



NAME(S) SHOWN ON RETURN	FEIN	TAX PERIOD BEGINNING	TAX PERIOD ENDING
		_____, 20__	_____, 20__

**Composite Payments/Electing Pass-Through Entity Credits from an Alabama S Corporation, Partnership, Estate or Trust**

If you are a shareholder or partner in an Alabama S Corporation or Partnership which filed the Alabama Form PTE-C, complete the following information:

**SECTION A**

A S-Corporation, Partnership, Estate or Trust Name	B S-Corporation, Partnership, Estate or Trust FEIN	C Amount of payment made by the S Corporation, Partnership, Estate or Trust on your behalf	D Check if Column C is coming from a Disregarded Entity	E Disregarded Entity's Name	F Disregarded Entity's FEIN
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•
•	•	•	• <input type="checkbox"/>	•	•

**SECTION B**

<b>1. Composite Payments/Electing Pass-Through Entity Credits.</b> Total of Column C on this page .....	<b>1.</b>	•
<b>2. Subtotal Composite Payments/Electing Pass-Through Entity Credits.</b> Total of Column C on additional pages .....	<b>2.</b>	•
<b>3. Total Composite Payments/Electing Pass-Through Entity Credits.</b> Add lines 1 and 2. Enter here and on Form 20C, page 1, line 20c; Form ET-1, page 1, line 19c. Form 41, page 1, line 8f; Form PTE-C, page 1, line 5c; Form EPT, page 1, line 5d.....	<b>3.</b>	•



SCHEDULE  
**CP-B**



Alabama Department of Revenue  
**Composite Payments/Electing Pass-Through Entity Credits**

**20**\_\_\_\_\_

(To be attached to Forms 20C, ET-1, 41, PTE-C and EPT)

NAME(S) SHOWN ON RETURN	FEIN	TAX PERIOD BEGINNING _____, 20__	TAX PERIOD ENDING _____, 20__
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●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●
●	●	●	● <input type="checkbox"/>	●	●

<b>SECTION B</b>	1. Enter total of Column C on this page. ....	<b>1.</b>	
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