

Clergy Financial Resources Tax | Payroll | Bookkeeping | HR

Taxpayer's Full Name:	Spouse's Full Name:		
Form ID: AL Alabama General Information			
If you moved during the tax year, name of Alabama city m If divorced during the tax year, enter former spouse's soc If you did not file a prior year Alabama tax return, enter m	ial security number	_[1] Zip code _	[2] [3] [4]
Contributions			
Enter the amo P Election campaign fund contribution (\$1.00) (1 = Democratic p	ount of contributions you wish to make: Political Contributions party fund, 2 = Republican party fund)	Taxpayer	Spouse
Senior Services Trust Fund Arts Development Fund Nongame Wildlife Fund Child Abuse Trust Fund Veterans Program	naritableContributions[7]Firefighters Benefit Fund[8]Breast and Cervical Cancer Program[9]Victims of Violence Assistance[10]Military Support Foundation[11]Spay-Neuter Program[12]Cancer Research Institute[13]Association of Rescue Squads[14]USS Alabama Battleship Commission[15]Children First Trust Fund	- - - - -	[16] [17] [18] [19] [20] [21] [22] [23] [23] [24]
Part-year Resident and Nonresident Information			
If you were a part-year reside Part-year residency dates: From To If a nonresident of Alabama, enter state of legal residence	nt during the tax year, enter the dates you lived	in Alabama 	[25] [26] [27]
Credits			
Basic Skills Education Credit: Dept of Education certification number Name of sponsoring employer or firm Name of approved provider Location of provider Total expenses Rural Physician Credit: Hospital where services provided Community where services provided			[28] [29] [30] [31] [32] [33] [33] [34]

NOTES/QUESTIONS: