- FORM **65**



Alabama Department of Revenue

CY ●□	
FY ●□	2022
SY●□	2022
52/53 Week ●□	

Partnership/Limited Liability Company Return of Income

	portant			For Calendar Year 20					1	g Status: (see	,
Check	capplicable b	JOX:	beginning •	, 2022, an					<u></u> ● □	1. Company	operating
• _	PL86-272		FEDERAL BUSINESS CODE NUMBER			//PLOYE	R IDENTIFICATION NUMB	ER		only in Ala	bama.
•	Amended R	eturn	•		•				• [
•] Initial Retur	n	Name of Company								ment (Sch. C).
•	Final Returr	1	•						$ \bullet $	3. Multistate	
• -	General Pa		nin Number and Otrest			0			-		Accounting
` -	1					Suite					
•	1	ed Partnership City or Town State 9 Digit ZIP Code (File Whiten appropriate and must are propriate and must attached) or Sch.									
• -	LLC/LLP				State	9 Digit 2	ZIP Code				ess allocation
• _	Qualified In		ent						-	only.	
•	Partnership Public Hous		Federal Audit Change							•	
_	Project		Check if the company qualifies for the		Number of Me				• [Electing Pas	s-Through
• _	Publicly Tra	ded	Enterprise Zone Credit or the Capita	Credit ■ L	During the Ta	x Year.	•			Entity	
•	Series LLC		State in Which Company Was Formed	Nature of Business			Date Qualified in Alabama				
			•	•			•			site Filing ● [
				FEDERAL FORM 106							
	Ca		n. Include only trade or business i				22 below. See the ii	nstructions	for mo	ore information.	
		1.	a. Gross receipts or sales		-	b ●					
			b. Returns and allowances			-					
			c. Balance. Subtract line 1b from line 1a						c •		
			Cost of goods sold (attach Federal Form						2 •		
Fede	eral Income		Gross Profit. Subtract line 2 from line 1c.						3 •		
			Ordinary income (loss) from other partner						4 •		
			Net farm profit (loss) attach Schedule F (F						5 •		
			Net gain (loss) from Federal Form 4797, F						6 •		
			, ,,	er income (loss) (attach statement)							
			Total income (loss). Combine lines 3 through						8 •		
			Salaries and wages (other than to partner						9 •		
			Guaranteed payments to partners						_		
			Repairs and maintenance					-			
			Bad debts					F-1			
			Rent						3 •		
Feder	al Deduction		Taxes and licenses (attach statement)					<u> </u>	4 •		
(see the		Interest		_			15	5 •		
ins	structions		a. Depreciation								
for I	imitations)		 b. Less depreciation reported on Federal 						ic •		
			Depletion (do not deduct oil and gas deple						7 •		
			Retirement plans, etc						8 •		
			Employee benefits programs						9 •		
			Other deductions (attach statement)					-	0		
			Total deductions. Add the amounts show						1 •		
				ess income (loss). Subtract line 21 from line 8							
			ately stated Reconciliations (from Schedule A, line 11)								
24. Federal ordinary business income (loss) adjusted to Alabama basis (add lines 22 and 23)							_				
25. Net nonbusiness income (loss) – Everywhere (from Schedule B, line 1d, Column E) enter income as negative and losses as positive							_				
			e (add lines 24 and 25)						_		
			ent factor (from line 9, Schedule C)						7 •		%
			ioned to Alabama (multiply line 27 by line						8 •		
			ome (loss) – Alabama (from Schedule B, I						9 •		
			th Insurance Premium Deduction (see ins						0 • ()
			come (loss) (add lines 28, 29, and 30)						1 •		
			ric Rehabilitation Tax Credit (from Schedu						2 •		
33. F	Railroad Mode	rnizat	on Act Credit (from Schedule PC, Part S,	line 7)				3	3 •		

