



ALABAMA DEPARTMENT OF REVENUE
Consolidated Corporate Income Tax Return

For the year January 1 – December 31, 2008, or other tax year beginning _____, 2008, ending _____

Check applicable box: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change	FEDERAL BUSINESS CODE NUMBER ● _____	FEDERAL EMPLOYER IDENTIFICATION NUMBER ● _____	Filing Status: (see instructions) <input type="checkbox"/> 1. Corporation operating only in Alabama. <input type="checkbox"/> 2. Multistate Corporation – Apportionment (Sch. D-1). <input type="checkbox"/> 3. Multistate Corporation – Percentage of Sales (Sch. D-2). <input type="checkbox"/> 4. Multistate Corporation – Separate Accounting (Prior written approval required and must be attached). <input checked="" type="checkbox"/> 5. Alabama Consolidated Return. (Caution: see instructions)		
	NAME ● _____				
	ADDRESS ● _____				
	CITY, STATE, COUNTRY (IF NOT U.S.)			9-DIGIT ZIP CODE ● _____	
	STATE OF INCORPORATION ● _____	DATE OF INCORPORATION ● _____		DATE QUALIFIED IN ALABAMA ● _____	NATURE OF BUSINESS IN ALABAMA ● _____
	Check Applicable: <input type="checkbox"/> This company files as part of a consolidated federal return. Common Federal Parent Corporation: Name ● _____ FEIN ● _____				
<input type="checkbox"/> Notification of Final IRS change		<input type="checkbox"/> Federal Form 1120-REIT filed	<input type="checkbox"/> 2220AL Attached		

1 Alabama taxable income (sum of all proforma 20C(s), line 14)		1	●
a Consolidated NOL	1a	●	CN
b Alabama consolidated taxable income (subtract line 1a from line 1)	1b	●	
2 Alabama Income Tax:			
a Income Tax (6.5% of line 1b)	2a	●	
b Consolidated Filing Fee	2b	●	
c Total Tax (add lines 2a and 2b)		2c	●
3 Tax Payments, Credits, and Deferral:			
a Carryover from prior year (2007)	3a	●	UNLESS A COPY OF THE FEDERAL RETURN IS ATTACHED, THIS RETURN WILL BE CONSIDERED INCOMPLETE.
b 2008 estimated tax payments	3b	●	
c 2008 composite payment(s) made on behalf of this entity (see instructions) Paid by ● _____ FEIN ● _____	3c	●	
d Automatic extension payment	3d	●	
e Payments prior to adjustment	3e	●	
f Credits (sum of line 7, Schedule F from all proforma returns)	3f	●	
g LIFO Reserve Tax Deferral (sum of all proforma 20C(s), line 16g)	3g	●	
h Total Payments, Credits, and Deferral (add lines 3a through 3g)	3h	●	
4 Reductions/applications of overpayments			
a Credit to 2009 estimated tax	4a	●	
b Penny Trust Fund	4b	●	
c Penalty due (see instructions)	4c	●	
d Interest due (computed on tax due only)	4d	●	
e Total reductions (total lines 4a, b, c and d)	4e	●	
5 Total amount due/(refund) (line 2c less 3h, plus 4e)		5	●

If you paid electronically check here:

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	Title	Date	Daytime Telephone No.	
Preparer's signature				
Firm's name (or yours, if self-employed) and address	Tel. No. ()	Check if self-employed <input type="checkbox"/>	E.I. No. ●	Preparer's Social Security Number
			ZIP Code ●	

Paid Preparer's Use Only

Mail Consolidated Returns and Payments to:
 Alabama Department of Revenue
 Consolidated Business Tax Compliance Unit (CBTCU)
 PO Box 327437
 Montgomery, AL 36132-7437
 Telephone (334) 353-9448

