

2017



## Alabama Individual Nonresident Income Tax Return

Your first name			Init		Last name		You	r social secur	al security number		Check if	primary	is deceased			Primary's deceased date (mm/dd/yy)			
Spouse's first name				Initial	Last name			Spouse's social security number if joint return			Check if spouse is deceased				Spouse's deceased date (mm/dd/yy)				
Present home address (	numb	er and	street or	P.O. Bo	ox number)		,			CHEC	к во	X IF	AMENDE	D RETI	JRN	• 🗆	AD	OR	
City, town or post office						State	ZIP Code				if addre	00	oreign Country						
Filing Status/ Exemptions	1				0 Single 3 ● [ 0 Married filing joint 4 ● [		Married filir Head of Fa			te Spouse S									
Income and Adjustments	5	i W	/ages,	salarie	es, tips, etc. (From Schedule W-2, I	ine 18, colui	mns G,	. I	<b>A</b> Ala.Tax Wi	thheld		A	<b>B</b> Ill Sources		C Alabama		C ma Income	Income	
	6				lude spouse's income if married fi e (from page 2, Part I, line 9)					00		•		00	<u> </u>	•		)0 )0	
	7 8										00	7 8	•	(	00				
	9 10	A	Adjusted total income. Subtract line 8 from line 7												9 10	•		00 %	
	11	. A	djuste	d Gro	ments (from page 2, Part III, line 4 oss Income. Subtract line 11 from	m line 9					. 12	•	MIOT	00	11	•		00	
You Must Attach a Complete copy of Federal Form 1040,	13		а	lte	oriate box. If you itemize, enter an emized Deductions ne Tax deduction (from page 2, P	• b	Standar	rd Deduc			13	•	o MUST be ch	00					
Form 1040A, Form 1040EZ, or Form 1040NR if claiming a deduction on line 14.	15 16	D											00						
Payments Staple Form(s) W-2, W-2G, and/or 1099 here.	17 18 19	Т	axable	inco	<b>tions.</b> Add lines 13, 14, 15, and 16 <b>time.</b> Subtract line 17 from line 12, er amount from tax table or check	, column C .									17	•		00	
	20	N	et tax	due /	Alabama. Check box if computing ome Tax withheld (from column	g tax using	Schedule N	NTC ●	], otherwis	e enter amoi	unt from		9		20	•	0	00	
	22 23 24 25	2 C	017 es ompos mende	timate site ta ed Ref	ed tax payments/Automatic Exten: x payments <i>(from page 2, Part VI,</i> turns Only — Previous payments	ent				. 22 •			00 00 00	-					
	26 27	R <b>T</b>	efunda otal pa	able p	ortion of Adoption Credit						. 26	•		00	27	•		00	
	28 29 30	A	djuste	d tot	turns Only – Previous refund (see al payments. Subtract line 28 from rger than line 29, subtract line 29			AMOUNT YOU OWE.				······································		28	•		00		
AMOUNT YOU OWE	31	Р	lace pa	aymeı	nt, along with Form 40V, loose in to penalty. Also include on line 30 (	the mailing	envelope. (	FORM 40	V MUST A	CCOMPANY		<del></del>	30	00			(	00	
OVERPAID	32				rger than line 20, subtract line 20 e 32 to be applied to your <b>2018</b> es										32 33	•		00	
REFUND	34	R	EFUN	DED	TO YOU. Subtract line 33 from lin	e 32									34	•	(	00	
Sign Here In Black Ink Keep a copy of this return	<b>&gt;</b>	true, Your	the deriver of the de												ion		belief, they are		
for your records.		Prep	arer's	gnatu	re (if joint return, BOTH must sign		(			Daytime telephone number ( )  Date Check			ise's occ	·		SN or PTIN			
Paid Preparer's Use Only		signa Firm'	s name	e (or y oyed)	yours				Daytime te				Check if self-employ	E.I. 1	E.I. No. ZIP Code			<b>◀</b>	
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