

Specifications and Instructions for Reproduction Of Alabama Withholding Tax Coupons

The Alabama Department of Revenue offers a free online service for filing withholding tax returns. This service includes a bulk filing option for tax preparers. The Department's Web site is www.revenue.alabama.gov. With prior approval, the Alabama Department of Revenue allows employers, withholding tax agents, tax filing services, and other vendors to reproduce withholding tax coupons. The forms must be cut to the **exact** size as described in these specifications. **All** variable data fields (name, address, period, account number, date, etc.) must be completed and correct before permission is granted to reproduce such coupons.

For Tax Filing Services, Withholding Agents and Other Vendors: Sample coupons must be submitted for review. Forms and variable data must be in the same font as the sample forms. Forms submitted for approval must be a separate submission from those submitted to pay withholding tax. Forms must be mailed, facsimiles are not accepted.

General Instructions

Punctuation such as periods, commas, dashes, colons, parentheses, slashes, etc., must not be used in the reproduction of withholding tax coupons. If there is an apostrophe in the legal name, omit it, but, do not add a space. If there is a hyphen in the legal name, substitute it with a space. If the legal name contains the word "and" the word "and" must be written out, do not use an ampersand or a plus sign. If ".com" is part of the legal name, replace the "." with a space. Abbreviations, numerals, plus signs, and dollar signs may be used only if it is part of the legal name. If the legal name contains a numeric "0" or an alphabetic "O", the appropriate character must be used. If the legal name begins with the word "The," move it to the end of the name or delete it. Individual owners should use last name, space, first name.

The Department of Revenue utilizes an automated system that compares the name and account number shown on withholding tax coupons to the name and account number on file in the Withholding Tax Section. All spaces, abbreviations, and other data **must match exactly** to Departmental records. Any discrepancy, even a single digit, will cause the coupon to be rejected. The Department mails preprinted coupons to all active withholding tax accounts that file by mail. These coupons can serve as a guide to insure accurate reproduction of your coupons. See attached samples.

You must provide the name and phone number of a person we can contact in case we have questions regarding your submission. Information should be mailed to: The Alabama Department of Revenue, Withholding Tax Section, P. O. Box 327480, Montgomery, AL 36132-7480.

Note: The user is responsible for assuring that the data on their forms is correct. If this information is incorrect or omitted the return will not be accepted and will therefore, be subject to applicable penalties. This information can be verified by referencing the coupons provided by this office or by contacting the Withholding Tax Section at 334-242-1300 or by faxing this office at 334-242-0112. Information may also be verified by submitting a list of clients by mail or by fax to the Department. This list must include employer name, account number and federal identification number. The list, with corrections, will be returned to you.

Withholding Tax Forms

Form A-6 Monthly withholding tax return is required of all withholding agents who have withheld more than one thousand dollars (\$1,000.00) in either the first or second month of the quarter. Monthly returns and tax withheld are due by the 15th of the month following the month in which the tax was withheld. Form A-6 should cover only one month and is required only for those months in which the tax withheld in that month exceeds one thousand dollars (\$1,000.00). However, a return may be filed, voluntarily, in a month in which less than one thousand dollars (\$1,000.00) was withheld. All payments of \$750 or more are required to be filed and paid electronically through the Department's Web site at www.revenue.alabama.gov/withholding/efiling.cfm and must be filed and paid by 4:00 CST on the due date to be considered timely.

Form A-1 Quarterly withholding tax return is required of all employers or other withholding agents who are registered with the Department. The return and tax withheld are due by the last day of the month following the end of the quarter. This return must be filed even if no tax has been withheld. Payment due on this return is the amount due for the quarter less any previous amounts remitted with Form A-6. All payments of \$750 or more are required to be filed and paid electronically through the Department's Web site at www.revenue.alabama.gov/withholding/efiling.cfm and must be filed and paid by 4:00 CST on the due date to be considered timely.

Penalties

Completed forms and payments must be postmarked on or before the due date or electronically filed and paid by 4:00 CST on the due date in order to avoid delinquent penalty and interest charges. Code of Alabama 1975 Section 40-2A-11 provides for the following penalties: 1) for late filing of a withholding tax return, 10% of the tax due on such return or \$50.00, whichever is greater. 2) for late payment of withholding tax, 10% of the tax due. In cases where both the return and payment are delinquent, the two penalties should be added together and shown as one figure. Interest is computed at the rate applicable to federal tax deficiencies and is subject to change each quarter. **Returns without a proper name or account number will be considered never to have been filed and are subject to the applicable penalties listed above.**

How and Where to Apply

For more information concerning the reproduction of Alabama withholding tax coupons, you can call the Withholding Tax Section at (334) 242-1300, fax your questions to (334) 242-0112, or view our Web site at www.revenue.alabama.gov. The Department's Web site also contains information on filing electronically by using the free online service and information on bulk filing.

