



(To be attached to Forms 20C and ET-1)

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"/>	•	•

**SECTION B**

1. Composite Payments/Electing Pass-Through Entity Credits. Total of Column C on this page .....	1.	•
2. Subtotal Composite Payments/Electing Pass-Through Entity Credits. Total of Column C on additional pages .....	2.	•
3. Total Composite Payments/Electing Pass-Through Entity Credits. Add lines 1 and 2. Enter here and on Form 20C, page 1, line 20c; Form ET-1, page 1, line 19c.	3.	•



NAME(S) SHOWN ON RETURN	FEIN	TAX PERIOD BEGINNING	TAX PERIOD ENDING

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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"/>	•	•
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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"/>	•	•

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