IT 511 Rev. 07.22.20

Brian Kemp Governor



David M. Curry Revenue Commissioner

# Georgia Department of Revenue 2019 Individual Income Tax 500 and 500EZ

# Forms and General Instructions

### WHAT'S INSIDE?

Charitable Contributions/Donations	23
Filing Requirements	9
Form 500 Instructions	<u>11-13</u>
Free Electronic Filing	4
General Information	7 <u>-8</u>
Georgia Tax Center	2
Georgia Tax Rate Schedule	21
Low Income Tax Credit Worksheet	20
Mailing Addresses	5
Message from Commissioner Curry	1
Other State's Tax Credit Worksheet	19
Part-year Resident and Nonresident Instructions	<u>.17-18</u>
Payment Options	4
Penalty and Interest	7
Requesting an Extension to File	7
Retirement Income Exclusion	16
Return Filing Tips	6
Schedule For Estimating Georgia Income Taxes	20
Tax Credits	22
Taxpayer's Assistance	3
Tax Tables	25-27
Where's My Refund	
Forms in tax booklet: Form 500, Form 500EZ, and For	m IND-Cl

georgia tax center

## **ELECTRONIC FILING** freefile Qualified taxpayers can file electronically for free! Receive your refund by direct deposit! File fast and securely from your home PC! **ON-LINE PAYMENTS** DISCOVER VISA The Georgia Department of Revenue accepts Visa, American Express, MasterCard, and Discover credit cards for payment of: $\sqrt{\text{Current-year}}$ and prior-year individual tax payments $\sqrt{\text{Liabilities on Department of Revenue-issued}}$ assessment notices $\sqrt{1}$ Individual estimated tax payments $\sqrt{Note}$ a convenience fee will be charged by the provider

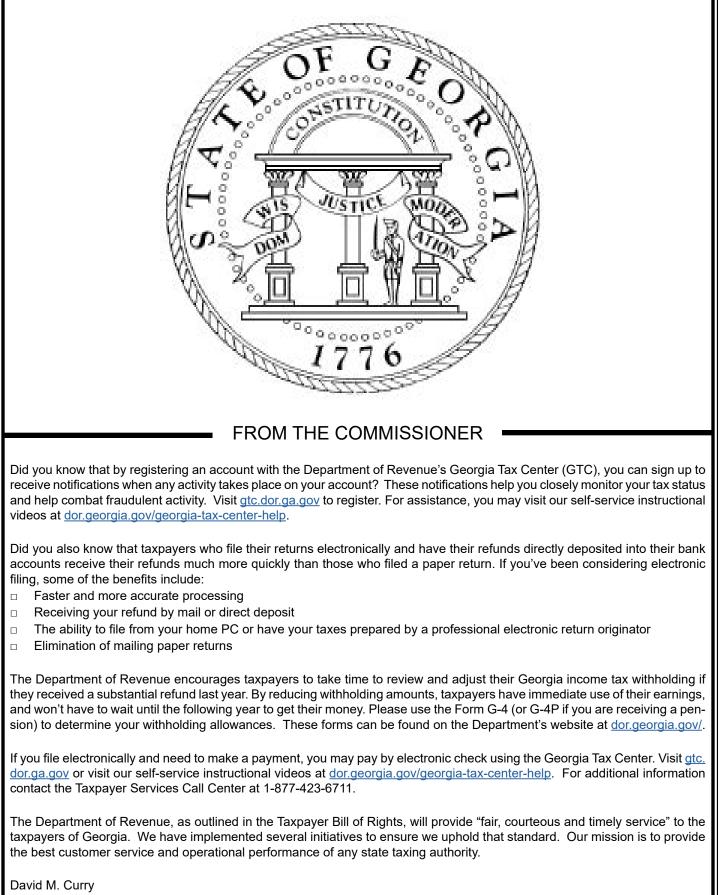
Follow us on Facebook and Twitter

Check refund status

Make payments

See page 2 for more information on GTC

Visit dor.georgia.gov for more information about these and other topics of interest.



Revenue Commissioner David.Curry@dor.ga.gov

### Individual Income Tax Online Services

### What is the Georgia Tax Center?

The Georgia Tax Center (GTC) is the Department of Revenue's secure self-service customer facing portal for making online Individual or Business Tax payments and for corresponding with the Department of Revenue.

### Who Can Sign Up for GTC?

Any individual that has filed an Individual Income Tax Return or would like to submit a Georgia estimated tax payment is eligible to use GTC.

### GTC Features

You will be able to do the following without a GTC login:

- Check refund status
- Quick payments (estimated tax payments or assessment payments)
- Protest a liability
- Request penalty waivers
- Submit additional documentation

A login is required to do the following:

- Receive notification when a return is filed with your SSN or a refund has been issued
- Request an Installment Plan Agreement (IPA)
- Request an Offer in Compromise (OIC)
- Submit a Power of Attorney (POA)
- Request to view 1099-G electronically in GTC
- View account balance
- Make payments
- General account maintenance address change, etc.

Please visit our website to sign up for access to GTC, find helpful links, instructions, and how to videos: <u>dor.georgia.gov/georgia-tax-center-help</u>

### **Taxpayer's Assistance and Resources**

### Find us on the web by searching "Georgia Department of Revenue"

- Download Tax Forms
- Answers to Frequently Asked Questions
- Where's My Refund
- Taxpayer's Bill of Rights
- Georgia Regulations

### Customer Contact Center: 1-877-423-6711

dor.georgia.gov/individual-taxpayers

- Refunds
- Billing
- Web Access

### **Helpful Resources and Services**

- Volunteer Income Tax Assistance (VITA) <u>dor.georgia.gov/need-help-your-taxes</u> or call 1-800-906-9887
- Free File Alliance visit <u>dor.georgia.gov/free-file-alliance</u>
- AARP Senior citizens 1-888-AARPNOW (1-888-227-7669) from February 1 to April 15
- Georgia Relay Deaf and hard of hearing taxpayers (TDD) visit georgiarelay.org

### Federal Tax Changes, Legislation, and other Policy Information

Visit <u>dor.georgia.gov/rules-policies/income-tax</u> for more information on:

- Federal Tax Changes
- New Legislation
- Regulations
- Rules and Policies



The Department of Revenue has partnered with certain software companies to offer free and/or low cost online filing services to Georgia taxpayers under the Free File Alliance Program. Under this agreement, qualified taxpayers can prepare and file their Georgia individual income tax returns for free or a minimum cost using approved software.

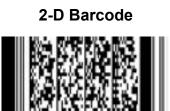
Each software company has income limitations and other restrictions for their free services. Please review each company's offer before selecting a product. For more information, visit our website at <u>dor.georgia.gov/</u><u>free-file-alliance</u>.

If you do not qualify for free electronic services, you may file electronically using software produced by an approved vendor listed on our website <u>dor.georgia.gov/</u><u>approved-software-vendors</u>.

### Volunteer Income Tax Assistance (VITA)



The VITA program was established by the IRS to assist qualified individuals with free electronic tax preparation services. Assistance is geared towards individuals with low to moderate income less than \$55,000 per year. The preparers are IRS-certified and can prepare basic income tax returns. There are several VITA locations in the metro area and throughout Georgia. For more information visit our website at <u>dor.georgia.gov/need-help-your-taxes</u>.



If you choose to file a paper return, we recommend using a return containing a two-dimensional (2D) barcode. The information you enter on the return is encoded into the barcode which reduces errors and saves time in processing the return. The 2D barcode is only visible after your return has been printed.

## Where's My Refund?

Check the status of your refund online at <u>gtc.dor.ga.gov</u>. You may also check the status of your refund by calling 1-877-GADOR11 (1-877-423-6711).

Please allow 90 business days to receive refunds. The Department is taking additional fraud prevention measures to ensure tax refunds are issued to the correct individuals.

You will receive your refund via paper check if you are a first time Georgia filer or if you have not filed your taxes in five or more years.

**Note:** A claim for refund must be made within three (3) years from the later of the date the tax was paid or the due date of the return, including extensions.

### **Payment Options**

GTC accepts individual income and estimated tax payments. For information about GTC, visit our website at <u>gtc.dor.ga.gov</u> or visit our self-service instructional videos at <u>dor.georgia.gov/georgia-tax-center-help</u>. For additional information about payment options contact the Taxpayer Services Customer Contact Center at 1-877-423-6711.

The Georgia Department of Revenue accepts Visa, American Express, MasterCard, and Discover credit cards as payment for current year individual income tax due on original Forms 500, 500EZ, and 500ES, as well as for liabilities presented to taxpayers via Georgia Department of Revenue assessment notices. To make a payment, use Official Payments Corporation's (OPC) secure website at <u>https://officialpayments.com</u> or call OPC toll-free at 1-800-2PAY-TAX. When calling, use Jurisdiction Code 2000. There is a convenience fee for this service. This fee is paid directly to the company.

For more information on payments, visit our website at <u>dor.georgia.gov/credit-card-payments</u>.

### **Mailing Address**

### **Tax Returns**

Form 500 without payment: PROCESSING CENTER GEORGIA DEPARTMENT OF REVENUE PO BOX 740380 ATLANTA GA 30374-0380

### Form 500X Amended:

PROCESSING CENTER GEORGIA DEPARTMENT OF REVENUE PO BOX 740318 ATLANTA GA 30374-0318

### Form 500 with payment:

PROCESSING CENTER GEORGIA DEPARTMENT OF REVENUE PO BOX 740399 ATLANTA GA 30374-0399

### **Payments without Return**

Form 500-ES Individual Estimate Tax Voucher PROCESSING CENTER GEORGIA DEPARTMENT OF REVENUE PO BOX 740319 ATLANTA GA 30374-0319

### Form 525-TV Payment Voucher

Note: If you filed electronically and making a payment by check PROCESSING CENTER GEORGIA DEPARTMENT OF REVENUE PO BOX 740323 ATLANTA GA 30374-0323

### Form IT-560 Extension Payment Voucher PROCESSING CENTER GEORGIA DEPARTMENT OF REVENUE PO BOX 105198

ATLANTA GA 30348-5198

Note: Sending your return by certified mail delays the processing of your return and your refund.

# Filing Checklist

- Consider filing my return electronically. It is safe and convenient to file electronically. Interested in filing electronically visit <u>dor.georgia.gov/why-should-i-file-electronically</u>
- Are Social security number(s) on the return accurate and complete?
- Checked math and calculations
  - Rounded to the nearest dollar
- Selected the correct amounts from the tax table
- Completed the Income Statement Details section where Georgia income tax was withheld and included my W-2s, 1099s, and G2-RPs etc. with my return.
- Signed and dated my return
  - Both spouses signed the joint return, even if there was only one income
    - Note: Anyone paid to prepare the return must also sign it
- Completed and included all schedules that are applicable
- Enclosed/attached any supporting schedules, returns, and forms
- Mailed my return to the correct address

### Do and Don't For Filing Paper Returns

### Do

- Do include your W-2(s), 1099(s), GR-2P(s) and other supporting income statements
- Do complete the Income Statement Details section for Georgia tax withheld
- Electronic Filing: Do send your 525-TV payment voucher to the address on the voucher when you file electronically and want to pay with a check or money order
- Paper Filing: Do send your return, check/money order, and 525-TV voucher to the address on the return
- Do use GTC or the Form IT-560 to make an extension payment
- Do make your check or money order payable to the Georgia Department of Revenue

### Don't

- Do not include cents on your return
- Do not staple your W-2(s), 1099(s) and other forms to your return
- Do not use the Form 500 to correct a previously filed return Use Form 500X

### Note: Sending your return by certified mail delays the processing of your return and your refund.

### **GENERAL INFORMATION**

When to File. Calendar year taxpayers are required to file on or before April 15, 2020. Fiscal year taxpayers must file on or before the 15th day of the fourth month after the close of their taxable year.

**Extension to File.** The Georgia return must be filed along with a copy of Federal Form 4868 or the IRS confirmation letter on or before the extended Federal due date. If you do not need a Federal extension, you may use Georgia Form IT 303 to request an extension to file your Georgia return.

An extension to file does not extend the date for paying the tax. Tax must be paid electronically via GTC or with Form IT-560 by the statutory due date to avoid late payment penalty and interest. The amount paid should be entered on Form 500, Line 25.

**Amended Returns.** File Form 500X to correct information reported on Form 500. Do not use Form 500 to correct a previously filed return or use Form 500X as an original return.

When Electronic Filing is Required. Taxpayers that remit payments by electronic funds transfer, whether on a mandatory or voluntary basis, must file all associated returns electronically.

A return preparer who prepares an income tax return, must electronically file the return, when the federal counterpart of such return is required to be filed electronically pursuant to the Internal Revenue Code of 1986 or Internal Revenue Service regulations.

Also, a return is required to be electronically filed if the return generates, allocates, claims, utilizes, or includes in any manner a series 100 credit. (see page 22)

**Installment Payment Agreement.** You must meet the following criteria for an installment payment agreement:

- Returns for all years must be filed
- Agreements are up to 60 months
- Payments should be made through automatic debit from your bank account

Note: There is a set up cost associated with initiating an Installment Payment Agreement. Installment payment requests may be submitted online via the Georgia Tax Center (GTC) at <u>gtc.dor.ga.gov</u>. Please contact the Installment Payment Agreement Section at 404-417-2122 or via e-mail to <u>ipa@dor.ga.gov</u> to determine eligibility.

**Penalty and Interest.** Tax not paid by the statutory due date of the return is subject to interest and ½ of 1 percent late payment penalty per month, or fraction thereof. Also, a monthly late filing penalty is imposed at a rate of 5 percent of the tax not paid by the original due date. Interest accrues until the tax due has been paid in full. The combined total of late filing and late payment penalty cannot exceed 25 percent of the tax not paid by the original due the original due date. An extension of time for filing the return does not extend the date for making the payment. Additional penalties may apply as follows:

- Frivolous Return Penalty \$1,000. (A frivolous return is one that contains incorrect or insufficient information to accurately compute the appropriate tax liability with the intent to delay or impede Georgia tax law or is based on a frivolous position.)
- Negligent Underpayment Penalty 5 percent of the underpaid amount.
- Fraudulent Underpayment Penalty 50 percent of the underpaid amount.
- Failure to File Estimated Tax Penalty 9 percent per year for the period of underpayment. Use Form 500 UET to calculate the penalty.

■ Interest accruing for months beginning before July 1, 2016 accrues at the rate of 12 percent annually. Interest that accrues for months beginning on or after July 1, 2016 accrues at an annual rate equal to the Federal Reserve prime rate plus 3 percent. The interest rate will be reviewed and will be adjusted in January of each subsequent calendar year based on the Federal Reserve Rate.

**Review of Assessments.** If you are audited and it is believed that you owe additional taxes, you will generally be issued a Proposed Assessment. If the Proposed Assessment is not protested or paid within 30 days, an Official Assessment and Demand for Payment will be issued. When either of these assessments is issued, you are entitled to an administrative review upon written request. You must complete the appropriate form. The forms are available on the Department's website at <u>dor.</u> <u>georgia.gov</u>.

### **GENERAL INFORMATION**

**Supporting Documents.** We will request information to support the amounts listed on your Georgia income tax return and related schedules when necessary. However, you must include the indicated documentation with your Georgia return for the following situations:

- The amount on Form 500, Line 8 is \$40,000 or more, or less than the total income on your W-2(s) submit a copy of Pages 1, 2, and Schedule 1 of your Federal return.
- You itemize deductions submit a copy of Federal Form 1040 Schedule A.
- You claim the Georgia child and dependent care expense credit submit the appropriate Federal child care credit schedule.

■ You claim a credit for taxes paid to another state(s)submit a copy of your return filed with the other state(s).

**Address Changes.** You must notify the Department of your address change. Notification of an address change can be made through GTC inside a logon, by calling 1-877-423-6711 or writing the new address on your tax return and checking the address change box.

**Name Change.** The Department currently requires a copy of one of the following four documents in order to change a person's name:

- Social Security Card
- Driver's License
- Name change decree from Superior Court
- Marriage Certificate

These documents should be submitted with your tax return.

**Innocent Spouse Relief.** Individuals who were granted innocent spouse relief by the Internal Revenue Service may be eligible for relief from liability for Georgia tax, interest and penalty.

Low and Zero Emission Vehicle Credit. This credit is no longer available for vehicles purchased or leased on or after July 1, 2015.

**Individual Retirement Accounts.** The provisions concerning taxability and conversion from a traditional IRA to a Roth IRA are the same for Georgia and the Internal Revenue Service.

**Withholding on Lump-sum Distributions.** For taxable years beginning on or after January 1, 2008, the payee of any non-periodic payment may elect to have withholding made on the non-periodic distributions from a pension, annuity, or similar fund. The election shall remain in effect until revoked by the payee. See Form G-4P for more information.

Income from Partnerships and S Corporations.

Nonresident partners must pay Georgia income tax on their portion of the partnership's net Georgia income. Nonresident shareholders must pay Georgia income tax on their portion of Georgia corporate income; resident shareholders and partners must report their total S Corporation or partnership income (but may be eligible for the credit for taxes paid to other states or a subtraction when the income is taxed at the entity level in another state).

**Federal Audit.** Whenever a Federal audit or other Federal adjustment results in a change in net income for any year, you are required to furnish under separate cover, within 180 days, a schedule reflecting all changes to the Taxpayer Services Division, Department of Revenue, P.O. Box 740380, Atlanta, Georgia 30374-0380. Additionally, if the changes result in a refund, the refund must be claimed within one year of the date the changes are submitted. If you do not submit a return reflecting all changes and the Commissioner receives this information in a report from the United States Government, the Commissioner will issue an assessment for tax due within five years from the date the report is received from the United States Government.

A taxpayer who fails to notify the Commissioner within 180 days forfeits any Georgia refund as a result of an IRS audit if the normal statute of limitations has expired. However, 90 percent of any overpayment can be applied to a balance due for another year that is a result of the same IRS audit.

Withholding on Nonresidents. Withholding is required on the members share of the taxable income sourced to this state, whether distributed or not, from Partnerships, Limited Liability Companies and S Corporations. Withholding should be reported on Form G2-A and entered on Form 500, Line 24. Include a copy of Form G2-A with your return.

Withholding is also required on the sale or transfer of real property and associated tangible personal property by nonresidents of Georgia. Tax withheld is reported on Form G2-RP and should be entered on Form 500, Line 24. Include a copy of Form G2-RP with your return.

### **Full-year Residents**

Full-year residents are taxed on all income, except tax exempt income, regardless of the source or where derived. You are required to file a Georgia income tax return if:

- You are required to file a Federal income tax return;
- You have income subject to Georgia income tax that is not subject to Federal income tax;
- Your income exceeds the standard deduction and personal exemptions as indicated below:

A. Single, Head of Household or Qualifying Wid-ow(er)

1. Under 65, not blind	\$7,300
2. Under 65, and blind	\$8,600
3. 65 or over, not blind	\$8,600
4. 65 or over, and blind	\$9,900
B. Married filing Joint	
1. Both under 65, not blind	\$13,400
2. One 65 or over, not blind	\$14,700
3. Both under 65, both blind	\$16,000
4. Both under 65, one blind	\$14,700
5. Both 65 or over, not blind	\$16,000
6. One 65 or over, and blind	\$16,000
7. One 65 or over, and both blind	\$17,300
8. Both 65 or over, and blind	\$18,600
C. Married filing Separate	
1. Under 65, not blind	\$6,700
2. Under 65, and blind	\$8,000
3. 65 or over, not blind	\$8,000
4. 65 or over, and blind	\$9,300

These requirements apply as long as your legal residence is Georgia, even if you are absent from or live outside the State temporarily. A credit for taxes paid to another state is allowed. See the worksheet on page 19 for more information.

### **Part-year and Nonresidents**

1. Part-year residents and nonresidents who work in Georgia or receive income from Georgia sources are required to file Georgia Form 500 and complete Form 500 Schedule 3 to calculate Georgia taxable income. Note: Form 500 Schedule 3 should only be attached if it is applicable.

2. A married part-year resident or nonresident with income earned in Georgia whose spouse is a nonresident with no Georgia source income may file either a separate return claiming only their own personal exemption and dependent exemptions and deductions or a joint return claiming total allowable deductions.

3. If one spouse is a resident and one is a part-year resident or nonresident, enter 3 in the residency status box and complete Form 500, Schedule 3 to calculate Georgia taxable income.

### Part-year Residents

1. If you are a legal resident of Georgia for only a portion of the tax year and are required to file a Federal income tax return, you are required to file a Georgia income tax return.

2. Part-year residents who claim a credit for taxes paid to another state for income earned while a resident must include a copy of the individual income tax return filed with that state(s) with their Georgia return. Otherwise the credit will not be allowed.

### Nonresidents

1. Nonresidents who work in Georgia or receive income from Georgia sources and are required to file a Federal return are required to file a Georgia income tax return.

2. Legal residents of other states are not required to file a Georgia tax return if their only activity for financial gain or profit in Georgia consists of performing services for an employer as an employee where the wages for such services does not exceed the lesser of five percent of the income received from performing services in all places during the taxable year or \$5,000.

3. A nonresident, who receives deferred compensation or income from the exercise of stock options that were earned in Georgia in a prior year is required to pay tax on the income, but only if the prior year's income exceeds the lesser of: 1) 5 percent of the income received by the person in all places during the current taxable year; or 2) \$5,000. However, the income is not taxed if federal law prohibits the state from taxing it. Federal law prohibits state taxation of some types of retirement income including pensions as well as income received from nonqualified deferred compensation plans if the income is paid out over the life expectancy of the person or at least 10 years. See Regulation 560-7-4-.05 for more information.

### FILING REQUIREMENTS

### **Taxpayers Required to File Form 1040NR**

Individuals who are required to file Federal Form 1040NR must file Georgia Form 500. Similar to Federal income tax rules, most of these Georgia taxpayers are only allowed to deduct the applicable Georgia personal exemption and expenses reflected on Form 1040NR. Most taxpayers are not allowed to take the standard deduction and are allowed only limited itemized deductions as shown on Form 1040NR, Schedule A.

### **Military Personnel**

**Residents.** Military personnel who are legal residents of Georgia are subject to Georgia income tax on all income regardless of the source or where earned, unless specifically exempt by Georgia law. Military personnel who serve outside of the continental U.S. may file their Georgia income tax return within six months after they come back to the continental U.S. No penalties or interest will accrue during this period.

Members of the National Guard or Air National Guard who are on active duty for a period of more than 90 consecutive days are allowed a tax credit against their individual income tax. The credit cannot exceed the amount expended for qualified life insurance premiums or the taxpayer's income tax liability and should be claimed on Form IND-CR.

**Nonresidents.** Military personnel who are not legal residents of Georgia are only required to file a Georgia income tax return if the person earns income during their off duty hours from sources in Georgia or if the person has income from property located in Georgia or the person receives business income from Georgia sources. If required, nonresident military personnel should file Georgia Form 500 and use Schedule 3 to calculate Georgia taxable income. (See pages 17 -18 for instructions on completing Schedule 3.)

Spouses of Military Personnel. A spouse of a military person shall neither lose or acquire their legal residence solely to be with the military person serving in compliance with military orders but this provision only applies if the legal residence of the spouse is the same as the military person or the spouse of a military person has elected to use the same residence for purposes of taxation as the military person. Income for services performed by the spouse of a military person shall not be considered Georgia income if the military person is not a legal resident of Georgia but this only applies if the spouse is in Georgia solely to be with the military person serving in compliance with military orders and the legal residence of the spouse is the same as the military person or the spouse of a military person has elected to use the same residence for purposes of taxation as the military person. The affected taxpayer should exclude the income on Schedule 3, Column C, Line 7 of the Form 500. No amounts should be entered on Schedule 3, Column A, Line 7 of Georgia Form 500.

### **Combat Zone Pay**

Effective tax year 2003, military income earned by a member of the National Guard or any reserve component of the armed

services while stationed in a combat zone or stationed in defense of the borders of the United States pursuant to military orders is not subject to Georgia income tax. The exclusion from income is only with respect to military income earned during the period covered by such military orders. A copy of the Federal return must be enclosed with the Georgia return to claim this exclusion. The exclusion is limited to the amount included in Federal Adjusted Gross Income.

### **Estimated Tax**

Estimated tax is required for each individual subject to Georgia income tax who reasonably expects to have gross income during the year which exceeds (1) personal exemption, plus (2) credits for dependents, plus (3) estimated deductions, plus (4) \$1,000 of income not subject to withholding.

Estimated tax required from persons not regarded as farmers or fishermen shall be filed on or before April 15 of the taxable year, except if the above requirements are first met on or after April 1 and before June 1, estimated tax must be filed by June 15; on or after June 1 but before September 1, by September 15; and on or after September 1, by January 15 of the following year. Individuals filing on a fiscal year basis ending after December 31 must file on corresponding dates.

### Other State's Tax Return

If you claim a credit for taxes paid to another state(s), you must include a copy of your return filed with that state along with your Georgia return. No credit for taxes paid to another state will be allowed unless the other state's return is enclosed with the Georgia return.

### Filing for Dependents (children, etc.)

If the parent or guardian prepared the minor child or dependent's return, the Department recommends that the parent or guardian check the box allowing the preparer to discuss the return with the Department. If this is not done and the parent did not sign the return on the child's behalf as allowed by IRS Publication 929, then the parent or guardian will have to be included on a Power of Attorney (Form RD-1061) prepared by the minor in order for the Department to discuss the return with the parent or guardian.

### **Filing for Deceased Taxpayers**

The surviving spouse, administrator, or executor may file a return on behalf of a taxpayer who dies during the taxable year. When filing, use the same filing status that was used on the Federal income tax return. The due date for filing is the same as for Federal purposes.

**Note:** To have a refund check in the name of a deceased taxpayer reissued, mail Georgia Form GA-5347, a copy of the death certificate, and the information specified on Georgia Form GA-5347 along with the check to the address on the form.

### Include all completed schedules with your Georgia return.

Complete your Federal return before starting your Georgia return. Your Federal return contains information that should be included on your Georgia return.

Lines 1 - 3: Print or type your name(s), address (including apartment number if applicable) and social security number(s) in the spaces provided. Do not write both a street address and post office box in the address field.

**Line 4**: Enter the appropriate number for your residency status.

■ 1 - You lived in Georgia the entire year, regardless of temporary living arrangements, enter 1 in the residency status box.

■ 2 - You lived in Georgia part of the year. Note: List the dates you lived in Georgia

■ 3 - You did not live in Georgia or if one spouse is a resident and one is a part-year resident or nonresident. Note: You must Complete Schedule 3 to calculate Georgia taxable income.

**Line 5:** Enter the appropriate letter for your filing status. Use the same status that is on your Federal return.

- A Single
- **B** Married filing joint;
- **C** Married filing separate;
- D Head of Household or Qualifying widow(er)

Georgia does recognize same-sex marriage.

### Exceptions:

• One spouse is a resident and the other is a nonresident without any Georgia-source income, your Georgia return may be filed jointly or separately with each spouse claiming the appropriate exemptions and deductions.

■ Use filing status D if your filing status is qualifying widow(er) on your Federal return.

Line 6a - 6b: Check the appropriate box

- 6a for yourself
- 6b if you claim your spouse and you file jointly.

**Line 6c**: Enter the total number of exemption boxes checked

### Lines 7a - b: Exemptions and Dependents

■ 7a: Enter the total number of dependents. Do not include yourself or your spouse.

■ **7b:** List the requested information about your dependents in the spaces provided. Include a schedule if you have more than five dependents.

Line 8: Enter Federal adjusted gross income from Form 1040. Do not use Federal taxable income.

Note: If the amount on Line 8 is \$40,000 or more, or your gross income is less than your W-2s you must include a copy of your Federal Form 1040 pages 1, 2 and Schedule 1.

**Line 9:** You must adjust your Federal adjusted gross income if you have income that is taxable by the Federal Government but not taxable to Georgia or vice versa. You must document your adjustments on Schedule 1 and enter the total amount here. There are certain adjustments that must be added if applicable and some adjustments that may be subtracted. Please see pages 14 - 16 for more information about additions and subtractions.

#### Note: Part-year residents and nonresidents must omit Lines 9 -14 and follow the Schedule 3 instructions that begin on page 17.

**Line 10:** Enter Georgia adjusted gross income (net total of Line 8 and Line 9).

# Lines 11a-c: Standard Deductions (Leave Lines 11a-c blank if you itemize deductions)

**Note:** If you use the standard deduction on your Federal return, you must use the <u>Georgia</u> standard deduction on your Georgia return.

**Line 11a:** Enter the standard deduction that corresponds to your marital status.

- Single/Head of Household......\$4,600
- Married Filing Separate...... \$3,000
- Married Filing Joint.....\$6,000
- Additional Deduction.....\$1,300

Line 11b: Enter any additional deductions on Line 11b. Note: The additional deduction applies if you and/or your spouse are age 65 or over and/or blind.

Line11c: Enter the total standard deduction on Line 11c.

# Lines 12a-c: Itemized Deduction (Leave Lines 12a-c blank if you use the standard deduction)

**Note:** If you itemize deductions on your Federal return, or if you are married filing separate and your spouse itemizes deductions, you must itemize deductions on your Georgia return. Include a copy of Federal Schedule A with your Georgia return.

**Line 12a:** Enter the itemized deductions from your Federal Schedule A.

**Line 12b:** Enter adjustments for income taxes other than Georgia and investment interest expense for the production of income exempt from Georgia tax.

### FORM 500 INSTRUCTIONS (continued)

Line 12c: Subtract Line 12b from Line 12a, enter total.

Note: If state & local income taxes were limited on the federal return to \$10,000 (\$5,000 MFS), the following formula should be used to determine the disallowed other state income taxes: Other state income taxes divided by the total taxes on line 5d of schedule A multiplied by the lesser of the amount on line 5d of schedule A or 10,000 (5,000 if married filing separate). For the schedule 3 computation, the same computation should be used in arriving at the amount of itemized deductions that would then be subject to proration using the part-year/ nonresident income ratio on form 500 schedule 3 line 9.

Line 13: Subtract Line 11c or 12c from Line 10, enter total.

### Lines 14a-c: Exemption and Dependent Totals

**Lines 14a:** Multiply the number of exemptions on Line 6c by the filing status totals listed below and enter the total.

■ \$2,700 for filing status: A - Single or D - Head of Household or Qualifying Widow(er)

■ \$3,700 for filing status: B - Married Filing Joint or C - Married filing separate

**Line 14b:** Multiply the number of dependents Line 7a by \$3,000 and enter the total.

Line 14c: Enter the grand total of Lines 14a and 14b.

**Line15a:** Subtract Line 14c from Line 13 to get your Georgia taxable income before GA Net Operating Losses (NOLs).

### Line 15b: Georgia NOL Utilized

Net operating losses (NOLs) for tax years 2018 and later that are applied to Georgia income cannot exceed 80% of Georgia income before NOLs. Use the schedule below to compute the net operating losses that can be used in the current year.

1. NOL carry forward available for current year from years before 2018

2. NOL carry forward available for current year from years 2018 and later

- 3. Income before GA NOL (Line 15a of Form 500)
- 4. NOL from line 1 applied to current year

5. NOL from line 2 applied to current year (cannot exceed 80% of Line 3) \_\_\_\_\_

6. Total NOL applied - add Lines 4 and 5, also enter on Line 15b of Form 500

Note: Before determining how much NOL can be carried from the current year to the next year, the income from the current year must be recomputed using the schedule at the top of page 3 of the Form 500-NOL and the related instructions on page 4 of the Form 500-NOL. **Line15c:** Subtract Line 15b from Line 15a.

**Line 16:** Take the amount from Line 15c and find the corresponding amount and your filing status on the tax tables (pages 25 through 27) to determine your tax liability.

**Line 17:** Complete the Low Income Credit Worksheet on page 20 to determine your credit amount. Enter the amount from Line 6 of the worksheet on the form.

Note: You may claim the low income credit if your Federal adjusted gross income is less than \$20,000 and you are not claimed or eligible to be claimed as a dependent on another taxpayer's Federal or Georgia income tax return. Part-year residents may only claim the credit if they were residents at the end of the tax year. Taxpayers filing a separate return for a taxable year in which a joint return could have been filed can only claim the credit that would have been allowed had a joint return been filed. You cannot claim this credit if you are an inmate in a correctional facility. The credit cannot exceed the taxpayer's income tax liability.

**Line 18:** Enter the other state(s) tax credit used. If you paid tax to more than one state, use the total of the other state's income and the worksheet on page 19 to calculate the Other State's Tax Credit.

# Note: You must include a copy of the return filed with the other state(s) with your Georgia return or the credit will not be allowed.

**Line 19:** Enter the amount of credits used from the IND-CR Summary Worksheet, Line 10. IND-CR tax credits range from 201 - 209. IND-CR forms are included within the form.

**Line 20:** Enter the amount of credits used from Schedule 2. If claiming credit code 125 (QEE) enter your SSN and not the FEIN of the SSO. See page 22 for more information regarding credits

**Line 21:** Add Lines 17-20 to get the amount for total credits used. Amount cannot exceed Line 16.

Line 22: Subtract Line 21 from Line 16. If zero or less, enter zero.

**Line 23:** Enter Georgia income tax withheld from W-2s and 1099s where Georgia income tax was withheld.

# Note: Include a copy of these statements with your return or this amount will not be allowed.

**Line 24:** Enter Georgia income tax withheld on G2-A, G2-FL, G2-LP, and/or G2-RP. Include a copy of these statements with your return or this amount will not be allowed.

### FORM 500 and SCHEDULE 1 INSTRUCTIONS (continued)

Note: Please complete the Income Statement Details Section. Only report income on which Georgia tax was withheld. Enter W-2s, 1099s, and G-2As on Line 4 GA Wages/Income. For other statements complete Line 4 using the income reported from Form G2-RP Line 12 or Line 13; Form G2-LP Line 11, or for Form G2-FL enter zero.

**Line 25:** Enter estimated tax payments, including amounts credited from a previous return, and any payments made electronically or with Form IT 560.

Line 26: Enter Schedule 2B Refundable Tax Credits

Line 27: Add Lines 23, 24, 25, and 26 and enter the total amount.

**Line 28:** If Line 22 is more than Line 27, subtract Line 27 from Line 22 to calculate the balance due.

**Line 29:** If Line 27 is more than Line 22, subtract Line 22 from Line 27 to calculate your overpayment.

**Line 30:** Enter the amount you want credited to next year's estimated tax.

**Lines 31 - 39:** Enter the amount you want to donate to the charities listed on the form.

### Note: Amount cannot be less than \$1.

**Line 40:** Enter the estimated tax penalty from Form 500 UET. If you were eligible for an estimated tax penalty exception on Form 500 UET, please check the "500 UET Exception Attached" box, include the revised penalty on line 40 of the Form 500, and include the 500 UET with the return.

### Note: If the revised penalty is zero, enter zero.

**Line 41:** Add Lines 28 and 31 through 40 and enter the total amount due. Mail your return, 525-TV payment voucher, and payment to the address on the Form 500.

**Line 42:** Subtract the sum of Lines 30 through 40 from Line 29 and enter the amount to be refunded to you.

### **Direct Deposit Option**

# Note: If you do not enter Direct Deposit Information or if you are a first time filer you will be issued a paper check.

Line 42a: Complete the direct deposit information

■ Check the appropriate box (Checking or Savings) for the type of account.

Note: Please complete the Income Statement Details Note: Do not check more than one box. You must check the Section. Only report income on which Georgia tax was correct box to ensure your direct deposit is accepted.

Enter your nine digit routing number.

### Note: The first two digits must be 01 through 12 or 21 through 32.

Ask your financial institution for the correct routing number to enter on line 42a if:

• The routing number on a deposit slip is different from the routing number on your checks.

• The deposit is to a savings account that does not allow you to write checks or

• Your checks state they are payable through a financial

institution different from the one at which you have your checking account.

Enter your account number from left to right and leave unused boxes blank. Include hyphens, but omit spaces and special symbols.

# Note: The account number can be up to 17 characters (both numbers and letters).

### Example

On the sample check below, the routing number is 807100013. John Doe would use that routing number unless their financial institution instructed them to use a different routing number for direct deposits. The account number is 978653421. Do not include the check number. On the sample check above, the check number is 5678.

Ann boe Conse See Madees, RICON	
45407-5000 6 14 17 165 5 34 2 54 55 78	-

### **Direct Deposit Rejects**

If any of the following apply, your direct deposit request will be rejected and a check will be mailed:

Any numbers or letters are crossed out or whited out.

■ Your financial institution will not allow a joint refund to be deposited to an individual account. The State of Georgia is not responsible if a financial institution rejects a direct deposit.

■ You request a deposit of your refund to an account that is not in your name (such as your tax preparer's own account).

### Signature Section

Please sign and date your return. If filing a joint return you and your spouse must sign and date the return. If applicable, the paid preparer should also sign the return.

### SCHEDULE 1 ADDITIONS AND SUBTRACTIONS

### **Schedule 1 Instructions**

**Lines 1 - 6:** Enter your additions to income (see page 14 for detailed information).

**Lines 7 - 13:** Enter your subtractions from income (see pages 14 - 16 for detailed information).

**Lines 14:** Enter your total net adjustments here and on Line 9 of page 2 of Form 500.

# Note: Please complete and include your Retirement Exclusion calculation (Page 2 of Schedule 1), if you entered information on Schedule 1, Lines 7 a and/or b

### Additions

### The following adjustments must be added if applicable

1. Interest received from non-Georgia municipal bonds and dividends received from mutual funds that derived income from non-Georgia municipal bonds. These may only be reduced by direct and indirect interest expenses which are attributable to the income and which have not already been deducted in arriving at Federal adjusted gross income or itemized deductions.

2. Loss carryovers from years when you were not subject to Georgia income tax.

3. Lump sum distributions from employee benefit plans reported on IRS Form 4972.

4. Depreciation because of differences in Georgia and Federal law during tax years 1981 through 1986.

5. Adjustments due to Federal tax changes (see page 3).

6. Net operating loss carryover deducted on federal return.

7. Payments for more than \$600 in a taxable year made to employees which are not authorized employees and which are not excepted by Code Section 48-7-21.1. An authorized employee is someone legally allowed to work in the United States.

8. For the qualified education expense credit, the deduction relating to the credit.

9. Taxable portion of withdrawals on the Path2College 529 Plan (see Regulation 560-7-4-.04).

10. For the Land Conservation credit, the charitable donation relating to the credit. See Regulation 560-7-8-.50 for more information.

11. For the qualified rural hospital organization expense tax credit, the deduction relating to the credit. See Regulation 560-7-8-.57 for more information.

12. For the qualified education donation tax credit, the deduction relating to the credit. See Regulation 560-7-8-.60 for more information.

**Note:** If a taxpayer receives a state refund and is not required to include the refund in Federal AGI since they were subject to Federal Alternative Minimum Tax, they are not required to include the refund for Georgia purposes.

**Note:** Georgia does not allow the 20% qualified business income deduction. (I.R.C. Section 199A). However, since Georgia starts with Federal AGI, no adjustment is necessary on the Georgia return.

### Subtractions

#### The following adjustments may be SUBTRACTED:

1. Retirement income. The maximum retirement income exclusion is \$35,000 for taxpayers who are:

- (A) 62 64 years of age, or
- (B) less than 62 and permanently disabled to such an extent that they are unable to perform any type of gainful employment

The retirement exclusion is \$65,000 if the taxpayer is 65 or older.

The exclusion is available for the taxpayer and his/her spouse; however, each must qualify on a separate basis. If both spouses qualify, each spouse may claim the amounts above. Income from property that is jointly owned should be allocated to each taxpayer at 50% of the total value. Up to \$4,000 of the maximum allowable exclusion may be earned income. Use the instructions on page 16 and complete Form 500, Schedule 1, Page 2.

2. Interest and dividends on U.S. Government bonds and other U.S. obligations. These must be reduced by direct and indirect interest expenses which are attributable to the income. Interest received from the Federal National Mortgage Association, Government National Mortgage Association, Federal Home Loan Mortgage Corporation, and from repurchase agreements is taxable.

3. Social security or railroad retirement (tier 1 and tier 2) paid by the Railroad Retirement Board included in Federal adjusted gross income.

4. Salaries and wages reduced from Federal taxable income because of the Federal Jobs Tax Credit.

5. Individual retirement account, Keogh, SEP and SUB-S plan withdrawals where tax has been paid to Georgia because of the difference between Georgia and Federal law for tax years 1981 through 1986.

6. Depreciation because of differences in Georgia and Federal law during tax years 1981 through 1986.

### Schedule 1 Additions and Subtractions (continued)

7. Dependent's unearned income included in parents' Federal adjusted gross income.

8. Income tax refunds from states other than Georgia included in Federal adjusted gross income. **Do not subtract Georgia income tax refunds.** 

9. Income from any fund, program or system which is specifically exempted by Federal law or treaty.

10. Adjustment to Federal adjusted gross income for Georgia resident shareholders for Subchapter S income where the Sub S election is not recognized by Georgia or another state in order to avoid double taxation.

This adjustment is only allowed for the portion of income on which the tax was actually paid by the corporation to another state(s).

In cases where the Sub S election is recognized by another state(s) the income should not be subtracted. Credit for taxes paid to other states may apply.

11. Adjustment for teachers retired from the Teacher's Retirement System of Georgia for contributions paid between July 1, 1987 and December 31, 1989 that were reported to and taxed by Georgia.

12. Amount claimed by employers in food and beverage establishments who took a credit instead of a deduction on the Federal return for FICA tax paid on employee cash tips.

