	na C.	Tarthe or	OROF		Identification						
	Name and Add	ess	c	heck One Ship	Corporation	3	Number						
			'										
								68			00		00
_													
								61	,		00		00
_					+			- ·	+		55		+ 55
								6.			00		00
_	TOTAL INCOME OF (LOSS) FROM DA	DTNEDQUIDO CO	ODDODATIONS	EQTATES AND T	DIICT			60	<u> </u>		00		100
1	TOTAL INCOME OR (LOSS) FROM PA										00		00
_	Add the amounts on lines 6a, b, and c. E	nter the totals here	and include in line	e & Delow				7	+		00		00
_	ART III — Summary	u		D 10				_	\vdash				
8	TOTAL INCOME OR (LOSS). Combine			ns B and C.									
	Enter here and on Form 40NR nage 2 F	art i ling 6 column	ic H and ()					⊳ ∣ Ω			1 (1()	i .	l nn