Form	65 —	2022							Page 2
SCHEDUL	ΞA		(NOI	NSEPARATELY STATI	ED RECONCILIATION	I ADJUSTMENTS)			
	1.	Related me	embers interest or intangible	e expenses or costs from S	Schedule PAB (see instructi	ons)		1 •	
Additions	2.	Nondeduct	ible Federal Depreciation (Economic Stimulus Act of 2	2008) (see instructions)			2 •	
Additions	3.	Other reco	nciling items (attach sched	ule)				3 •	
	4.	State incor	ne taxes not deductible					4 •	
	5.	Contributio	ns not deductible on state	income tax return due to ar	n election to claim a state ta	x credit		5 •	
	6.	Total addit	ons					6 •	
Deductions	7.	Expenses	not deductible on federal in	come tax return due to elec	ction to claim federal tax cre	edit		7 •	
	8.	Adjustmen	ts due to the Federal Econ	omic Stimulus Act of 2008 ((attach schedule)			8 •	
	9.	Other reco	nciling items (attach sched	ule)				9 •	
	10.	Total dedu	ctions					10 •	
	11.	Total recor	ciliation adjustments (subt	ract line 10 from line 6 abov	ve)			11 •	
SCHEDULI	- D		ALLC	CATION OF NONBUS	SINESS INCOME, LOS	SC AND EVDENCE		•	
dentify by accour emoved from app Adjustment(s) mus	t nam ortiona t also	able income be made fo	unt all items of nonbusine and those items which are or any proration of expens	ess income, loss, and experted edirectly allocable to Alaba es under Alabama Income to tis applicable to both busing the state of the s	ense and nonbusine ama. mining income		" <i>(See</i>	instructions).	h class of income in deter-
DIRECTLY ALLO	CABL	E ITEMS	ALLOCABLE GRO	SS INCOME / LOSS	RELATED	EXPENSE		NET OF RELA	ATED EXPENSE
			Column A Everywhere	Column B Alabama	Column C Everywhere	Column D Alabama		Column E Everywhere I. A less Col. C)	Column F Alabama (Col. B less Col. D)
lonseparately state	d item	s							

DIRECTLY ALLOCABLE ITEMS	ALLOCABLE GROS	SS INCOME / LOSS	RELATED	EXPENSE	NET OF RELA	TED EXPENSE
	Column A Everywhere	Column B Alabama	Column C Everywhere	Column D Alabama	Column E Everywhere (Col. A less Col. C)	Column F Alabama (Col. B 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)		•		•	•	•

Person to contact for information regarding this return: Name: ● Telephone Number: ● (Email: ● 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. Please Sign Here Signature of General Partner Date Daytime Telephone No. Social Security No. Preparer's PTIN Date Preparer's Check if Signature self-employed Telephone No. E.I. No. Paid Firm's name (or yours, • if self-employed) •(Preparer's and address ZIP Code **Use Only** • **Email Address**

