

2021



Alabama Individual Income Tax Return FULL YEAR RESIDENTS ONLY

For the year Jan. 1 - D	ec. 31, 20)21, or c	other tax year: Beginning:			Ending:	•		-			Your soc	ial secur	ity numb	er			
Your first name				Initial	Last name				_	•							4	
•				• IIIIIIai	• Last Harrie						Check if primary is deceased Primary's deceased date (mm/dd/yy)							
Spouse's first name				Initial	Last name				_	•		nary 3 dec	casca a	ato (IIIII	ruury	y)		
•				•	•						S	Spouse's s	ocial sec	curity nu	mber		+	
Present home address (number a	ınd stree	et or P.O. Box number)						-	•								
•											•	Che	ck if spoi	use is de	eceas	ed sed	7	
City, town or post office						State	ZIP code		-			ouse's dec						
•						•	•		_	•								
• Check if a is outside		3	Foreign Country						•	CHE	CK B	OX IF	AME	NDEI	D R	RETURN	• 🗆	
Filing Status/	- 1	• [\$1,500 Single		3	■ □ ¢1	500 Married	filing separate. Cor	nnlata Snousa	e Nas								
Exemptions		• [\$3,000 Married filir	na ioint				Family (with qualify		_								
			pama Income Tax With							Δ_	Alabam	na tax w	ithheld	1		B - !	Income	
Income			ges, salaries, tips, etc.					•		5a (ia tax w			5b		11001110	00
and Adiocator and a			rest and dividend inco				-							_	6	•		00
Adjustments	7	Tota	al income. Add lines 5	b and 6 ((column B)									🗀	7	•		00
Deductions	8	Star	ndard Deduction (enter	amount	from table	on page 9	of instruction	s)		8	•		(00				
If claiming a deduc-	9	Fed	eral tax deduction (see	instructi	ons)													
tion on line 9, you must attach page		DO	NOT ENTER THE FEI	DERAL T	AX WITH	IELD FRO	M YOUR FO	RM W-2(S)		9	•		(00				
1,2 and Schedule 1 of your Federal	10		sonal exemption (from								•		(00				
Return, if applica- ble.	11		endent exemptions (fro								•			00				
	12	Tota	al deductions. Add lin	es 8, 9, 1	10, and 11									1	2	•		00
	13		able income. Subtrac											-	-	•		00
	14	_										00						
	15							_	. — .	_					-	•		00
Tax and	16	You	ı may make a voluntar	/ contribu										_	6a	•		00
Payments		T	-1 4 12-1-124					arty							6b	•		00
Staple Form(s) W-2,			al tax liability and vol	•										-	_	•		00
W-2G, and/or 1099 here. Attach Schedul		8 Alabama income tax withheld (from column A, line 5a)										_			00			
W-2 to return.	13										-	_			00			
	20 21										_	•		00				
	22									_	•		00					
			usted Total Payments												_	•		00
AMOUNT			ne 17 is larger than line										Ī		_			+**
YOU OWE		Plac	ce payment, along with	Form 40	V, loose in	the mailing	g envelope. (I	FORM 40V MUST	ACCOMPANY	PAYMI	ENT.)	24	•					00
OVERPAID	25		ne 23 is larger than line											2	5	•		00
Donations	26	Tota	al Donation Check-offs	from pag	ge 2, Part I'	V, line 2								2	6	•		00
REFUND	27	REF	FUNDED TO YOU. Sul	btract line	e 26 from lir	ne 25.												
		(You	u MUST SIGN this retu	ırn before	your refun	ıd can be p	processed.) .					27	•					00
	•		I authorize a represer	ntative of	the Departi	ment of Re	venue to disc	cuss my return and	attachments w	ith my p	oreparer							
Sign Here			enalties of perjury, I												owle	edge and be	elief, they ar	re
In Black Ink	tru	ie, cor	rrect, and complete. De	eclaration	of prepare	r (other the	an taxpayer)	is based on all info	rmation of whic	h prepa	rer has	any kno	wledg	e.				
Кеер а сору	Yo	Your signature Date Daytime telephone number Your occ						r occu	pation									
of this return	/ _								()									
for your records.	Sp	ouse'	s signature (if joint retu	ırn, BOTI	H must sign	1)		Date	Daytime tel	ephone	number	Spo	use's	occupation				
												_		NI DTIN'				
Paid	Pro sic	eparei Inature	r's e						Date			eck if lf-emplo	ved		Pre ●	eparer's SS	N Or P []N	_
Preparer's	Fir	m's na	ame (or yours					Davtime t	elenhone no 1)			E.I. No.				
Use Only	if s	if self-employed)					-	ZIP Code										
	un	a auu																