Under current Alabama law only taxpayers who are remitting taxes electronically (either because they are required to remit electronically because they meet the EFT threshold or whether doing so voluntarily) are required to submit an electronic return.

Coupon Specifications

Dimensions: Height 3 2/3" Width 8 1/2"

Paper: Forms must be printed on 24# / 60# paper with a vellum finish backing.

Color: White

Content: On Forms A-1 and A-6, the name of the authorized printer of the form must be shown in the upper right portion of the form in 6 point type, printed vertically not more than 1/2 inch from the right edge, not to exceed 10 characters. Abbreviate if necessary. On Form A-3, this information should be printed below the signature line. All other wording, symbols, numbers, line descriptions, print size, boldness, etc. must match official forms printed by the Department.

Print Type: Courier font Point Size 12

**STATE OF ALABAMA
EMPLOYERS RETURNS
OF INCOME TAX WITHHELD**

Letter Id: L186672032

THIS IS YOUR WITHHOLDING TAX ACCOUNT NUMBER. REFER TO
THIS NUMBER IN ALL CORRESPONDENCE REGARDING YOUR ACCOUNT.



2015

C
PO BOX 8313
ANNISTO



ALABAMA WITHHOLDING TAX ELECTRONIC FILING AND PAYMENT SYSTEM

The Alabama Department of Revenue offers electronic services for filing and remitting withholding taxes from a personal computer or device. This service is entitled My Alabama Taxes or MAT.

To learn more about this service and how to file and pay electronically, visit our Web site at <http://www.revenue.alabama.gov/withholding/efiling.cfm> and follow the instructions. In order to access the MAT system for the first time, you will need your Sign On ID and Access Code listed below.

ACCOUNT NUMBER

0000404551

SIGN ON ID

000543945

ACCESS CODE

56971884

Please Keep this information in a safe place and do not disclose your Sign On ID and Access Code numbers to anyone.

FILING METHODS

There are two methods for reporting and remitting your Alabama withholding tax. If you make a single withholding tax payment of \$750 or more, you are required to electronically file both your payment and your withholding tax return. The Department encourages taxpayers who are not currently required to file electronically (those remitting less than \$750) to also file their withholding tax returns and payments electronically. To learn more about electronic filing, visit our Web site at <http://www.revenue.alabama.gov/withholding/efiling.cfm> and follow the instructions.

If you are not filing electronically you must use the forms provided or substitute forms that the Department has approved. Penalties are provided for using forms that have not been approved by the Department. Such forms must be signed by the person responsible for submitting the return and payment. If your forms are misplaced, you may order new forms by calling the Withholding Tax Section at 334-242-1300, by facsimile 334-242-0112, by e-mail through our Web site, or by writing to Alabama Department of Revenue, Withholding Tax Section, PO Box 327480 Montgomery, AL 36132-7480. The Department's Web address is www.revenue.alabama.gov.

Payments and returns should be mailed to:

ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483

This address is provided on the back of Forms A-1 and A-6 and may be used in a window envelope.

Forms A-3 and W-2 and reports which require attachments (e.g., explanation of credit claimed on Line 5) or any correspondence concerning your withholding tax account should be mailed to:

ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327480
MONTGOMERY, AL 36132-7480

This address is provided on the back of Form A-3 and may be used in a window envelope.

GENERAL INSTRUCTIONS FOR FORMS A-1 AND A-6

All payments of \$750.00 or more are required to be filed and paid electronically through the Department's Web site at www.revenue.alabama.gov/withholding/efiling.cfm before 4:00 p.m. CST on the due date to be considered timely.

FORM A-6, MONTHLY REPORT - A monthly report on Form A-6 is required for each of the following months in which more than \$1,000 in Alabama income tax is withheld: January, February, April, May, July, August, October, and November. Under no circumstances should tax for any period greater than one calendar month be reported on Form A-6. The due date for monthly reports is the 15th day of the month immediately following the month in which more than \$1,000 is withheld. If the due date falls on a Saturday, Sunday, or legal holiday, the report will be considered timely if it is filed on the next business day.

