

SCHEDULE
PTE-CK1



ALABAMA DEPARTMENT OF REVENUE

2019

Entity's FEIN

For the year January 1 - December 31, 2019 or other tax year beginning _____, 20____ ending _____, 20____

	(A) Non-Resident Owner's/Shareholder's Name, Street Address, City, State, and ZIP	(B) Social Security Number/FEIN	(C) Entity Type	(D) Percent Ownership	(E) Nonseparately Stated Income + Separately Stated Income	(F) Guaranteed Payments	(G) Total Income (Col. E + F)	(H) Owner's/ Shareholder's Share of Tax Due (Col. G X 5%)	(I) NRC- Exempt
1								<input type="checkbox"/>	
2								<input type="checkbox"/>	
3								<input type="checkbox"/>	
4								<input type="checkbox"/>	
5								<input type="checkbox"/>	
6								<input type="checkbox"/>	
7								<input type="checkbox"/>	
8								<input type="checkbox"/>	
9								<input type="checkbox"/>	
10								<input type="checkbox"/>	
11								<input type="checkbox"/>	
12	Totals page 3 [columns (E) through (H)].								
13	Summary totals for additional pages [columns (E) through (H)].								
14	Totals [columns (E) through (G)] (lines 12 + 13)								
15	Add lines 12 and 13, column (H) and enter here and on page 1, line 1								

IF MORE THAN 11 NON-RESIDENT OWNERS/SHAREHOLDERS, ATTACH ADDITIONAL PAGES AND ENTER SUMMARY TOTALS ON LINE 13 ABOVE.

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1								<input type="checkbox"/>
2								<input type="checkbox"/>
3								<input type="checkbox"/>
4								<input type="checkbox"/>
5								<input type="checkbox"/>
6								<input type="checkbox"/>
7								<input type="checkbox"/>
8								<input type="checkbox"/>
9								<input type="checkbox"/>
10								<input type="checkbox"/>
11								<input type="checkbox"/>
12								<input type="checkbox"/>
13 Add lines 1 through 12, columns (E) through (H) enter here and on Form PTE-C, page 3, line 13, columns (E) through (H)								