Form	40A (2	021)								Page 2
PART I	1	Were you (and your spouse, if married filing join	tly) a resident of Alabam	a for the	entire year	2021?			🗆 Yes	☐ No
		If you checked no, DO NOT COMPLETE THIS I	FORM. See "Which Form	n To File"	on page 5	of instructions.				_
	2	Did you file an Alabama income tax return for the	e year 2020?						∐ Yes	∐ No
		If you checked no, state the reason for not filing.								
	3	Give name and address of your present employe	er:							
General		Yourself								
Information		Your Spouse								
		Your occupation			•					
All Taxpayers	5	Enter the Federal Adjusted Gross Income ●\$ _		and F	Federal Tax	cable Income ●\$		as	reported on your	
Must Complete This Section		2021 Federal Individual Income Tax Return.								
This Section	6	Do you have income which is reported on your F				ama return?	• • • • • • • • • • • • • • • • • • • •	•	Yes ● □ No	
		If yes, enter source(s) and amount(s) below (oth	er than state income tax	refund):						
		Source •							nt ●\$	
		Source •							nt ●\$	
		Source •						Amou	nt ●\$	
PART II	1a	Dependents: (1) First name	Last name			(2) Dependent's social security number.	(3) Depen	ident's to you.	(4) Did you provide more than one-half dependent's support?	
						•				
						•				
Dependents						•				
Dependents						•				
Do not include	b	Total number of dependents claimed above							······································	•
yourself or	2	Amount allowed. (Multiply the total number of d	lependents claimed on l	ine 1b by	the amoun	t from the dependent chart be	low.)			
your spouse		Use the following chart to determine the per-dep	endent exemption amou	ınt:						
(See page 10)		Amount on Line 7, Page 1 Dependent	Exemption							
(000 page 10)		0 – 20,000 1,0	000							
		20,001 – 100,000	500							
			300							
		Enter amount here and on page 1, line 11						2	•	00
PART III Federal										
Tax Liability	1	Enter the Federal Income Tax Liability from work	sheet (see instructions)	here and	d on line 9, ¡	page 1		1	•	00
Deduction										
PART IV										
	1	You may donate all or part of your overpayment.	(Enter the amount in the	e appropi	riate boxes.	.)				
	а	Senior Services Trust Fund	. 1a ●	00	j Alaba	ama Firefighters Annuity and E	Benefit Fund		1j ●	00
	b	Alabama Arts Development Fund	1b ●	00	k Alaba	ama Breast & Cervical Cancer	Program		1k ●	00
	С	Alabama Nongame Wildlife Fund	1c ●	00	I Victin	ns of Violence Assistance			11●	00
	d	Child Abuse Trust Fund	. 1d ●	00	m Alaba	ama Military Support Foundati	on		1m ●	00
Donation	е	Alabama Veterans Program	. 1e ●	00	n Alaba	ama Veterinary Medical Found	lation			
Check-offs	f	Alabama State Historic Preservation Fund	. 1f ●	00	Spay	-Neuter Program			1n ●	00
	g	Alabama State Veterans Cemetery at			o Cano	er Research Institute			10 ●	00
		Spanish Fort Foundation Incorporated	10.	00	n Alaha	ama Association of Rescue Sc	niade		1n ●	00

а	Senior Services Trust Fund	1a ●	00
b	Alabama Arts Development Fund	1b ●	00
C	Alabama Nongame Wildlife Fund	1c ●	00
d	Child Abuse Trust Fund	1d ●	00
е	Alabama Veterans Program	1e ●	00
f	Alabama State Historic Preservation Fund	1f ●	00
g	Alabama State Veterans Cemetery at		
	Spanish Fort Foundation, Incorporated	1g ●	00
h	Foster Care Trust Fund	1h ●	00
i	Mental Health	1i ●	00

j Alabama Firefighters Annuity and Benefit Fund	1j ●	00
k Alabama Breast & Cervical Cancer Program	1k ●	00
I Victims of Violence Assistance	11●	00
m Alabama Military Support Foundation	1m ●	00
n Alabama Veterinary Medical Foundation		
Spay-Neuter Program	1n ●	00
o Cancer Research Institute	10 ●	00
p Alabama Association of Rescue Squads	1p ●	00
q USS Battleship Commission	1q ●	00
r Children First Trust Fund	1r●	00

Drivers	
License	Info

DOB _		Iss date _	Exp date _	
(mm/dd/yyyy) ●	Your state DL#	(mm/dd/yyyy) •	(mm/dd/yyyy) ●	
DOB		lss date	Exp date	
(mm/dd/yyyy) —	Spouse state DL#	(mm/dd/yyyy)	(mm/dd/yyyy)	

WHERE TO **FILE** FORM 40A

If you are receiving a refund, Form 40A, line 27, mail your return to: Alabama Department of Revenue, P.O. Box 154, Montgomery, AL 36135-0001 If you are making a payment, Form 40A, line 24, mail your return to: Alabama Department of Revenue, P.O. Box 2401, Montgomery, AL 36140-0001 If you are not receiving a refund or making a payment, mail your return to: Alabama Department of Revenue, P.O. Box 327469, Montgomery, AL 36132-7469

Mail only your 2021 Form 40A to one of the above addresses. Prior year returns, amended returns, and all other correspondence should be mailed to Alabama Department of Revenue, P.O. Box 327464, Montgomery, AL 36132-7464.

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