FORM A-1, QUARTERLY REPORT - Every employer who withholds Alabama income tax or who is required to withhold Alabama income tax is required to file a Form A-1 each calendar quarter covering the appropriate three month period ending March 31, June 30, September 30, or December 31. Under no circumstances should tax for any period greater than one quarter be reported on Form A-1. Employers who are on the Department's mailing list must file Form A-1 each quarter whether or not tax is withheld. The due date for quarterly reports is the last day of the first month following the end of the quarter. If the due date falls on a Saturday, Sunday, or legal holiday, the report will be considered timely if it is filed on the next business day.

FIRST REPORT BY A NEW EMPLOYER - Do not use forms that have been preprinted for another employer. New employers apply for a withholding tax account through the Department's Web site at www.revenue.alabama.gov or by completing Form Com:101 and returning it by mail. After Form COM:101 has been processed, a number will be assigned and preprinted forms will be mailed if you select that option. If you do not select to have coupons mailed, a letter will be sent with the account number and the sign on information to file electronically.

CHANGE OF ADDRESS - Indicate new address on back of Form A-1 or A-6.

INSTRUCTIONS FOR PREPARING FORM A-1 AND FORM A-6

- Line 1** - If you have discontinued withholding Alabama income tax and your account should be cancelled, place an 'X' on this line to indicate a final return. Do not mark this line unless you are no longer withholding Alabama income tax. NOTE: This will cancel your account. Form A-3 with W-2's should be filed for this year.
- Line 2** - Enter number of employees from whose wages Alabama income tax has been withheld during this reporting period.
- Line 3** - Enter total Alabama income tax withheld during this period. If Form A-1 is being filed, amount on this line should be for 3 months. If Form A-6 is being filed, amount should be for one month.
- Line 4** - This line applies to quarterly report (Form A-1) only. Enter total Alabama income tax previously remitted for first and/or second month of quarter. This amount should also include any credit claimed during the first and/or second month of quarter.
- Line 5** - Use this line to claim credit for overpayment of Alabama withholding tax for prior quarters. If a credit memorandum has not been issued by the Department of Revenue, the report on which the credit is claimed must be accompanied by a statement providing the following information: (a) Monthly or quarterly period(s) overpaid. If more than one monthly or quarterly period is overpaid, state the amount of overpayment applicable to each. (b) Brief explanation of why overpayment occurred.
NOTE: Credits previously claimed during the quarter on Form A-6 should be included on Line 4 (not Line 5) of Form A-1.
- Line 6** - Penalties are imposed for both late filing of the return and late payment of the tax. In cases where both return and payment are delinquent, the two penalties should be added and shown as one figure on Line 6.
Penalty for late filing of a withholding tax return is 10% of the tax due on such return (Line 3 minus Line 4 on Form A-1; Line 3 on Form A-6) **OR** \$50.00 whichever is greater.
Penalty for late payment of withholding tax is 10% of the tax due. Return and payment of tax must be postmarked or received by the Department of Revenue on or before the due date to avoid delinquent penalty and interest charges.
- Line 7** - Interest is computed at the rate applicable to federal tax deficiencies and is subject to change each quarter. Contact the Withholding Tax Section at 334-242-1300 for the current interest rate.
- Line 8** - Line 3 less Lines 4 and 5 plus Lines 6 and 7.
- Line 9** - Indicate on Line 9 the amount remitted with the return. Make check or money order for the amount on Line 9 payable to the Alabama Department of Revenue.
- Line 10** - Check this box to indicate address change. Provide new address on back of Form A-1 or A-6.

GENERAL INSTRUCTIONS FOR FORM A-3

Alabama law requires employers and withholding agents to furnish each of their employees with an annual wage and tax statement, federal Form W-2, to file with their state income tax return. A copy of each employee W-2 should also be submitted by the employer or withholding agent directly to the Department of Revenue. Form A-3 is the transmittal form for these statements. If you file 25 or more statements these must be submitted electronically through the Department's Web site.

The annual reconciliation consists of (a) Form A-3 and (b) employee wage and tax statements. If employee wage and tax statements are submitted, an adding machine tape of the Alabama withholding amounts shown on such statements should accompany them. Employee wage and tax statements should be bound or stapled in such a manner that they will remain in the order they appear on the adding machine tape during shipping and handling.

**Mail Form A-3 with wage and tax statements to: Alabama Department of Revenue, Withholding Tax Section,
PO Box 327480, Montgomery, AL 36132-7480.**

Note: If you have withheld Alabama income tax from non-wage payments (pensions, interest payments, etc.), information returns which indicate Alabama income tax was withheld must accompany Form A-3. You can file information returns that have Alabama tax withheld through the Department's Web site at www.revenue.alabama.gov/withholding/efiling.cfm. Payers who have elected to voluntarily withhold Alabama income tax from such payments **may not** participate in the Combined Federal/State Information Reporting Program.