Page 3



Form 65 — 2022

SCHEDULE OTHER INFORMATION SCHEDULE OTHER INFORMATION Indicate if company has been oldsolved, sold, or incorporated, complete the following: Nature of change		SCHEDULE C APPORTIONMENT FACTOR SCHEDULE – Do no	ot co	omplete if the entity operates exc	clusively in Alabama.	
Dividends 2		SALES		ALABAMA	EVERYWHERE	
Interest	1.	Gross receipts from sales	1	•	•	
Rents	2.	Dividends			•	
Royalities	3.	Interest	3	3 •	•	
Corber ● (Federal 1065, line ●) 7 8 9 9 9 5 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1	4.	Rents			•	
. Other	5.	,			•	
Sales ALABAMA APPORTIONMENT FACTOR (Enter here and on line 27, page 1)	ô.					
Salba = ALABAMA APPORTIONMENT FACTOR (Enter here and on line 27, page 1) 9	7.					
Full Ownership List the disregarded entities in which the taxpayer holds full ownership of 100% Name of Entity FEIN All Sources AL Source Income (Loss) From All Sources AL Source Income (Loss) Al Source Income (Loss	3.	· · · · · · · · · · · · · · · · · · ·				
Name of Entity FEIN All Source All Source income (Loss) From All Source income (Loss) All Loss) All Loss All Source income (Loss) All Loss All	9.	8a/8b = ALABAMA APPORTIONMENT FACTOR (Enter here and on line 27, page 1)	• • • •		9	%
Name of Entity FEIN All Source All Source income (Loss) From All Source income (Loss) All Loss) All Loss All Source income (Loss) All Loss All						
Name of Entity FEIN All Sources Source Income (Loss) Source Income (Loss) Source Income (Loss) All Sources Source Income (Loss) Counce Income (Los) Counce Income (Los) Counce Income (Los) Counce Income (Los		SCHEDULE D Full Ownership List the disregarded entities	s in	n which the taxpayer holds ful	<u> </u>	T
SCHEDULE E OTHER INFORMATION I. Indicate if company has been dissolved, sold, or incorporated, complete the following: Nature of change Name and address of new company, corporation, or owners Name and address of new company, corporation, or owners Lenter entity's net worth If the privilege tax return was filed for this entity Check this box, if entity is exempt from BPT Enter entity's net worth If the privilege tax return was filed using a different FEIN, please provide the name and FEIN used to file the return. FEIN: A Tax payer's email address I Tax payer's email address A Did any corporation, partnership, trust, individual, estate, or tax-exempt organization own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? A It do not not not not not not not not not no		Name of Entity		EEIN		
SCHEDULE OTHER INFORMATION Indicate if company has been dissolved, sold, or incorporated, complete the following: Nature of change Name and address of new company, corporation, or owners C. Check if an Alabama business privilege tax return was filled for this entity • Check this box, if entity is exempt from BPT • Entire entity is net worth If the privilege tax return was filled using a different FEIN, please provide the name and FEIN used to file the return. FEIN: NAME: • 1. Taxpayer's email address A Did any corporation, partnership, trust, individual, estate, or tax-exempt organization own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? Yes Name No If Yes, attachs schedule of Partners owning 50% or more of the Partnership. At the end of the tax year, did the partnership or in the beneficial interest of a trust?		Name of Entity	-	FEIN	All Sources	Source income (Loss)
SCHEDULE OTHER INFORMATION SCHEDULE OTHER INFORMATION Indicate if company has been oldsolved, sold, or incorporated, complete the following: Nature of change	•		•	•	•	•
SCHEDULE OTHER INFORMATION Indicate if company has been dissolved osold, or incorporated, complete the following: Nature of change Name and address of new company, corporation, or owners Enter entity's net worth If the privilege tax return was filed using a different FEIN, please provide the name and FEIN used to file the return. FEIN: NAME: NAM	•		•	•	•	•
SCHEDULE OTHER INFORMATION I. Indicate if company has been dissolved oslod osl	•		•		•	•
SCHEDULE E OTHER INFORMATION 1. Indicate if company has been dissolved sold, or incorporated, complete the following: Nature of change Name and address of new company, corporation, or owners 2. Check if an Alabama business privilege tax return was filed for this entity • Check this box, if entity is exempt from BPT • Enter entity's net worth If the privilege tax return was filed using a different FEIN, please provide the name and FEIN used to file the return. FEIN: • NAME: • 3. Taxpayer's email address 4. Did any corporation, partnership, trust, individual, estate, or tax-exempt organization own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? • Yes • No If Yes, attach schedule of Partners owning 50% or more of the Partnership. 5. At the end of the tax year, did the partnership own directly, 50% or more of the total voting power of all classes of stock entitled to vote of any corporation, or own 50% or more directly or indirectly, in the profit, loss, or capital in any partnership or in the beneficial interest of a trust?	•		•	•	•	•
SCHEDULE E OTHER INFORMATION Indicate if company has been olisolved olisolve	•		•	•	•	•
• • • • • • • • • • • • • • • • • • •	•		•	•	•	•