FILING INSTRUCTIONS FOR REPORTING WAGE AND TAX INFORMATION ELECTRONICALLY THROUGH THE INTERNET.

If you file 25 or more wage and tax statements, Forms W-2 (and/or 1099's with Alabama income tax withheld), you must file them electronically through the Department's Web site. The Department encourages all employers and filing agents to file wage and tax statements electronically through the Internet. If you file electronically, you must follow the procedures and specifications on Form 10, Procedures and Specifications For Filing Wage and Tax Information Electronically. Form 10 is available on the Department's Web site at www.revenue.alabama.gov.

INSTRUCTIONS FOR PREPARING FORM A-3

- STEP 1 -** Enter the amounts of Alabama income tax withheld in the appropriate spaces in Column 1 of Form A-3. You must list monthly amounts if (a) you withheld \$1000 or more during any single month of the year or (b) you filed on a monthly basis during the year. Otherwise, you may list only quarterly amounts.
- STEP 2 -** Enter in the appropriate spaces in Column 2 the amounts of Alabama withholding tax actually remitted. Include in these amounts credits claimed on Line 5 of Form A-1 or Form A-6 for overpayment of withholding tax for any prior year. (Caution: Amounts listed in Columns 1 and 2 should include only Alabama withholding tax. Do not include delinquent penalty and/or interest charges.)
- STEP 3 -** Add amounts listed in Step 2 (Column 2). Show total in Block 1.
- STEP 4 -** Enter in Block 2 the total Alabama income tax withheld as shown on employee wage and tax statements or computer listing to be transmitted with Form A-3. This total must be supported by an adding machine. Note: If any portion of the amount shown in Block 2 was reported under any account number other than the one under which the Form A-3 is being filed, attach a listing of other account number(s) and amount(s) reported under each account.
- STEP 5 -** Compare amounts in Blocks 1 and 2. If the amount in Block 1 is larger, your account is overpaid. Show amount of overpayment in Block 4 and indicate whether you want a refund or will claim credit on a future return. Overpayments of less than \$100.00 will be issued as a credit unless written request for a refund is submitted with Form A-3 and W-2 forms. If the amount in Block 2 is larger, your account is underpaid. Show amount of underpayment in Block 3 and enclose a check or money order for such amount with Form A-3 when filed.

Do not send your fourth quarter payment with your Form A-3 and W-2 forms. Your fourth quarter payment should be sent with Form A-1 for the fourth quarter on or before the due date to avoid penalties.

FORM A-3 STATE OF ALABAMA ANNUAL RECONCILIATION OF ALA INCOME TAX WITHHELD		COL 1 - TAX WITHHELD	COL 2 - TAX REMITTED
	YEAR 2015		
NUMBER OF EMPLOYEE WAGE STATEMENTS AND/OR INFORMATION RETURNS TRANSMITTED WITH THIS FORM		JAN	\$
ALABAMA WITHHOLDING TAX ACCOUNT NUMBER	DATE DUE 1/31/2016	FEB	\$
Employer Name and Address		MAR (1st QTR)	\$
		APR	\$
		MAY	\$
		JUN (2nd QTR)	\$
		JUL	\$
		AUG	\$
		SEP (3rd QTR)	\$
		OCT	\$
		NOV	\$
		DEC (4th QTR)	\$
		1 TOTAL TAX REMITTED (COL. 2).	\$
		2 TOTAL ALABAMA TAX THAT HAS BEEN WITHHELD AND SHOWN ON FORMS W-2 AND/OR INFORMATION RETURNS.	\$
		3 ADDITIONAL TAX DUE, ENCLOSE REMITTANCE.	\$
		4 OVERPAYMENT REFUND <input type="checkbox"/> CREDIT <input type="checkbox"/> OVERPAYMENTS LESS THAN \$100.00 WILL BE ISSUED A CREDIT.	\$

SIGNATURE _____ DATE _____

NOTE: DO NOT send without W-2's. A-3's received without W-2's WILL BE RETURNED.