SCHEDULE OTHER INFORMATION Indicate if company has been dissolved osold omercinated if company has been dissolved, sold, or incorporated, complete the following: Nature of change Nature of change Name and address of new company, corporation, or owners Check if an Alabama business privilege tax return was filed for this entity of the check this box, if entity is exempt from BPT of the privilege tax return was filed using a different FEIN, please provide the name and FEIN used to file the return. FEIN: NAME: NAME: Other individual, estate, or tax-exempt organization own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? Orther Information Orther Information Check this box, if entity is exempt from BPT organization Tax payer's email address Did any corporation, partnership, trust, individual, estate, or tax-exempt organization own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? Orectly, in the profit, loss, or capital in any partnership own directly 50% or more of the total voting power of all classes of stock entitled to vote of any corporation, or own 50% or more directly or indirectly, in the profit, loss, or capital in any partnership or in the beneficial interest of a trust?	•		•	•	•	•
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SCHEDULE E OTHER INFORMATION 1. Indicate if company has been olissolved olissolved omicorporated if company has been dissolved, sold, or incorporated, complete the following: Nature of change	•		•	•	•	•
SCHEDULE E OTHER INFORMATION 1. Indicate if company has been	•		•	•	•	•
1. Indicate if company has been	•		•	•	•	•
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If company has been dissolved, sold, or incorporated, complete the following: Nature of change Name and address of new company, corporation, or owners 2. Check if an Alabama business privilege tax return was filed for this entity ● □ Check this box, if entity is exempt from BPT ● □ Enter entity's net worth If the privilege tax return was filed using a different FEIN, please provide the name and FEIN used to file the return. FEIN: ● NAME: ● 3. Taxpayer's email address 4. Did any corporation, partnership, trust, individual, estate, or tax-exempt organization own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? ● □ Yes ● □ No If Yes, attach schedule of Partners owning 50% or more of the Partnership. 5. At the end of the tax year, did the partnership own directly 50% or more of the total voting power of all classes of stock entitled to vote of any corporation, or own 50% or more directly or indirectly, in the profit, loss, or capital in any partnership or in the beneficial interest of a trust?						
Name and address of new company, corporation, or owners	1.	If company has been dissolved, sold, or incorporated, complete the following:	pora	ated		
 2. 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: ● 3. Taxpayer's email address 4. Did any corporation, partnership, trust, individual, estate,or tax-exempt organization own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? ● □ Yes ● □ No If Yes, attach schedule of Partners owning 50% or more of the Partnership. 5. At the end of the tax year, did the partnership own directly 50% or more of the total voting power of all classes of stock entitled to vote of any corporation, or own 50% or more directly or indirectly, in the profit, loss, or capital in any partnership or in the beneficial interest of a trust?	2.	· · · · · · · · · · · · · · · · · · ·			Τ • □	
FEIN: NAME:		•				
 Taxpayer's email address Did any corporation, partnership, trust, individual, estate,or tax-exempt organization own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? Yes No If Yes, attach schedule of Partners owning 50% or more of the Partnership. At the end of the tax year, did the partnership own directly 50% or more of the total voting power of all classes of stock entitled to vote of any corporation, or own 50% or more directly or indirectly, in the profit, loss, or capital in any partnership or in the beneficial interest of a trust? 			EIN	I used to file the return.		
 4. Did any corporation, partnership, trust, individual, estate,or tax-exempt organization own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? Yes No If Yes, attach schedule of Partners owning 50% or more of the Partnership. 5. At the end of the tax year, did the partnership own directly 50% or more of the total voting power of all classes of stock entitled to vote of any corporation, or own 50% or more directly or indirectly, in the profit, loss, or capital in any partnership or in the beneficial interest of a trust? 	3					
5. At the end of the tax year, did the partnership own directly 50% or more of the total voting power of all classes of stock entitled to vote of any corporation, or own 50% or more directly or indirectly, in the profit, loss, or capital in any partnership or in the beneficial interest of a trust?		Did any corporation, partnership, trust, individual, estate,or tax-exempt organization own,			or more in the profit, loss, or capi	ital of the partnership?
rectly, in the profit, loss, or capital in any partnership or in the beneficial interest of a trust?	5.	·		•	o vote of any corporation, or own 5	50% or more directly or indi-
■ I Vee ■ I No. If Vee attach a schoolule	٠.				- 1-1- 5. a., 55. poranon, 5. 6mm	and an only of mid

Page 4





Multistate entities should not use Schedule K to allocate separately stated income. See instructions for Schedule B.

Multistate entities snould not use Sc	· ·	utory c	Federal	Apportionment	Apportioned	Enter on Alabama
SCHEDULE K Partners' Distributive Share Items			Amount (A)	Factor (B)	Amount (C)	Schedule K-1
INCOME (LOSS)						
1. Alabama Ordinary income (loss) (page 1, line 31)		1			•	Part III, Line G
2. Net rental real estate income (loss) (attach Form 8825)		2	•	•	•	Part III, Line H
3. a. Other gross rental income (loss)	3a •					
b. Expenses from other rental activities (attach statement)	3b •					
c. Other net rental income (loss). Subtract 3b from line 3a		3с	•	•	•	Part III, Line H
4. Guaranteed payments		4	•	•	•	Part III, Line I
5. Interest income		5	•	•	•	Part III, Line J
6. Dividends		6	•	•	•	Part III, Line J
7. Royalties		7	•	•	•	Part III, Line J
8. a. Short-term and long-term capital gain(loss)	8a •					
b. Opportunity Zone Investment(from Schedule OZ, line 4)	8b •					
c. Exemption of gain under 40-18-8.1(Tech Company)	8c ● ()					
d. Net short-term and long-term capital gain(loss) Add lines 8a, 8b and	d 8c	8d	•	•	•	Part III, Line K
9. Net section 1231 gain (loss) (attach Form 4797)		9	•	•	•	Part III, Line K
10. Other income (loss)		10	•	•	•	Part III, Line L
11. Nonbusiness items (attach schedule) (Schedule B, Column B, line 1h)		11			•	Part III, Line M
DEDUCTIONS						
12. Section 179 deduction.		12	•	•	•	Part III, Line N
13. a. Contributions		13a	•	•	•	Part III, Line O
b. Investment interest expense		13b	•	•	•	Part III, Line P
14. Other deductions		14	•	•	•	Part III, Line Q
15. Oil and gas depletion		15	•	•	•	Part III, Line R
16. Casualty losses		16	•	•	•	Part III, Line S
17. Nonbusiness items (attach schedule) (Schedule B, Column D, line 1h)		17			•	Part III, Line M
OTHER						
18. a. Tax-exempt interest income		18a	-	•	•	Part III, Line T
b. Other tax-exempt income			-	•	•	Part III, Line T
c. Nondeductible expenses			•	•	•	Part III, Line U
19. a. Distributions of cash and marketable securities		19a		•	•	Part III, Line V
b. Distributions of other property		19b	<u> </u>	•	•	Part III, Line V
20. a. Investment income		20a	-	•	•	Part III, Line W
b. Investment expenses		20b	+	•	•	Part III, Line X
c. Other items and amounts (attach statement)		20c	•	•	•	Part III, Line Y
21. Total credits (attach Schedule PC)					•	Part II, Line F
22. Composite payment made on behalf of owner		22			•	Part III, Line Z
23. Electing Pass-Through Entity Tax (Form EPT, line 2)		23			•	Part III, Line Z





SCHEDUL	E P PARTNERSHIPS, TRUSTS, AND ESTATES						
a)	Ordinary income or (loss) from Partnerships, Trusts and Estates. Name and Address	(b) Check One	Estate of	Truss	(c) Employer Identification Number	(d) Ordinary Income From All Sources	(e) Ordinary Income Fron Alabama Sources
			•	•	•	•	•
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	COME OR (LOSS). Add the amounts in columns (d) and (e). otal here and include the amount from line 1d on page 1, line 4.					•	•