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327480
MONTGOMERY, AL 36132-7480**

FORM A - 6 STATE OF ALABAMA EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

- 1. IF THIS IS A FINAL RETURN AND YOUR ACCOUNT SHOULD BE CANCELLED, PLACE AN 'X' HERE ... _____
- 2. NUMBER OF EMPLOYEES FROM WHOSE WAGES ALA. TAX WAS WITHHELD..... _____
- 3. ALA. INCOME TAX WITHHELD THIS MONTH..... \$ _____
- 4. *****(THIS LINE NOT APPLICABLE TO FORM A-6)*****..... \$ XXXXXXXXXXXXXXX.
- 5. CREDIT FOR OVERPAYMENT OF PRIOR PERIODS (SEE INSTR)..... \$ _____
- 6. DELINQUENT PENALTY (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 7. INTEREST (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 8. TOTAL AMOUNT DUE WITH THIS RETURN..... \$ _____
- 9. AMOUNT REMITTED WITH THIS RETURN..... \$ _____

10. ADDRESS CHANGE CHECK HERE AND COMPLETE BACK OF FORM

Employer Name and Address

\$ _____

PERIOD COVERED
1/2015
DATE DUE
2/15/2015

ALA WITHHOLDING ACCOUNT NO. _____

SIGNATURE _____ PHONE NUMBER _____ DATE _____

FORM A - 6 STATE OF ALABAMA EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

- 1. IF THIS IS A FINAL RETURN AND YOUR ACCOUNT SHOULD BE CANCELLED, PLACE AN 'X' HERE ... _____
- 2. NUMBER OF EMPLOYEES FROM WHOSE WAGES ALA. TAX WAS WITHHELD..... _____
- 3. ALA. INCOME TAX WITHHELD THIS MONTH..... \$ _____
- 4. *****(THIS LINE NOT APPLICABLE TO FORM A-6)*****..... \$ XXXXXXXXXXXXXXX.
- 5. CREDIT FOR OVERPAYMENT OF PRIOR PERIODS (SEE INSTR)..... \$ _____
- 6. DELINQUENT PENALTY (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 7. INTEREST (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 8. TOTAL AMOUNT DUE WITH THIS RETURN..... \$ _____
- 9. AMOUNT REMITTED WITH THIS RETURN..... \$ _____

10. ADDRESS CHANGE CHECK HERE AND COMPLETE BACK OF FORM

Employer Name and Address

\$ _____

PERIOD COVERED
2/2015
DATE DUE
3/15/2015

ALA WITHHOLDING ACCOUNT NO. _____

SIGNATURE _____ PHONE NUMBER _____ DATE _____

FORM A - 1 STATE OF ALABAMA EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD

- 1. IF THIS IS A FINAL RETURN AND YOUR ACCOUNT SHOULD BE CANCELLED, PLACE AN 'X' HERE ... _____
- 2. NUMBER OF EMPLOYEES FROM WHOSE WAGES ALA. TAX WAS WITHHELD..... _____
- 3. ALA. INCOME TAX WITHHELD THIS QTR (3 MONTHS)..... \$ _____
- 4. LESS ALA. TAX REMITTED FIRST 2 MONTHS OF QUARTER..... \$ _____
- 5. CREDIT FOR OVERPAYMENT OF PRIOR PERIODS (SEE INSTR)..... \$ _____
- 6. DELINQUENT PENALTY (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 7. INTEREST (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 8. TOTAL AMOUNT DUE WITH THIS RETURN..... \$ _____
- 9. AMOUNT REMITTED WITH THIS RETURN..... \$ _____

10. ADDRESS CHANGE CHECK HERE AND COMPLETE BACK OF FORM

Employer Name and Address

\$ _____

PERIOD COVERED
QTR. ENDED 3/31/2015
DATE DUE
4/30/2015

ALA WITHHOLDING ACCOUNT NO. _____

SIGNATURE _____ PHONE NUMBER _____ DATE _____

Company's Name

Acct Num

CHANGE OF ADDRESS FORM

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483**

Indicate New Address and Phone Number below.		
New Mailing Address		
City	State	Zip
New Phone Number		

(RVIW09 - T)

Company's Name

Acct Num

CHANGE OF ADDRESS FORM

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483**

Indicate New Address and Phone Number below.		
New Mailing Address		
City	State	Zip
New Phone Number		

(RVIW09 - C)

Company's Name

Acct Num

CHANGE OF ADDRESS FORM

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483**

Indicate New Address and Phone Number below.		
New Mailing Address		
City	State	Zip
New Phone Number		

(RVIW09 - B)

FORM A - 6 STATE OF ALABAMA EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

- 1. IF THIS IS A FINAL RETURN AND YOUR ACCOUNT SHOULD BE CANCELLED, PLACE AN 'X' HERE ... _____
- 2. NUMBER OF EMPLOYEES FROM WHOSE WAGES ALA. TAX WAS WITHHELD..... _____
- 3. ALA. INCOME TAX WITHHELD THIS MONTH..... \$ _____
- 4. ***** (THIS LINE NOT APPLICABLE TO FORM A-6) *****..... \$ XXXXXXXXXXXXXXX.
- 5. CREDIT FOR OVERPAYMENT OF PRIOR PERIODS (SEE INSTR)..... \$ _____
- 6. DELINQUENT PENALTY (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 7. INTEREST (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 8. TOTAL AMOUNT DUE WITH THIS RETURN..... \$ _____
- 9. AMOUNT REMITTED WITH THIS RETURN..... \$ _____

10. ADDRESS CHANGE CHECK HERE AND COMPLETE BACK OF FORM

Employer Name and Address

\$ _____

PERIOD COVERED
4/2015
DATE DUE
5/15/2015

ALA WITHHOLDING ACCOUNT NO. _____

SIGNATURE _____ PHONE NUMBER _____ DATE _____

FORM A - 6 STATE OF ALABAMA EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

- 1. IF THIS IS A FINAL RETURN AND YOUR ACCOUNT SHOULD BE CANCELLED, PLACE AN 'X' HERE ... _____
- 2. NUMBER OF EMPLOYEES FROM WHOSE WAGES ALA. TAX WAS WITHHELD..... _____
- 3. ALA. INCOME TAX WITHHELD THIS MONTH..... \$ _____
- 4. ***** (THIS LINE NOT APPLICABLE TO FORM A-6) *****..... \$ XXXXXXXXXXXXXXX.
- 5. CREDIT FOR OVERPAYMENT OF PRIOR PERIODS (SEE INSTR)..... \$ _____
- 6. DELINQUENT PENALTY (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 7. INTEREST (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 8. TOTAL AMOUNT DUE WITH THIS RETURN..... \$ _____
- 9. AMOUNT REMITTED WITH THIS RETURN..... \$ _____

10. ADDRESS CHANGE CHECK HERE AND COMPLETE BACK OF FORM

Employer Name and Address

\$ _____

PERIOD COVERED
5/2015
DATE DUE
6/15/2015

ALA WITHHOLDING ACCOUNT NO. _____

SIGNATURE _____ PHONE NUMBER _____ DATE _____

FORM A - 1 STATE OF ALABAMA EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD

- 1. IF THIS IS A FINAL RETURN AND YOUR ACCOUNT SHOULD BE CANCELLED, PLACE AN 'X' HERE ... _____
- 2. NUMBER OF EMPLOYEES FROM WHOSE WAGES ALA. TAX WAS WITHHELD..... _____
- 3. ALA. INCOME TAX WITHHELD THIS QTR (3 MONTHS)..... \$ _____
- 4. LESS ALA. TAX REMITTED FIRST 2 MONTHS OF QUARTER..... \$ _____
- 5. CREDIT FOR OVERPAYMENT OF PRIOR PERIODS (SEE INSTR)..... \$ _____
- 6. DELINQUENT PENALTY (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 7. INTEREST (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 8. TOTAL AMOUNT DUE WITH THIS RETURN..... \$ _____
- 9. AMOUNT REMITTED WITH THIS RETURN..... \$ _____

10. ADDRESS CHANGE CHECK HERE AND COMPLETE BACK OF FORM

Employer Name and Address

\$ _____

PERIOD COVERED
QTR. ENDED 6/30/2015
DATE DUE
7/31/2015

ALA WITHHOLDING ACCOUNT NO. _____

SIGNATURE _____ PHONE NUMBER _____ DATE _____

Company's Name

Acct Num

CHANGE OF ADDRESS FORM

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483**

Indicate New Address and Phone Number below.		
New Mailing Address		
City	State	Zip
New Phone Number		

(RVIW09 - T)

Company's Name

Acct Num

CHANGE OF ADDRESS FORM

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483**

Indicate New Address and Phone Number below.		
New Mailing Address		
City	State	Zip
New Phone Number		

(RVIW09 - C)

Company's Name

Acct Num

CHANGE OF ADDRESS FORM

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483**

Indicate New Address and Phone Number below.		
New Mailing Address		
City	State	Zip
New Phone Number		

(RVIW09 - B)

FORM A - 6 STATE OF ALABAMA EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

- 1. IF THIS IS A FINAL RETURN AND YOUR ACCOUNT SHOULD BE CANCELLED, PLACE AN 'X' HERE ... _____
- 2. NUMBER OF EMPLOYEES FROM WHOSE WAGES ALA. TAX WAS WITHHELD..... _____
- 3. ALA. INCOME TAX WITHHELD THIS MONTH..... \$ _____
- 4. ***** (THIS LINE NOT APPLICABLE TO FORM A-6) *****..... \$ XXXXXXXXXXXXXX.
- 5. CREDIT FOR OVERPAYMENT OF PRIOR PERIODS (SEE INSTR)..... \$ _____
- 6. DELINQUENT PENALTY (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 7. INTEREST (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 8. TOTAL AMOUNT DUE WITH THIS RETURN..... \$ _____
- 9. AMOUNT REMITTED WITH THIS RETURN..... \$ _____

10. ADDRESS CHANGE CHECK HERE AND COMPLETE BACK OF FORM

Employer Name and Address

\$ _____

PERIOD COVERED
7/2015
DATE DUE
8/15/2015

ALA WITHHOLDING ACCOUNT NO. _____

SIGNATURE _____ PHONE NUMBER _____ DATE _____

FORM A - 6 STATE OF ALABAMA EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

- 1. IF THIS IS A FINAL RETURN AND YOUR ACCOUNT SHOULD BE CANCELLED, PLACE AN 'X' HERE ... _____
- 2. NUMBER OF EMPLOYEES FROM WHOSE WAGES ALA. TAX WAS WITHHELD..... _____
- 3. ALA. INCOME TAX WITHHELD THIS MONTH..... \$ _____
- 4. ***** (THIS LINE NOT APPLICABLE TO FORM A-6) *****..... \$ XXXXXXXXXXXXXX.
- 5. CREDIT FOR OVERPAYMENT OF PRIOR PERIODS (SEE INSTR)..... \$ _____
- 6. DELINQUENT PENALTY (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 7. INTEREST (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 8. TOTAL AMOUNT DUE WITH THIS RETURN..... \$ _____
- 9. AMOUNT REMITTED WITH THIS RETURN..... \$ _____

10. ADDRESS CHANGE CHECK HERE AND COMPLETE BACK OF FORM

Employer Name and Address

\$ _____

PERIOD COVERED
8/2015
DATE DUE
9/15/2015

ALA WITHHOLDING ACCOUNT NO. _____

SIGNATURE _____ PHONE NUMBER _____ DATE _____

FORM A - 1 STATE OF ALABAMA EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD

- 1. IF THIS IS A FINAL RETURN AND YOUR ACCOUNT SHOULD BE CANCELLED, PLACE AN 'X' HERE ... _____
- 2. NUMBER OF EMPLOYEES FROM WHOSE WAGES ALA. TAX WAS WITHHELD..... _____
- 3. ALA. INCOME TAX WITHHELD THIS QTR (3 MONTHS)..... \$ _____
- 4. LESS ALA. TAX REMITTED FIRST 2 MONTHS OF QUARTER..... \$ _____
- 5. CREDIT FOR OVERPAYMENT OF PRIOR PERIODS (SEE INSTR)..... \$ _____
- 6. DELINQUENT PENALTY (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 7. INTEREST (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 8. TOTAL AMOUNT DUE WITH THIS RETURN..... \$ _____
- 9. AMOUNT REMITTED WITH THIS RETURN..... \$ _____

10. ADDRESS CHANGE CHECK HERE AND COMPLETE BACK OF FORM

Employer Name and Address

\$ _____

PERIOD COVERED
QTR. ENDED **9/30/2015**
DATE DUE
10/31/2015

ALA WITHHOLDING ACCOUNT NO. _____

SIGNATURE _____ PHONE NUMBER _____ DATE _____

Company's Name

Acct Num

CHANGE OF ADDRESS FORM

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483**

Indicate New Address and Phone Number below.		
New Mailing Address		
City	State	Zip
New Phone Number		

(RVIW09 - T)

Company's Name

Acct Num

CHANGE OF ADDRESS FORM

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483**

Indicate New Address and Phone Number below.		
New Mailing Address		
City	State	Zip
New Phone Number		

(RVIW09 - C)

Company's Name

Acct Num

CHANGE OF ADDRESS FORM

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483**

Indicate New Address and Phone Number below.		
New Mailing Address		
City	State	Zip
New Phone Number		

(RVIW09 - B)

FORM A - 6 STATE OF ALABAMA EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

- 1. IF THIS IS A FINAL RETURN AND YOUR ACCOUNT SHOULD BE CANCELLED, PLACE AN 'X' HERE ... _____
- 2. NUMBER OF EMPLOYEES FROM WHOSE WAGES ALA. TAX WAS WITHHELD..... _____
- 3. ALA. INCOME TAX WITHHELD THIS MONTH..... \$ _____
- 4. *****(THIS LINE NOT APPLICABLE TO FORM A-6)*****..... \$ XXXXXXXXXXXXXX.
- 5. CREDIT FOR OVERPAYMENT OF PRIOR PERIODS (SEE INSTR)..... \$ _____
- 6. DELINQUENT PENALTY (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 7. INTEREST (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 8. TOTAL AMOUNT DUE WITH THIS RETURN..... \$ _____
- 9. AMOUNT REMITTED WITH THIS RETURN..... \$ _____

10. ADDRESS CHANGE CHECK HERE AND COMPLETE BACK OF FORM

Employer Name and Address

\$ _____

PERIOD COVERED
10/2015
DATE DUE
11/15/2015

ALA WITHHOLDING ACCOUNT NO. _____

SIGNATURE _____

PHONE NUMBER _____

DATE _____

FORM A - 6 STATE OF ALABAMA EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

- 1. IF THIS IS A FINAL RETURN AND YOUR ACCOUNT SHOULD BE CANCELLED, PLACE AN 'X' HERE ... _____
- 2. NUMBER OF EMPLOYEES FROM WHOSE WAGES ALA. TAX WAS WITHHELD..... _____
- 3. ALA. INCOME TAX WITHHELD THIS MONTH..... \$ _____
- 4. *****(THIS LINE NOT APPLICABLE TO FORM A-6)*****..... \$ XXXXXXXXXXXXXX.
- 5. CREDIT FOR OVERPAYMENT OF PRIOR PERIODS (SEE INSTR)..... \$ _____
- 6. DELINQUENT PENALTY (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 7. INTEREST (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 8. TOTAL AMOUNT DUE WITH THIS RETURN..... \$ _____
- 9. AMOUNT REMITTED WITH THIS RETURN..... \$ _____

10. ADDRESS CHANGE CHECK HERE AND COMPLETE BACK OF FORM

Employer Name and Address

\$ _____

PERIOD COVERED
11/2015
DATE DUE
12/15/2015

ALA WITHHOLDING ACCOUNT NO. _____

SIGNATURE _____

PHONE NUMBER _____

DATE _____

FORM A - 1 STATE OF ALABAMA EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD

- 1. IF THIS IS A FINAL RETURN AND YOUR ACCOUNT SHOULD BE CANCELLED, PLACE AN 'X' HERE ... _____
- 2. NUMBER OF EMPLOYEES FROM WHOSE WAGES ALA. TAX WAS WITHHELD..... _____
- 3. ALA. INCOME TAX WITHHELD THIS QTR (3 MONTHS)..... \$ _____
- 4. LESS ALA. TAX REMITTED FIRST 2 MONTHS OF QUARTER..... \$ _____
- 5. CREDIT FOR OVERPAYMENT OF PRIOR PERIODS (SEE INSTR)..... \$ _____
- 6. DELINQUENT PENALTY (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 7. INTEREST (APPLICABLE TO THIS RETURN ONLY)..... \$ _____
- 8. TOTAL AMOUNT DUE WITH THIS RETURN..... \$ _____
- 9. AMOUNT REMITTED WITH THIS RETURN..... \$ _____

10. ADDRESS CHANGE CHECK HERE AND COMPLETE BACK OF FORM

Employer Name and Address

\$ _____

PERIOD COVERED
QTR. ENDED 12/31/2015
DATE DUE
1/31/2016

ALA WITHHOLDING ACCOUNT NO. _____

SIGNATURE _____

PHONE NUMBER _____

DATE _____

Company's Name

Acct Num

CHANGE OF ADDRESS FORM

Indicate New Address and Phone Number below.		
New Mailing Address		
City	State	Zip
New Phone Number		

(RVIW09 - T)

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483**

Company's Name

Acct Num

CHANGE OF ADDRESS FORM

Indicate New Address and Phone Number below.		
New Mailing Address		
City	State	Zip
New Phone Number		

(RVIW09 - C)

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483**

Company's Name

Acct Num

CHANGE OF ADDRESS FORM

Indicate New Address and Phone Number below.		
New Mailing Address		
City	State	Zip
New Phone Number		

(RVIW09 - B)

**ALABAMA DEPARTMENT OF REVENUE
WITHHOLDING TAX SECTION
PO BOX 327483
MONTGOMERY, AL 36132-7483**