13. An adjustment of 10% of qualified payments to minority subcontractors or \$100,000, whichever is less, per taxable year by individuals, corporations or partnerships that are party to state contracts. For more information call the Department of Administrative Services at 404-657-6000 or visit their website: http://doas.ga.gov/state-purchasing/suppliers\_

14. Deductible portion of contributions to the Path2College 529 Plan. The deduction is limited on a return to the amount contributed but cannot exceed \$2,000 per beneficiary unless a married filing joint return is filed then the amount cannot exceed \$4,000 per beneficiary.

15. Adjustments due to Federal tax changes. (See page 3 for information.)

16. Combat zone pay exclusion. See page 10 for more information.

17. Up to \$10,000 of unreimbursed travel expenses, lodging expenses and lost wages incurred as a direct result of a taxpayer's donation of all or part of a kidney, liver, pancreas, intestine, lung or bone marrow during the taxable year.

18. Adjustments to Federal adjusted gross income for Georgia resident partners in a partnership or member(s) in a LLC where such entities income has been taxed at the entity level by another state. Adjustment is only allowed for the portion of income on which the tax was actually paid.

19. An amount equal to 100 percent of the premium paid by the taxpayer during the taxable year for high deductible health plans as defined by Section 223 of the Internal Revenue Code. The amount may only be deducted to the extent the deduction has not been included in federal adjusted income and the expenses have not been provided from a health reimbursement arrangement and have not been included in itemized deductions. In the event the taxpayer claims the expenses as itemized deductions, the taxpayer should multiply the expense by the ratio of total allowed itemized deductions after the federal limitation to the total allowed itemized deductions before the federal limitation should multiply the expense by the ratio of total allowed itemized deductions after the federal limitation to the total allowed itemized deductions before the federal limitation to determine the amount that is not allowed to be deducted pursuant to this paragraph. For example, the taxpayer has \$1,000 in high deductible health insurance premiums. They also have \$7,000 of other medical expenses which means they have total medical expenses of \$8,000. After the limitation, the taxpayer is only allowed to deduct \$2,000 of medical expenses. The \$1,000 deduction must be reduced by \$250 (\$2,000/\$8,000 x \$1,000). Which means the taxpayer is allowed to deduct \$750 pursuant to this paragraph.

20. Federally taxable interest received on Georgia municipal bonds designated as "Build America Bonds" under Section 54AA of the Internal Revenue Code of 1986. "Recovery Zone Economic Development Bonds" under Section 1400U-2 of the Internal Revenue Code or any other bond treated as a 'Qualified Bond" under Section 6431(f) of the Internal Revenue Code are considered "Build America Bonds" for this purpose.

21. Federally taxable interest received on Georgia municipal bonds issued by the State of Georgia and certain authorities or agencies of the State of Georgia for which there is a special exemption under Georgia law from Georgia tax on such interest.

22. Interest eliminated from federal itemized deductions due to the Federal Form 8396 credit.

23. An amount equal to 100 percent of the payments made to and received by a disabled first responder pursuant to Code Section 45-9-85 (Payment of indemnification for death or disability) provided that and to the extent such amounts are included in the taxpayer's federal adjusted gross income and are not otherwise exempt from the tax imposed by this article under any other provision of law. The term 'disabled first responders' means a law enforcement officer, fireman, publicly employed emergency medical technician, or a surviving spouse of such an individual, receiving payments pursuant to Code Section 45-9-85 (Payment of indemnification for death or disability) due to total permanent disability, organic brain damage, or death occurring in the line of duty.

24. For a firefighter, payments received pursuant to O.C.G.A. 25-3-23(b)(2) (certain insurance benefits related to cancer) to

### Schedule 1 Additions and Subtractions (continued)

the extent such amounts are included in the taxpayer's federal adjusted gross income and are not otherwise exempt on the Georgia return.

25. For a firefighter, an amount equal to 100% of any premium paid by the firefighter during the taxable year for coverage pursuant to O.C.G.A. 25-3-23(b)(2) (premiums paid to continue coverage by a firefighter that departs employment) to the extent such deduction has not been included in the taxpayer's federal adjusted gross income and is not otherwise deductible on the Georgia return.

26. Income received by a surviving family member that is based on the service record of a deceased veteran without regard to the age of the surviving family member.

27. For taxable years beginning on or after January 1, 2019, and ending on or before December 31, 2023, a subtraction is allowed for certain disaster relief payments. The payments that qualify are those that are received from a federal disaster relief or assistance grant program administered by Georgia or its instrumentalities or the United States Department of Agriculture but only if the federal grant program was established specifically to address agricultural losses suffered due to Hurricane Michael during the 2018 calendar year. Also, the subtraction is only allowed to the extent the income is included in federal adjusted gross income. Finally, any amounts that came from a pass-through entity are also eligible.

Note regarding ABLE PROGRAMS - NO DEDUCTION is allowed as a subtraction item for any contribution made pursuant to the Georgia ABLE Program or any other state ABLE programs.

### **RETIREMENT INCOME EXCLUSION**

Social security and railroad retirement paid by the Railroad Retirement Board, exempt interest, or other income that is not taxable to Georgia should not be included in the retirement income exclusion calculation. Income or losses should be allocated to the person who owns the item. If any item is held jointly, the income or loss should be allocated to each taxpayer at 50%.

Part-year residents and nonresidents must prorate the retirement income exclusion. The earned income portion and the unearned income portion must be separately prorated. The earned income portion shall be prorated using the ratio of Georgia source earned income to total earned income computed as if the taxpayer were a resident of Georgia for the entire year. The unearned portion shall be prorated using the ratio of Georgia source unearned retirement income to total unearned retirement income computed as if the taxpayer were a resident of Georgia for the entire year.

\*Retirement income does not include income received directly or indirectly from lotteries, gambling, illegal sources or similar income.

\*\* Rental, Royalty or Partnership income that is subject to FICA tax or Self employment tax should be included on line 2 not line 13. Trade or business income from an S Corp in which the taxpayer or their spouse materially participated should be included on line 2 not line 13.

Part-year/Nonresident Retirement Exclusion Example	e						
Schedule 3:	Column A	Column B	Column	С			
Ln 1 Wages	68,300	45,800	22,500	)			
Ln 2 Interest and Dividends	82,500	82,500	0				
Ln 3 Business	0	0	0				
Ln 4 Other	325,150	100,000	225,150	)			
Ln 5 Total	475,950	228,300	247,650	)			
Ln 6 Total Adjustments	-12,000	-12,000	0				
Ln 7 Sch 1 Retirement Exclusion (from step 2 below)	-65,000	-29,992	-35,008	3			
Line 8 AGI	398,950	186,308	212,642	2			
Step 1 Determine the Everywhere and Georgia parts of I	Retirement Exc	lusion	9	Step 2 Determine the pa	art-vear/nonresid	ent retirement	exclusion allowed
, , ,		Georgia		Jnearned portion			
Ln1 Wages	68,300	22,500	E	Earned Income ratio	Georgia	22,500	
Ln 2 Other Inc					Everywhere	68,300	0.3294
Ln 3 Total Earned Income to be used in step 2	68,300	22,500	n	Max Earned income	-		4,000
Ln 4 Max Earned Inc	4,000		0	Georgia Earned Incom	ne portion		1,31
Ln 5 Smaller of Ln 3 or 4	4,000						
Ln 6 Interest	82,500	0	E	Earned Portion			
Ln 7 Dividend	0	0	Ţ	Total Max Exclusion			65,00
Ln 8 Alimony			F	Portion used on unear	ned		4,000
Ln 9 Cap Gains	30,450	30,450	F	Remaining allowed on	unearned		61,000
Ln 10 other inc	75,150	0					
Ln 11 Taxable IRA			l	Jnearned ratio	Georgia	225,150	
Ln 12 Taxable pensions	24,850	0			Everywhere	407,650	0.5523
Ln 13 Rent, Royalty, Etc	194,700	194,700					
Ln 14 Unearned Income (total Line 6 to 13) Use in st	tep 407,650	225,150	C	Geogia unearned inco	me portion		33,69
			1	Total Retirement exclu	ision allowed fro	m GA inc	35,008

### FORM 500 SCHEDULES 2 AND 3 INSTRUCTIONS

#### Schedule 2: Credit Usage and Carryover (Series 100) Return must be electronically filled.

1. Georgia tax credits (Series 100) must be claimed on Schedule 2. Refundable credits are claimed on schedule 2B. Currently only the Timber Tax credit is refundable but is not refundable if it was purchased. For a list of tax credit codes (series 100) see page 22. With respect to Line 10, the "Tax Credit Summaries" on the Department's website dor.ga.gov includes information regarding which credits can be sold. Series 200 tax credit codes are claimed on IND-CR.

2. If claiming credit code 125 (QEE) enter your SSN and not the FEIN of the SSO.

3. A return is required to be electronically filed if the return allocates, claims, utilizes, or includes in any manner a series 100 credit (see page 22).

4. Total Schedule 2 credits used for this tax year, and enter the total on Line 20 of Form 500 or 500X.

5. The taxpayer must indicate which credits are being used. The total amount used from all Schedule 2s, the IND-CR, and from the other state(s) tax credit, and from the low income credit cannot exceed the tax liability listed on Line 16 of Form 500 or 500X.

6. If a credit is eligible for carryover to this tax year, complete the schedule even if the credit is not used in this tax year.

7. If the credit originated with more than one person or company, enter separate information for each.

8. Credit certificate numbers are issued by the Department of Revenue for preapproved credits. If applicable, enter the Department of Revenue credit certificate number where indicated.

9. See the relevant forms, statutes, and regulations to determine how the credit is allocated to the owners, to determine when carryovers expire, and to see if the credit is limited to a certain percentage of tax.

10. Before the Georgia tax credit carryovers are applied to the next tax year, the amount must be reduced by any amounts elected to be applied to withholding in the current tax year (for businesses only) and by any carryovers that have expired.

11. For the credit generated this year, list the Company/ Individual Name, FEIN/SSN, Credit Certificate number, if applicable, and % of credit (purchased credits should also be included). If the credit originated with this taxpayer, enter this taxpayer's name and SSN below and 100% for the percentage.

12. Disregarded Single Member LLC Credit Instructions. If the taxpayer owns a disregarded single member LLC, the single member LLC should be disregarded for filing purposes. All credits should be claimed on the owner's return. All tax credit forms should be filed in the name of the single member LLC but included with the owner's return. This is necessary so that the returns can be processed and the credits flow to the proper taxpayer.

### Schedule 3: Part Year and Nonresidents

Note: Include copies of applicable returns and schedules with your Georgia return.

**LINES 1 - 4, Column A:** List your income as if you were a Georgia resident.

**LINES 1 - 4, Column B:** List your income not taxable to Georgia.

**LINES 1 - 4, Column C:** List your Georgia taxable income. **LINE 5, Columns A, B, and C:** Enter the total of Lines 1- 4 in Columns A, B, and C respectively.

**LINES 6 - 7, Column A:** List adjustments from your federal return on Line 6; list adjustments allowed by Georgia law on Line 7. See the Line 9 instructions on pages 14-16 for adjustments allowed by Georgia law.

**LINES 6 - 7, Column B:** List adjustments that do not apply to Georgia residency or do not apply because of taxable income earned as a nonresident.

**LINES 6 - 7, Column C:** List adjustments from the Federal return that apply to Georgia on Line 6; list Georgia adjustments on Line 7. See the Line 9 instructions on pages 14-16 for adjustments allowed by Georgia law.

**LINES 8, Columns A, B, and C:** Subtract Line 6 from Line 5 in each column; and add or subtract Line 7 from Line 5 in each column. Enter the total for each column on Line 8 A, B, and C respectively.

**LINE 9:** Divide Line 8, Column C by Line 8, Column A to calculate the ratio of Georgia income to total income.

Adjusted Gross Income - The percentage on Schedule 3, Line 9 is zero if Georgia adjusted gross income (AGI) is zero or negative. If the adjusted Federal AGI is zero or negative, the Line 9 percentage is 100%. The percentage is also considered to be 100% if both adjusted Federal and Georgia AGI are zero or negative. In this case, the taxpayer is entitled to the full exemption amount and deductions.

**LINE 10a and 10b:** If itemizing, enter the amount from Federal Schedule A reduced by income taxes paid to other states and expense for the production of non-Georgia income. Include a copy of Federal Schedule A with your Georgia income tax return. If using the standard deduction, enter the amount for your filing status as indicated below.

- Single/Head of Household......\$4,600
- Married Filing Joint.....\$6,000
- Married Filing Separate.....\$3,000
- Additional Deduction for Blind and/or 65 or older:
   \$1,300

**LINES 11a:** Multiply Form 500, Line 6c by \$2,700 for filing status A or D or multiply by \$3,700 for filing status B or C. **LINES 11b:** Multiply Form 500, Line 7a by \$3,000 and enter

the total.

LINES 11c: Enter the total of Lines 11a plus 11b.

LINE 12: Add Lines 10a, 10b, 11a, and 11b.

LINE 13: Multiply Line 12 by the ratio on Line 9.

**LINE 14:** Subtract Line 13 from Line 8, Column C. This is your Georgia taxable income. Enter here and on Form 500 Line 15. Use the income tax table on pages 25-27 to determine your tax and enter on Form 500, Line 16.

Follow the instructions on page 12 to complete Lines 16 through 42a of Form 500.

2019         YOUR SOCIAL SECURITY NUMBER         9         8         7         6         5         4         3         1           COURS SOCIAL SECURITY NUMBER           CONDUT JECINCE S 17HEU 14 OF PAGES 2 and 3 FORM 500 or 500.           COMPUTATION OF BORGIA TAXABLE TO GEORGIA           COMPUTATION OF CORGIA ALMOSTMENT           COLUMN A)           COMPUTATION OF CORGIA ALMOSTMENT           COMPUTATION OF CORGIA ALMOSTMENT <td colspa<="" th=""><th>Georgia Form 500 (Rev. 09/18/19) Schedule 3</th><th>Basis for I Their Fede They have April 1. Th</th><th>Example: A eral adjuste one child</th><th>ed gross i and adjus</th><th>and v ncome stment</th><th>vife are e is \$5 s to in</th><th>e both   2,000 c icome t</th><th>part-year consisting cotaling \$2</th><th>resid of \$</th><th>lents o 48,000</th><th>of Geo</th><th>orgia v alary a</th><th>and \$4</th><th>,000</th><th>of int</th><th>erest</th><th></th></td>	<th>Georgia Form 500 (Rev. 09/18/19) Schedule 3</th> <th>Basis for I Their Fede They have April 1. Th</th> <th>Example: A eral adjuste one child</th> <th>ed gross i and adjus</th> <th>and v ncome stment</th> <th>vife are e is \$5 s to in</th> <th>e both   2,000 c icome t</th> <th>part-year consisting cotaling \$2</th> <th>resid of \$</th> <th>lents o 48,000</th> <th>of Geo</th> <th>orgia v alary a</th> <th>and \$4</th> <th>,000</th> <th>of int</th> <th>erest</th> <th></th>	Georgia Form 500 (Rev. 09/18/19) Schedule 3	Basis for I Their Fede They have April 1. Th	Example: A eral adjuste one child	ed gross i and adjus	and v ncome stment	vife are e is \$5 s to in	e both   2,000 c icome t	part-year consisting cotaling \$2	resid of \$	lents o 48,000	of Geo	orgia v alary a	and \$4	,000	of int	erest	
SCHEDULE 3 COMPLICATION OF GEORGIA TAXABLE INCOME FOR ONLY PART-YEAR RESIDENTS AND ONCOME Income andre states a descript ansights and the states bit and the states bit for any page. Set 17:51 Tax Booket.         FEDERAL INCOME AFTER GEORGIA ADJUSTMENT (COLUMN A)       INCOME NOT TAXABLE TO GEORGIA MCOME (COLUMN B)       Set 17:51 Tax Booket.         1       WAGES, SALARIES, TIPS, dc       1. WAGES, SALARIES, TIPS, dc	Part-Year Nonresident 2019			YOUR S	OCIAL	SECU	IRITY N	IUMBER	9	8	7	6	5	4	3	2	1	
Income earmed in another state as a Georgia regident to trabable but other state() fax credit may papy. See IT-511 Tax Booklet.         GEORGIA NOUSE           FEDERAL NOOME AFTER GEORGIA ADJUSTMENT         INCOME NOT TAXABLE TO GEORGIA         GEORGIA NOUSE         INCOME NOT TAXABLE TO GEORGIA           1. WAGES, SALARIES, TIPS, etc         1. WAGES, SALARIES, TIPS, etc         INTERESTS AND DIVIDENOS         INTERESTS NOME OR (LOSS)		DO NO	T USE LIN	NES 9 TH	RU 14	4 OF I	PAGES	2 and 3	FOR	M 500	) or (	500X						
FEBERAL INCOME AFTER GEORGIA ADJUSTMENT         INCOME NOT TAXABLE TO GEORGIA (COLUMN 6)         GEORGIA INCOME (COLUMN 6)           1         WAGES, SALARIES, TIPS, dc         1         1         WAGES, SALARIES, TIPS, dc         1         1														S.				
4       8       0       0       0       1       1       4       5       0       3       6       5       4       7       00         2.       INTERESTS AND DIVIDENDS       2.       INTERESTS AND DIVIDENDS       2.       INTERESTS AND DIVIDENDS       3       0       4       00       0       00       9       5       4       00       3       0       4       6       00         3.       BUSINESS INCOME OR (LOSS)       3       0       4       0       00	FEDERAL INCOME AFTER GEORGIA ADJ			OME NOT	ГАХАВ	LE TO					GE	ORGIA						
2. INTERESTS AND DIVIDENDS       2. INTERESTS AND DIVIDENDS       2. INTERESTS AND DIVIDENDS         2. INTERESTS AND DIVIDENDS       2. INTERESTS AND DIVIDENDS       2. INTERESTS AND DIVIDENDS         3. BUSINESS INCOME OR (LOSS)       3. BUSINESS INCOME OR (LOSS)       3. BUSINESS INCOME OR (LOSS)         4. OTHER INCOME OR (LOSS)       4. OTHER NOME OR (LOSS)       3. BUSINESS INCOME OR (LOSS)         4. OTHER INCOME OR (LOSS)       4. OTHER NOME OR (LOSS)       4. OTHER NOME OR (LOSS)         5. TOTAL INCOME: TOTAL LINES 1 HRU4       5. TOTAL NOOME: TOTAL LINES 1 HRU4       5. TOTAL NOOME: TOTAL LINES 1 HRU4         5. Z       0       0       1       2       0       0         6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE1       5. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE1       5. TOTAL ADJUSTED GROSS NOOME: LINES 5 PLISO RMINUS LINES 5 AND 7       8. ADJUSTED GROSS NOOME: LINES 5 PLISO RMINUS LINES 5 AND 7       8. ADJUSTED GROSS NOOME: LINES 5 PLISO RMINUS LINES 5 AND 7       8. ADJUSTED GROSS NOOME: LINES 5 PLISO RMINUS LINES 5 AND 7       8. ADJUSTED GROSS NOOME: LINES 5 PLISO RMINUS LINES 5 AND 7       8. ADJUSTED GROSS NOOME: LINES 5 PLISO RMINUS LINES 5 AND 7       8. ADJUSTED GROSS NOOME: LINES 5 PLISO RMINUS LINES 5 AND 7       8. ADJUSTED GROSS NOOME: LINES 5 PLISO RMINUS LINES 5 AND 7       8. ADJUSTED GROSS NOOME: LINES 5 PLISO RMINUS LINES 5 AND 7       8. ADJUSTED GROSS NOOME: L	1. WAGES, SALARIES, TIPS, etc		1. WAGES	, SALARIES	S, TIPS,	etc			1.	WAGE	S, SAL	ARIES	, TIPS, e	etc				
4       0       0       0       9       5       4       0	4 8 0 0	0 00		1	1	4	<b>5</b>	3 00				3	6	5	4	7	00	
4       0       0       0       9       5       4       0	2 INTERESTS AND DIVIDENDS								2	INTED	, Tete		, ,	20				
4. OTHER INCOME OR (LOSS)       4. OTHER INCOME OR (LOSS)       4. OTHER INCOME OR (LOSS)         5. TOTAL INCOME: TOTAL LINES 1 HIRU 4       5. TOTAL NCOME: TOTAL LINES 1 HIRU 4       5. TOTAL NCOME: TOTAL LINES 1 HIRU 4         5. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040         6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040         7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1       7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1       7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1         8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7         9. RATIO: Divide Line 8, Column C by Line 8, Column A. Enter percentage							5	4 00	<i>Z</i> .		23137			Ċ.	4	6	00	
4. OTHER INCOME OR (LOSS)       4. OTHER INCOME OR (LOSS)       4. OTHER INCOME OR (LOSS)         5. TOTAL INCOME: TOTAL LINES 1 HIRU 4       5. TOTAL NCOME: TOTAL LINES 1 HIRU 4       5. TOTAL NCOME: TOTAL LINES 1 HIRU 4         5. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040         6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040         7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1       7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1       7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1         8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7         9. RATIO: Divide Line 8, Column C by Line 8, Column A. Enter percentage	3. BUSINESS INCOME OR (LOSS)		3. BUSINE	SS INCOME	OR (LO	OSS)			3.	BUSINE	ESS IN	COME	OR (LO	SS)				
5. TOTAL INCOME: TOTAL LINES 1 THRU 4       5. TOTAL NCOME: TOTAL LINES 1 THRU 4       5. TOTAL NCOME: TOTAL LINES 1 THRU 4       5. TOTAL NCOME: TOTAL LINES 1 THRU 4         5. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040         6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040       6. TOTAL ADJUSTMENTS FROM FORM 1040         7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1       7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1       7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1         8. ADJUSTED GROSS NCOME: LINES 9 AND 7       8. ADJUSTED GROSS NCOME: LINE 9 FLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS NCOME: LINE 9 FLUS OR MINUS LINES 6 AND 7         10. ADJUSTED GROSS NCOME: LINE 9 FLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS NCOME: LINE 9 FLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS NCOME: LINE 9 FLUS OR MINUS LINES 6 AND 7         10. ADJUSTED GROSS NCOME: LINE 9 FLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS NCOME: LINE 9 FLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS NCOME: LINE 9 FLUS OR MINUS LINES 6 AND 7         10. Additional Standard Deduction S (See IT-511 TAX BOOKlet)       10a.       10a.       6 0 0 0 00         11. Personal Exemption from Form 500 or 500X 2       multiply by \$3,700 for. 11a. Ming status A or D or multiply 3,700 for filing status B or C       7 4 0 0 00         11. Detart the number on Line 7a. from Form 500		00				,		00									00	
5       2       0       0       00       1       2       4       0       7       00       3       9       5       9       3       00         6.       TOTAL ADJUSTMENTS FROM FORM 1040       6.       TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1       7.       6.       0	4. OTHER INCOME OR (LOSS)		4. OTHER	INCOME OF	LOSS	)			4.	OTHER		MEOR	(LOSS)				-	
5       2       0       0       00       1       2       4       0       7       00       3       9       5       9       3       00         6.       TOTAL ADJUSTMENTS FROM FORM 1040       6.       TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1       7.       6.       0		00				$\Box$		00			$\Box$		Ò,				00	
6. TOTAL ADJUSTMENTS FROM FORM 1040         7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1         8. ADJUSTED GROSS INCOME:       8. ADJUSTED GROSS INC	5. TOTAL INCOME: TOTAL LINES 1 THRU 4		5. TOTAL INCOME: TOTAL LINES 1 THRU 4					5. TOTAL INCOME: TOTAL LINES 1 THRU 4										
2       0       0       00	5 2 0 0	0 00		, 1	2	4	0	7 00			,	3	9	5	9	3	00	
7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1       7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1       7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1         8. ADJUSTED GROSS INCOME: LINE 5 FLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS INCOME: LINE 5 FLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS INCOME: LINE 5 FLUS OR MINUS LINES 6 AND 7         9. RATIO: Divide Line 8, Column C by Line 8, Column A. Enter percentage       9.       7       8       9       % Not to exceed 100%         10a. Itemized       or Standard Deduction       X (See IT-511 Tax Booklet)       10a.       6       0       0       00         11. Personal Exemption from Form 500 (See IT-511 Tax Booklet)       10a.       7       4       0       0       00         11. Personal Exemption from Form 500 or 500X       2       multiply by \$2,700 for 11a.       7       4       0       0       0         12. Total Deductions and Exemptions:       Add Lines 10a, 10b, 11a, and 11b       11       2       5       3       0       0       0         13. Multiply Line 12 by Ratio on Line 9 and enter result       13.       1       2       5       3       0       0	6. TOTAL ADJUSTMENTS FROM FORM 104	0	6. TOTAL	ADJUSTM	ENTS FR	ROM FC	0RM 104	0	6.	TOTAL	ADJU	ISTMEI	NTS FR	OMFC	RM 1	040		
SCHEDULE 1       -       5       0       00       -       -       5       0       00         8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7       8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7       9. Additional Standard Deduction X       9. Addition	2,00	0 00			2	0	0	0 00			$,\Box$		$\Box$ ,				00	
<ul> <li>8. ADJUSTED GROSS INCOME: LINE 5PLUS OR MINUS LINES 6 AND 7</li> <li>9. RATIO: Divide Line 8, Column C by Line 8, Column A. Enter percentage</li></ul>	7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1																	
LINE 5 PLUS OR MINUS LINES 6 AND 7       LINE 5 PLUS OR MINUS LINES 6 AND 7         INE 5 PLUS OR MINUS LINES 6 AND 7       LINE 5 PLUS OR MINUS LINES 6 AND 7         9.       7       8       9       8       Not to exceed 100%         10a.       Item is a construction of the standard Deduction of the sta	- 5 0	0 00		$,\square\square$		$\Box$		00			$\Box$		Ξ,	5	0	0	00	
9.       RATIO: Divide Line 8, Column C by Line 8, Column A. Enter percentage       9.       7       8       9       8       % Not to exceed 100%         10a.       Itemized       or Standard Deduction       X (See IT-511 Tax Booklet)																		
10a. Itemized       or Standard Deduction       (See IT-511 Tax Booklet)		0 00			0			7 00								3	00	
<ul> <li>10b. Additional Standard Deduction Self: 65 or over?</li> <li>Blind?</li> <li>Spouse: 65 or over?</li> <li>Blind?</li> <li>Total</li> <li>x 1,300=</li> <li>10b.</li> <li>11. Personal Exemption from Form 500 (See IT-511 Tax Booklet)</li> <li>11a. Enter the number on Line 6c. from Form 500 or 500X</li> <li>multiply by \$2,700 for 11a.</li> <li>filing status A or D or multiply by \$3,700 for filing status B or C</li> <li>multiply by \$3,000 11b.</li> <li>11b. Enter the number on Line 7a. from Form 500 or 500X</li> <li>multiply by \$3,000 11b.</li> <li>12. Total Deductions and Exemptions: Add Lines 10a, 10b, 11a, and 11b</li></ul>	9. RATIO: Divide Line 8, Column (	C by Line 8	3, Column	A. Ente	r perce	entage		9.		7	8	9	8	%	Not to	excee	ed 100%	
Self: 65 or over?       Blind?       Total       x 1,300=       10b.	10a. Itemized 🗖 or Standard Dedu	uction X (	See IT-51	1 Tax Bo	oklet	)		10a.					6	0	0	0	00	
<ul> <li>11. Personal Exemption from Form 500 (See IT-511 Tax Booklet)</li> <li>11a. Enter the number on Line 6c. from Form 500 or 500X 2 multiply by \$2,700 for 11a. 17,400000</li> <li>11b. Enter the number on Line 7a. from Form 500 or 500X 1 multiply by \$3,000 11b. 16,400000</li> <li>12. Total Deductions and Exemptions: Add Lines 10a, 10b, 11a, and 11b</li></ul>	10b. Additional Standard Deduction	1					1		-			12						
11a. Enter the number on Line 6c. from Form 500 or 500X       2       multiply by \$2,700 for 11a.       7       4       0       0       00         fling status A or D or multiply by \$3,700 for filing status B or C       1       multiply by \$3,000 ref 11a.       3       0       0       0       00       00         11b. Enter the number on Line 7a. from Form 500 or 500X       1       multiply by \$3,000 ref       11b.       1       6       4       0       0       00       00         12. Total Deductions and Exemptions:       Add Lines 10a, 10b, 11a, and 11b ref		•				al	x 1,30	<sub>0=</sub> 10b.			,			,			00	
11b. Enter the number on Line 7a. from Form 500 or 500X       1       multiply by \$3,000 11b.       3,00000       0000         12. Total Deductions and Exemptions: Add Lines 10a, 10b, 11a, and 11b	11a. Enter the number on Line 6c.	from Form	1 500 or 5	00X 2	,	ly by §	\$2,700	for 11a			, [		7	4	0	0	00	
12. Total Deductions and Exemptions: Add Lines 10a, 10b, 11a, and 11b       12.       1       6       4       0       0       00         13. Multiply Line 12 by Ratio on Line 9 and enter result       13.       13.       1       2       9       5       3       00					multin	ly by s	\$3,000	11h					3	0	0	0	00	
13. Multiply Line 12 by Ratio on Line 9 and enter result					-							1	6	4	0	0	00	
									Г			1	2	9	5	3	00	
14. Income before GA NOL: Subtract Line 13 from Line 8, Column C								13.	F									

### WORKSHEET FOR OTHER STATE(S) TAX CREDIT

Georgia allows a credit for tax paid to another state on income taxable to Georgia <u>and</u> the other state. Use these worksheets to compute the other state(s) tax credit for full-year and part-year residents. Do not file these worksheets with your return. Keep them for your records.

Enter the Total Tax Credit on Form 500 line 18. **Include a copy of tax return(s) filed with other state(s).** The credit is for state and U.S. local income tax only. The tax must have been imposed on net income. No other income taxes such as foreign local, foreign city, foreign province, foreign country, U.S. Possession, etc., qualify for this credit.

### FULL-YEAR RESIDENTS

1.	Other state(s) adjusted gross income			\$
2.	Georgia adjusted gross income (Line 10, Form 500)	\$		
3.	Ratio: Line 1 divided by Line 2	c	%	
4.	Georgia standard or itemized deductions	\$		
5.	Georgia personal exemption and credit for dependents from Form 500, Line 14c	\$		
6.	Total of Line 4 and Line 5	\$		
7.	Line 6 multiplied by ratio on Line 3			\$
8.	Income for computation of credit (Line 1 less Line 7)			\$
9.	Tax at Georgia rates (use tax table on pages 25 - 27)			\$
10.	Tax shown on return(s) filed with other state(s)*			\$
11.	Total Tax Credit (Lesser of Line 9 or Line 10) to be entered o Line 18 of Form 500	n		\$
PA	RT-YEAR RESIDENTS			
1.	Income earned in another state(s) while a Georgia resident			\$
2.	Georgia adjusted gross income (Line 8, Column C of Form 500, Schedule 3)	\$	_	
3.	Ratio: Line 1 divided by Line 2		%	
4.	Georgia standard or itemized deductions and Georgia person exemption and credit for dependents after applying the ratio on Schedule 3 (Line 13, Schedule 3, Form 500)		-	
5.	Line 4 multiplied by ratio on Line 3			\$
6.	Income for computation of credit (Line 1 less Line 5)			\$
7.	Tax at Georgia rates (use tax table on pages 25 - 27)			\$
8.	Tax shown on return(s) filed with other state(s) for income ta	xed by Georgia*		\$
		, ,		

\* The amount entered must be reduced by credits that have been allowed by the other states.

### LOW INCOME CREDIT WORKSHEET

		ne low income credit, including e tax year for which the credit			eturns, m	ust be filed o	n or befoi	e the end c	of the 12th m	10nth following
1.	Enter the an	nount from Form 500, Line 8 or	Form 500EZ, I	_ine 1				\$_		
2.	Enter the nu	mber of exemptions. Exemption	ns are self, sp	ouse and	natural or	legally adopte	ed childre	n		
3.	Enter 1 if yo	u or your spouse is 65 or older;	enter 2 if you	and your	spouse ar	e 65 or older				
4.	Add Lines 2	and 3; enter on line 17a of Forr	n 500, or if filir	ig the Foi	m 500EZ,	Line 5a				
5.		dit that corresponds to your inco e Form 500EZ, Line 5b								
6.	Multiply Line	e 4 by Line 5; enter the total on I	ine 17c of For	m 500; or	if filing the	e Form 500EZ	I, Line 5c	\$.		
Cre	edit Table:	Federal Adjusted Gross Incom Under \$6,000 \$6,000 but not more than \$7,99 \$8,000 but not more than \$9,99 \$10,000 but not more than \$14 \$15,000 but not more than \$19	99 99 1,999	<u>Credit</u> \$26 \$20 \$14 \$ 8 \$ 5						
		SCHEDULE FO	_		IG GE			ME TAX	XES	
Ple	ase see th	ne Form 500ES which inc					a how to	o file and	pav estim	nated tax.
1.		djusted gross income expe	-					\$		<u>.</u>
2.		to income tions on pages 14)						\$		<u> </u>
3.	Balance							\$		<u>.                                    </u>
4.	Social Se (See subtrac	curity ction instructions on page 14)	\$							
5.		Retirement ction instructions on page 14)	\$							
6.	Applicable	e Retirement Exclusion	\$		<u>.                                    </u>					
7.	Other dec (See instruc	luctions tions on pages 14-16)	\$		<u>.                                    </u>					
8.	Balance (	Subtract Lines 4 - 7 from Line 3)						\$		<u>.                                    </u>
9.		exemption and n for dependents	\$							
10.	Standard	or Itemized deductions	\$		<u> </u>					
11.	Taxable ir	COME (Subtract Lines 9 and 10	from Line 8)					\$		<u> </u>
12.		nount on Line 11 a tax rate schedule on next page)	)					\$		·
13.		ng Tax and other credits	<u>\$</u>		<u> </u>					
	Amount fr	om prior year's return to d to this year's estimate	\$		•					
15.		I Tax due this year nes 13 and 14 from Line 12) (See	500ES)					\$		<u>.                                    </u>

### Georgia Tax Rate Schedule For 2019

### Single

If Georgia taxable income is

Not Over	\$ 750	
Over	\$ 750	But not over\$2,250
Over	\$ 2,250	But not over\$3,750
Over	\$ 3,750	But not over\$5,250
Over	\$ 5,250	But not over\$7,000
Over	\$ 7,000	

#### Married Filing Joint or Head of Household

If Georgia taxable income is

Not Over	\$ 1,000		
Over	\$ 1,000	But not over\$	3,000
Over	\$ 3,000	But not over\$	5,000
Over	\$ 5,000	But not over\$	7,000
Over	\$ 7,000	But not over\$	10,000
Over	\$ 10,000		

### **Married Filing Separate**

#### If Georgia taxable income is

Not Over	\$ 500	
Over	\$ 500	But not over\$1,500
Over	\$ 1,500	But not over\$2,500
Over	\$ 2,500	But not over\$3,500
Over	\$ 3,500	But not over\$5,000
Over	\$ 5,000	

Amount of Tax is

1% of Taxable Income

\$ 8.00	plus 2% of the amount over\$ 750
\$ 38.00	plus 3% of the amount over\$ 2,250
\$ 83.00	plus 4% of the amount over\$ 3,750
\$ 143.00	plus 5% of the amount over\$ 5,250
\$ 230.00	plus 5.75% of the amount over\$ 7,000

#### Amount of Tax is

1% of Taxable Income

\$ 10.00 plus 2% of the amount over\$ 1,00	00
\$ 50.00\$ 3,00	00
\$ 110.00 plus 4% of the amount over \$ 5,00	)0
\$ 190.00 plus 5% of the amount over \$ 7,00	)0
\$ 340.00 plus 5.75% of the amount over \$10,00	)0

#### Amount of Tax is

1% of Taxable Income

\$ 5.00 plus 2% of the amount over \$ 500
\$ 25.00 plus 3% of the amount over \$1,500
\$ 55.00 plus 4% of the amount over\$2,500
\$ 95.00 plus 5% of the amount over \$3,500
\$ 170.00 plus 5.75% of the amount over\$5,000

### TAX CREDITS

The following credits from the Taxpayer or from the ownership of a S Corp, LLC, LLP, or Partnership Interest which will be reflected on the Individual's K-1 must be listed on Form 500, Schedule 2. The entity information and credit type code must be included. Additional documentation for claiming a credit is required where indicated.

NOTE: Credit code numbers are subject to change annually. Current code numbers are listed below. See Form IND-CR for information about additional tax credits.

NOTE: A return is required to be filed electronically if the return generates, allocates, claims, utilizes, or includes in any manner a Series 100 credit.

Refundable credits are claimed on Schedule 2B. Currently only the Timber Tax Credit (145) is refundable but not if it was purchased.

Disregarded Single Member LLC Credit Instructions. If the taxpayer owns a disregarded single member LLC, the single member LLC should be disregarded for filing purposes. All credits should be claimed on the owner's return. All tax credit forms should be filed in the name of the single member LLC but included with the owner's return. This is necessary so that the returns can be processed and the credits flow to the proper taxpayer.

For additional information on the below-listed credits, please visit the Georgia Department of Revenue website at <u>dor.georgia.</u> <u>gov/documents/tax-credits</u>.

### Code Name of Credit

101 - Employer's Credit for Basic Skills Education

102 - Employer's Credit for Approved Employee Retraining

103 - Employer's Jobs Tax Credit

104 - Employer's Credit for Purchasing Child Care Property

105 - Employer's Credit for Providing or Sponsoring Child Care for Employees

- 106 Manufacturer's Investment Tax Credit
- 107 Optional Investment Tax Credit

108 - Qualified Transportation Credit (only carryover can be used)

109 - Low Income Housing Credit (enclose Form IT-HC and K-1)

111 - Business Enterprise Vehicle Credit

112 - Research Tax Credit

113 - Headquarters Tax Credit

114 - Port Activity Tax Credit

115 - Bank Tax Credit

116 - Low Emission Vehicle Credit (only carryover can be used)

117 - Zero Emission Vehicle Credit (only carryover can be used)

118 - New Facilities Job Credit

119 - Electric Vehicle Charger Credit (include DNR Certification)

120 - New Manufacturing Facilities Property Credit

121 - Historic Rehabilitation Credit for Historic Homes (include Form IT-RHC and DNR certification) Code Name of Credit

122 - Film Tax Credit (Use code 133 if the credit is for a Qualified Interactive Entertainment Production Company)

124 - Land Conservation Credit (include Form IT-CONSV)

- 125 Qualified Education Expense Credit
- 126 Seed-Capital Fund Credit

127 - Clean Energy Property Credit (include Form IT-CEP)

128 - Wood Residual Credit

129 - Qualified Health Insurance Expense Credit (include Form IT-QHIE)

- 130 Quality Jobs Tax Credit
- 131 Alternate Port Activity Tax Credit
- 132 Qualified Investor Tax Credit

133 - Film Tax Credit for a Qualified Interactive Entertainment Production Company

134 - Alternative Fuel Heavy-Duty Vehicle and Alternative Fuel Medium-Duty Vehicle Tax Credits

135 - Historic Rehabilitation Tax Credit for any Other Certified Structures (not a historic home)

136 - Qualified Rural Hospital Organization Expense Tax Credit

- 137 Qualified Parolee Jobs Tax Credit
- 138 Postproduction Film Tax Credit
- 139 Small Postproduction Film Tax Credit
- 140 Qualified Education Donation Tax Credit
- 141 Musical Tax Credit
- 142 Rural Zone Tax Credits
- 143 Agribusiness and Rural Jobs Tax Credit
- 144 Post- Consumer Waste Materials Tax Credit
- 145 Timber Tax Credit
- 146 Railroad Track Maintenance Tax Credit



Pick an amount and make it count by donating on your State Income Tax Return form to one or more of the following Checkoff Georgia charitable organizations.

children-and-youth-special-healthcare-needs-cyshn



**The Georgia Wildlife Conservation Fund** protects and preserves Georgia's nongame wildlife, including bald eagles, sea turtles, and other animals that are not hunted, trapped or fished. *Georgia Department of Natural Resources / 2070 U.S. Hwy 278 S.E. / Social Circle, GA 30025 / 706-557-3333 / <u>http://georgiawildlife.com</u>* 

DHS "Interviewer of Construction Construction















**The Georgia Fund for Children and Elderly** provides programs for preschool children with special needs plus home-delivered meals and transportation for elders. DHS *Division Aging Services* / 404-657-5258 / <u>http://aging.georgia.gov/georgia-fund-children-and-elderly</u>; DCH / Division of Public Health / MCH / Children and Youth with Special Needs / 404-657-2700 / <u>http://dph.georgia.gov/</u>

**The Georgia Cancer Research Fund** supports innovative and promising research on all types of cancer. Funds often provide seed money for pilot projects to help scientists obtain data needed to win grants from national cancer organizations. *Georgia Cancer Coalition / 50 Hurt Plaza, Suite* 700 / Atlanta, GA 30303 / 404-584-7720

**The Georgia Land Conservation Program** provides funds for land conservation to protect natural resources and increase the state's economic competitiveness. *Georgia Environmental Finance Authority / 233 Peachtree St NE, Suite 900 / Atlanta, GA 30303* 

**The Georgia National Guard Foundation Inc.** provides emergency relief assistance to the soldiers and airmen of the Georgia National Guard and other qualified members of the Georgia Department of Defense. *Georgia National Guard Foundation/ 1000 Halsey Ave. BLDG. 447/ Marietta, GA 30060 / 678-569-5704 / http://georgiaguardfamily.org/* 

**The Dog and Cat Sterilization Fund** provides financial support for the sterilization of dogs and cats, as well as education to the public about the healthy benefits of animal sterilization. *DCSF* / 19 Martin Luther King Jr. Drive SW / Atlanta, GA 30334 / 404-656-4914 / <u>http://agr.georgia.gov</u>

**The Saving the Cure Fund** is designed to encourage the donation, collection and storage of stem cells from postnatal tissue and fluid; make such stem cells available for medical research and treatment; promote principled and ethical stem cell research; and to encourage stem cell research with immediate clinical and medical applications.

**Realizing Educational Achievement Can Happen (REACH) Program** provides low-income academically promising students with the academic, social, and financial support needed to graduate from high school, access college, and achieve post-secondary success. *Georgia Student Finance Authority / 2082 East Exchange Place / Tucker, GA 30084 / 770-724-9248 / https://reachga.org/* 

**The Public Safety Memorial Grant Program** administered by the Georgia Student Finance Authority, provides educational aid to children whose parents are/were public safety employees and were disabled or killed in the line of duty, Recipients attend eligible colleges and universities in Georgia. *Georgia Student Finance Authority / 2082 East Exchange Place / Tucker, GA 30084 / 770-724-9248 / www.gafutures.org* 





Georgia Form 500 (Rev. 06/20/19) Individual Income Tax Return Georgia Department of Revenue 2019 (Approved booklet version)	Please print your numbers like this in black or blue ink: 9 8 7 6 5 4 3 2 1 0
Page 1	
Fiscal Year Beginning	
Fiscal Year Ending YOUR DRIVER'S LICENSE/STATE ID	
YOUR FIRST NAME M	MI YOUR SOCIAL SECURITY NUMBER
1.	
LAST NAME (For Name Change See IT-511 Tax Booklet)	) SUFFIX
SPOUSE'S FIRST NAME M	MI SPOUSE'S SOCIAL SECURITY NUMBER
	DEPARTMENT USE ONLY
LAST NAME	SUFFIX
ADDRESS (NUMBER AND STREET or P.O. BOX) (Use 2nd address line 2.	ne for Apt, Suite or Building Number) CHECK IF ADDRESS HAS CHANGED
CITY (Please insert a space if the city has multiple names)	STATE ZIP CODE
3.	
(COUNTRY IF FOREIGN)	
4. Enter your Residency Status with the appropriate number	Residency Status 4.
1. FULL- YEAR RESIDENT 2. PART- YEAR RESIDENT	TO TO 3. NONRESIDENT
Omit Lines 9 thru 14 and use Form 500 Schedule	e 3 if you are a part-year or nonresident filer.
	Filing Status
5. Enter Filing Status with appropriate letter (See IT-511 Ta	
<ul> <li>A. Single B. Married filing joint C. Married filing separate (Spouse's so</li> <li>6. Number of exemptions (Check appropriate box(es) and</li> </ul>	social security number must be entered above) D. Head of Household or Qualifying Widow(er)
7a. Number of Dependents (Enter details on Line 7b, and DO NC	

### ALL PAGES (1-5) ARE REQUIRED FOR PROCESSING

Georgia Form <b>500</b>									
Individual Income Tax Return									
Georgia Department of Revenue									
2019									

Page 2



### YOUR SOCIAL SECURITY NUMBER

7b. Dependents (If you have more than 4 dependents, attach a list of additional de	aepenaents)
--	-------------

First Name, MI.		Last Name
Social Security Number		Relationship to You
First Name, MI.		Last Name
Social Security Number		Relationship to You
First Name, MI.		Last Name
Social Security Number		Relationship to You
First Name, MI.		Last Name
Social Security Number		Relationship to You
If amount on line 8, 9, 10, 13 or 15 is negative,	use the mi	ninus sign (-). Example -3,456.
8. Federal adjusted gross income (From Federal	Eorm 10/1	
	the amount	t on Line 8 is \$40,000 or more, or your gross income is less than your
9. Adjustments from Form 500 Schedule 1 (See		
10. Georgia adjusted gross income (Net total of Li	ne 8 and Li	
11. Standard Deduction (Do not use FEDERAL ST (See IT-511 Tax Booklet)	ANDARD	
	tal	x 1,300= 11b.
Spouse: 65 or over? Blind? c. Total Standard Deduction (Line 11a + Line 1 Use EITHER Line 11c OR Line 12c (Do not wri	1b)	11c.
		ble Income. If you use itemized deductions, you must include Federal Schedule A.
a. Federal Itemized Deductions (Schedule A-	Form 1040)	)) 12a. <b>1</b> 2a. <b>1</b>
b. Less adjustments (See IT-511 Tax Bookle	•t)	
c. Georgia Total Itemized Deductions		
13. Subtract either Line 11c or Line 12c from Line	10; enter b	balance

### ALL PAGES (1-5) ARE REQUIRED FOR PROCESSING

Indiv								
	Page 3 YOUR SOCIAL SECUR							
	Enter the number from Line 6c. Multiply by \$2,700 for filing status A or D or multiply by \$3,700 for filing status B or C	14a.				], 🗌		_ 00
14b.	Enter the number from Line 7a. Multiply by \$3,000	14b.				],[_]	Ц	
14c.	Add Lines 14a. and 14b. Enter total	14c.				],[_]	Ц	
15a.	Income before GA NOL (Line 13 less Line 14c or Schedule 3, Line 14)	15a.	4			],[]	Ц	
15b.	Georgia NOL utilized (cannot exceed Line 15a or the amount after applying the 80% limitation, see IT-511 Tax Booklet for more information)	15b.	4			<u>], </u>	닏┞	
15c.	Georgia Taxable Income (Line 15a less Line 15b)	15c.	4	_,		<u> , _ </u>	닖	
16.	Tax (Use the Tax Table in the IT-511 Tax Booklet)	16.		,		],[]]	Ц	00
17.	Low Income Credit 17a.	17c.						00
18.	Other State(s) Tax Credit (Include a copy of the other state(s) return)	18.				],		00
19.	Credits used from IND-CR Summary Worksheet	19.		,		,		00
20.	Total Credits Used from Schedule 2 Georgia Tax Credits (must be filed electronically)	<b>d</b> 20.		,		,		_
21.	Total Credits Used (sum of Lines 17-20) cannot exceed Line 16	21.		,		],[_]	ЦL	
22.	Balance (Line 16 less Line 21) if zero or less than zero, enter zero	22.		,		,		00
	OME STATEMENT DETAILS Only enter income on which Georgia tax was w Wages/Income. For other income statements complete Line 4 using the income							
11,	or for Form G2-FL enter zero. (INCOME STATEMENT A) (INCOME STATEMENT B)			(INCO	ME STATE	MENT C)		
1.	WITHHOLDING TYPE: 1. WITHHOLDING TYPE:		1. 1	WITHHOLD				
		G2-LP		W-2	G2-		G2-LP	
	1099     G2-FL     G2-RP     1099     G2-FL       EMPLOYER/PAYER FEDERAL     2.     EMPLOYER/PAYER FEDERAL       ID NUMBER (FEIN)     SSN     ID NUMBER (FEIN)     SSN	G2-RP		EMPLOYER D NUMBER			G2-RF	,
3.	EMPLOYER/PAYER STATE WITHHOLDING ID 3. EMPLOYER/PAYER STATE WI	THHOLDING ID	3.	EMPLOYE	R/PAYER S	STATE W	ITHHOL	DING ID
		-	[					

**INCOME STATEMENT DETAILS CONTINUED ON PAGE 4.** 

4. GA WAGES / INCOME

5. GA TAX WITHHELD

00

00

00

00

4. GA WAGES / INCOME

5. GA TAX WITHHELD

00

00

4. GA WAGES / INCOME

GA TAX WITHHELD

5.

Indi	brgia Form 500 vidual Income Tax Return rgia Department of Revenue			200040	5941									
20	Page 4		YOUF	R SOCIAL SE	CURITY	NUME	BER						][	
	(INCOME STATEMENT D)		(INCO	ME STATEME	NT E)				(INCO	ME STATEMI	ENT F)			
1.	WITHHOLDING TYPE:	1.	WITHHOLD	ING TYPE:	_			1.	WITHHOLD	ING TYPE:	_	1		
	W-2 G2-A G2-LP 1099 G2-FL G2-RP		U W-2	G2-A G2-FL	G2-				W-2	G2-A		G2-LI G2-R		
2.	EMPLOYER/PAYER FEDERAL	2.	EMPLOYER	PAYER FED	ERAL	- NI		2.	EMPLOYER	R/PAYER FED	ERAL			
	ID NUMBER (FEIN)			R (FEIN)	SSN					R (FEIN)	SSN		٦	
2	EMPLOYER/PAYER STATE WITHHOLDING ID	2						3.		R/PAYER ST		тиноі		GID
3.		3.	EMPLOYER	R/PAYER STA		IOLDI		з.	EMPLOTE	R/PATER 31				GID
4.	GA WAGES / INCOME	4.	GA WAGES	S / INCOME			_	4.	GA WAGE	S / INCOME				
Ë						٦٢		Ē						00
5.	GA TAX WITHHELD	5.	GA TAX WI	THHELD	كا الصكار			5.	GA TAX WI	THHELD	,			
Г						٦Г	00							00
	المعادلين المعا المعار المعا المعار المعا ا				76								_	
23.	Georgia Income Tax Withheld on Wages (Enter Tax Withheld Only and include W-2s a					23.				LLL,			,	00
24.	Other Georgia Income Tax Withheld (Must include G2-A, G2-FL, G2-LP and/or G2					24.	Ē							00
25.	Estimated Tax paid for 2019 and Form IT-	560				25.	L		$\Box, \Box$	LLL,	,Ш			00
26.	Schedule 2B Refundable Tax Credits (can electronically)					26.			,					-
27.	Total prepayment credits (Add Lines 23, 24	1, 2	5 and 26)			27.	L		$\Box, \Box$	LLL,				00
28.	If Line 22 exceeds Line 27, subtract Line 2 balance due					28.	- Г	٦	$\Box$ . $\Box$				٦	00
29.	If Line 27 exceeds Line 22, subtract Line 2					29.	Ē	٦					٦	
00	overpayment						- 2	4			Н		4	
30.	Amount to be credited to 2020 ESTIMA	IEU	) IAX			30.	L				, 🛄			. 00
31.	Georgia Wildlife Conservation Fund (No gi	ft o	f less than	\$1.00)	3	31.					$\Box$			. 00
32.	Georgia Fund for Children and Elderly (No	gif	t of less th	an \$1.00)	3	32.							٦	00
33.	Georgia Cancer Research Fund (No gift o	fle	ss than \$1	.00)	:	33.							٦	00
34.	Georgia Land Conservation Program (No	gift	of less tha	n \$1.00)		34.		 7777					٦	00
35.	Georgia National Guard Foundation (No gif	t of	less than	\$1.00)	3	35.		 			H		4	
	Dog & Cat Sterilization Fund (No gift of les			-		36.		<u> </u>					╡	
	Saving the Cure Fund (No gift of less tha		-			37.	E	<u>     </u> 	<u>                                     </u>				╡	
			-					///// 	<u>                                     </u>		닏			-
38.	Realizing Educational Achievement Can Happ (No gift of less than \$1.00)	en	(REACH) P	rogram	:	38.				LLL,				00

ALL PAGES (1-5) ARE REQUIRED FOR PROCESSING

Individual Income Tax Return	05951
Page 5 YOUR SOCIAL	
39. Public Safety Memorial Grant (No gift of less than \$1.00)	
40. Form 500 UET (Estimated tax penalty) 500 UET exception at	ached 40.
41. (If you owe) Add Lines 28, 31 thru 40 MAKE CHECK PAYABLE TO GEORGIA DEPARTMENT OF REV	ENUE. 41.
Amount Due Mail To: GEORGIA DEPARTMENT OF REVENUE PROCESSING CENTER, PO BOX 740399 ATLANTA, GA 30374-0399	
42. (If you are due a refund) Subtract the sum of Lines 30 thru 40 from L THIS IS YOUR REFUND	
If you do not enter Direct Deposit information or if you are a 42a. Direct Deposit (U.S. Accounts Only)	first time filer you will be issued a paper check.
Type: Checking Routing Number	Refund Due Mail To: GEORGIA DEPARTMENT OF REVENUE
Savings Account Number	PROCESSING CENTER, PO BOX 740380 ATLANTA, GA 30374-0380
Georgia Public Revenue Code Section 48-2-31 stipulates that taxes shall be paid in law	ayer(s), this declaration is based on all information of which the preparer has knowledge. ful money of the United States, free of any expense to the State of Georgia.
Taxpayer's Phone Number	I authorize DOR to discuss this return with the named preparer.
By providing my e-mail address I am authorizing the Georgia Department of Reven my account(s). Taxpayer's E-mail Address	ue to electronically notify me at the below e-mail address regarding any updates to
Signature of Preparer Name of Preparer Other Than Taxpayer	Preparer's Phone Number Preparer's FEIN
Preparer's Firm Name	Preparer's SSN/PTIN/SIDN

ALL PAGES (1-5) ARE REQUIRED FOR PROCESSING

Georgia Form <b>500</b> Rev. (06/20/19) Schedule 1 Adjustments to Income	2007205911	Schedule 1 Page 1
2010	JR SOCIAL SECURITY NUMBER	
SCHEDULE 1 ADJUSTMENTS to INCOME BASED on (	GEORGIA LAW	See IT-511 Tax Booklet
ADDITIONS to INCOME		
1. Interest on Non-Georgia Municipal and State Bonds	1.	
2. Lump Sum Distributions	2.	
3. Reserved		
4. Net operating loss carryover deducted on Federal return	4.	
5. Other (Specify)	5.	
6. Total Additions (Enter sum of Lines 1-5 here)	6.	
7. Retirement Income Exclusion (See IT-511 Tax Booklet) Con	nplete Schedule 1, page 2 if clain	ning Retirement Income Exclusion.
a. Self: Date of Birth Date of Disability:	Type of Disability:	
		7a
b. Spouse: Date of Birth Date of Disability:	Type of Disability:	
		7b 00
8. Social Security Benefits (Taxable portion from Federal retur	n) 8.	
9. Path2College 529 Plan		
10. Interest on United States Obligations (See IT-511 Tax Book	let ) 10.	
11. Reserved	11.	
12. Other Adjustments (Specify)		
Adjustment	Amount	
Total		
<ol> <li>Total Subtractions (Enter sum of Lines 7-12 here)</li> <li>Net Adjustments (Line 6 less Line 13). Enter Net Total here</li> </ol>		
Line 9 of Page 2 (+ or -) of Form 500 or 500X		







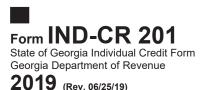
YOUR SOCIAL SECURITY NUMBER

SCHEDULE 1 RETIREMENT INCOME EXCLUSION See IT-511 Tax Booklet (SPOUSE) (TAXPAYER) Salary and wages..... 00 1. 00 00 2. Other Earned Income (Losses)..... 00 00 00 Total Earned Income..... 3. 00 Maximum Earned Income..... 0 0 0 00 4 0 0 0 4. 4 5. Smaller of Line 3 or 4; if zero or less, enter 00 00 zero ..... 00 6. Interest Income..... 00 Dividend Income ..... 7. 00 00 8. Alimony..... 00 00 9. Capital Gains (Losses)..... 00 00 Other Income (Losses)..... 00 10. 00 (See IT-511 Tax Booklet) 11. Taxable IRA Distributions..... 00 00 12. Taxable Pensions ..... 00 00 13. Rental, Royalty, Partnership, S Corp, etc. Income (Losses).....(See IT-511 Tax Booklet) 00 00 14. Total of Lines 6 through 13; if zero or less, enter zero ..... 00 00 15. Add Lines 5 and 14 ..... 00 00 00 16. Maximum Allowable Exclusion\* ..... 00 17. Smaller of Lines 15 and 16; enterhere and on 00 00 Form 500, Schedule 1, Lines 7A & B.....

\*If age 62-64 or less than age 62 and permanently disabled enter \$35,000, or if age 65 or older enter \$65,000.

Georgia Form 500 Rev. (06/20/19) Schedule 3 Part-Year Nonresident	2007405911		Schedule 3 Page 1
2019 (Approved booklet version)	YOUR SOCIAL SECURITY NUMBE TUSE LINES 9 THRU 14 OF PAGES 2 and		L L L L L L L M 500 or 500X
SCHEDULE 3 COMPUTATION OF GEORGIA TA	AXABLE INCOME FOR ONLY PART-YEAR RES dent is taxable but other state(s) tax credit may ap	IDENTS	AND NONRESIDENTS.
FEDERAL INCOME AFTER GEORGIA ADJUSTMENT (COLUMN A)	INCOME NOT TAXABLE TO GEORGIA (COLUMN B)		GEORGIA INCOME (COLUMN C)
1. WAGES, SALARIES, TIPS, etc	1. WAGES, SALARIES, TIPS, etc	1.	WAGES, SALARIES, TIPS, etc
2. INTEREST AND DIVIDENDS	2. INTEREST AND DIVIDENDS	2.	INTEREST AND DIVIDENDS
3. BUSINESS INCOME OR (LOSS)	3. BUSINESS INCOME OR (LOSS)	3.	BUSINESS INCOME OR (LOSS)
4. OTHER INCOME OR (LOSS)	4. OTHER INCOME OR (LOSS)	4.	OTHER INCOME OR (LOSS)
5. TOTAL INCOME: TOTAL LINES 1 THRU 4	5. TOTAL INCOME: TOTAL LINES 1 THRU 4	5.	TOTAL INCOME: TOTAL LINES 1 THRU 4
		비니	
6. TOTAL ADJUSTMENTS FROM FORM 1040	6. TOTAL ADJUSTMENTS FROM FORM 1040		TOTAL ADJUSTMENTS FROM FORM 1040
		끼니	
7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1	7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1		TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1
		끼니	
8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7	8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7		ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7
9. RATIO: Divide Line 8, Column C by Line	8, Column A. Enter percentage		Not to exceed 100%
10a. Itemized 🔲 or Standard Deduction 🔲	(See IT-511 Tax Booklet) 10	a.	
10b. Additional Standard Deduction		F	$\square\square\square\square\square\square\square\square$
Self: 65 or over? Blind? Spouse: 65 of 11. Personal Exemption from Form 500 (S		D.	
11a. Enter the number on Line 6c. from Forn filing status A or D or multiply by \$3,700		a.	
11b. Enter the number on Line 7a. from Form	Ŭ 🗖	).	
12. Total Deductions and Exemptions: Add	Lines 10a, 10b, 11a, and 11b 12.		
13. Multiply Line 12 by Ratio on Line 9 and e	nter result 13		
14. Income before GA NOL: Subtract Line <sup>7</sup> Enter here and on Line 15a, Page 3 of F			





(Approved booklet version)





YOUR SOCIAL SECURITY NUMBER

		 -	

### Include with Form 500 or 500X, if this schedule is applicable.

SCHEDULE 201 Disabled Person Home Purchase or Retrofit Credit - Tax Credit 201

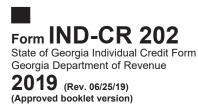
### **Disabled Person Home Purchase or Retrofit Credit - Tax Credit 201**

O.C.G.A. § 48-7-29.1 provides a disabled person credit equal to the lesser of \$500 per residence or the taxpayer's income tax liability for the purchase of a new single-family home that contains all of the accessibility features listed below. It also provides a credit equal to the lesser of the cost or \$125 to retrofit an existing single-family home with one or more of these features. The disabled person must be the taxpayer or the taxpayer's spouse if a joint return is filed. Qualified features are:

- One no-step entrance allowing access into the residence.
- Interior passage doors providing at least a 32-inch-wide opening.
- Reinforcements in bathroom walls allowing installation of grab bars around the toilet, tub, and shower, where such facilities are provided.
- Light switches and outlets placed in accessible locations.

To qualify for this credit, the disabled person must be permanently disabled and have been issued a permanent parking permit by the Department of Revenue or have been issued a special permanent parking permit by the Department of Revenue. This credit can be carried forward 3 years. For more information, see Regulation 560-7-8-.44.

1.	Credit remaining from previous years	1.	00
2.	Purchase of a home that contains all four accessibility features <b>OR</b> total of accessibility features added to retrofit a home (up to \$125 per feature) cannot exceed \$500 per residence.	2.	00
3.	Credit used this tax year (enter here and include on IND-CR Summary Worksheet Line 1)	3.	_,00
4.	Potential carryover to next tax year (Line 1 plus Line 2 less Line 3)	4.	00





2008105913



YOUR SOCIAL SECURITY NUMBER

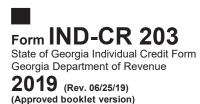
### - Include with Form 500 or 500X, if this schedule is applicable. -

SCHEDULE 202 Child and Dependent Care Expense Credit - Tax Credit 202

### Child and Dependent Care Expense Credit - Tax Credit 202

O.C.G.A. § 48-7-29.10 provides taxpayers with a credit for qualified child & dependent care expenses. The credit is a percentage of the credit claimed and allowed under Internal Revenue Code § 21 and claimed by the taxpayer on the taxpayer's Federal income tax return. This credit cannot be carried forward. The credit is computed as follows:

1. Amount of child & dependent care expense <i>credit</i> claimed on Federal Form 1040.	1,00
2. Georgia allowable rate	2. <b>30</b> %
3. Allowable Child & Dependent Care Expense Credit (Line 1 x .30)	3.
4. Credit used this tax year (enter here and include on IND-CR Summary Worksheet Line 2)	4







YOUR SOCIAL SECURITY NUMBER

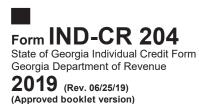
# - Include with Form 500 or 500X, if this schedule is applicable ..-

SCHEDULE 203 Georgia National Guard/Air National Guard Credit - Tax Credit 203

### Georgia National Guard/Air National Guard Credit - Tax Credit 203

O.C.G.A. § 48-7-29.9 provides a tax credit for Georgia residents who are members of the National Guard or Air National Guard and are on active duty full time in the United States Armed Forces, or active duty training in the United States Armed Forces for a period of more than 90 consecutive days. The credit shall be claimed and allowed in the year in which the majority of such days are served. In the event an equal number of consecutive days are served in two calendar years, then the exclusion shall be claimed and allowed in the year in which the ninetieth day occurs. The credit shall apply with respect to each taxable year in which such member serves for such qualifying period of time. The credit cannot exceed the amount expended for qualified life insurance premiums nor the taxpayer's income tax liability. Qualified life insurance premiums are the premiums paid for insurance coverage through the service member's Group Life Insurance Program administered by the United States Department of Veterans Affairs. Any unused tax credit is allowed to be carried forward to the taxpayer's succeeding year's tax liability.

1. Credit remaining from previous years	1,,00
2. Enter amount of qualified life insurance premiums	2
3. Credit used this tax year (enter here and include on IND-CR Summary Worksheet Line 3)	3.
4. Carryover to next tax year (Line 1 plus Line 2 less Line 3)	4





Page

2008305913

YOUR SOCIAL SECURITY NUMBER

# - Include with Form 500 or 500X, if this schedule is applicable. -

SCHEDULE 204 Qualified Caregiving Expense Credit - Tax Credit 204

### **Qualified Caregiving Expense Credit - Tax Credit 204**

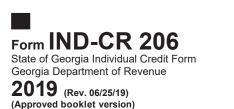
O.C.G.A. § 48-7-29.2 provides a qualified caregiving expense credit equal to 10 percent of the cost of qualified caregiving expenses for a qualifying family member. The credit cannot exceed \$150. Qualified services include Home health agency services, personal care services, personal care attendant services, homemaker services, adult day care, respite care, or health care equipment and other supplies which have been determined by a physician to be medically necessary. Services must be obtained from an organization or individual not related to the taxpayer or the qualifying family member.

The qualifying family member must be at least age 62 or been determined disabled by the Social Security Administration. A qualifying family member includes the taxpayer or an individual who is related to the taxpayer by blood, marriage or adoption.

Qualified caregiving expenses do not include expenses that were subtracted to arrive at Georgia net taxable income or for which amounts were excluded from Georgia net taxable income. There is no carryover or carry-back available. The credit cannot exceed the taxpayer's income tax liability. For more information, see Regulation 560-7-8-.43.

#### **Qualifying Family Member Name:**

Name:						
SS#						
Age, if 62 or over						
Additional Qualifying Family Member Name, if applicable:						
Name:						
SS#						
Age, if 62 or over						
1. Qualified caregiving expenses	1.		],[			00
2. Percentage limitation	2.					10%
3. Line 1 multiplied by Line 2	3.		],[			00
4. Maximum credit	4.		1	5	0	00
5. Enter the lesser of Line 3 or Line 4	5.		],[			00
6.Credit used this tax year (enter here and include on IND-CR Summary Worksheet Line 4)	6.		],[			00





YOUR SOCIAL SECURITY NUMBER

Page

## - Include with Form 500 or 500X, if this schedule is applicable. -

SCHEDULE 206 Disaster Assistance Credit - Tax Credit 206

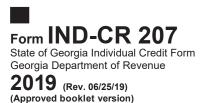
#### **Disaster Assistance Credit - Tax Credit 206**

O.C.G.A. § 48-7-29.4 provides for a credit for a taxpayer who receives disaster assistance during a taxable year from the Georgia Emergency Management and Homeland Security Agency or the Federal Emergency Management Agency. The amount of the credit is equal to \$500 or the actual amount of the disaster assistance, whichever is less. The credit cannot exceed the taxpayer's income tax liability. Any unused tax credit can be carried forward to the succeeding years' tax liability but cannot be carried back to the prior years' tax liability. The approval letter from the disaster assistance agency must be enclosed with the return.

The following types of assistance qualify:

- Grants from the Department of Human Services' Individual and Family Grant Program.
- Grants from GEMA/HS and/or FEMA.
- Loans from the Small Business Administration that are due to disasters declared by the President or Governor.

Disaster assistance agency		
1. Credit remaining from previous years	1.	
2. Date assistance was received	2.	
3. Amount of the disaster assistance received	3.	
4. Maximum credit	4.	500.00
5. Enter the lesser of Line 3 or Line 4	5.	
6. Credit used this tax year (enter here and include in IND-CR Summary Worksheet Line 6)	6.	,00
7. Carryover to next tax year (Line 1 plus Line 5 less Line 6)	7.	.00





YOUR SOCIAL SECURITY NUMBER

2008605913



# - Include with Form 500 or 500X, if this schedule is applicable. -

SCHEDULE 207 Rural Physicians Credit - Tax Credit 207

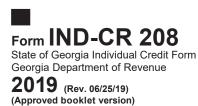
#### **Rural Physicians Credit - Tax Credit 207**

O.C.G.A. § 48-7-29 provides for a \$5,000 tax credit for rural physicians. The tax credit may be claimed for not more than five years. There is no carryover or carry-back available. The credit cannot exceed the taxpayer's income tax liability. In order to qualify, the physician must meet the following conditions:

- 1. The physician must have started working in a rural county after July 1, 1995. If the physician worked in a rural county prior to that date, a period of at least three years must have elapsed before the physician returns to work in a rural county.
- 2. The physician must practice and reside in a rural county. For taxable years beginning on or after January 1, 2003, a physician qualifies for the credit if they practice in a rural county and reside in a county contiguous to a rural county. A rural county is defined as one with 65 or fewer persons per square mile according to the United States Decennial Census of 1990 or any future such census. For taxable years beginning on or after January 1, 2012, the United States Decennial Census of 2010 is used (see regulation 560-7-8-.20 for transition rules). A listing of rural counties for purposes of the rural physicians credit may be obtained at the following web page: <u>dor.georgia.gov</u>
- 3. The physician must be licensed to practice medicine in Georgia, primarily admit patients to a rural hospital, and practice in the fields of family practice, obstetrics and gynecology, pediatrics, internal medicine, or general surgery. A rural hospital is defined as an acute-care hospital located in a rural county that contains 80 or fewer beds. For taxable years beginning on or after January 1, 2003, a rural hospital is defined as an acute-care hospital located in a rural county that contains 100 or fewer beds. For more information, see Regulation 560-7-8-.20.

#### Only enter the information for the taxpayer and/or the spouse if they are a rural physician.

Taxpayer	Spouse
1. County of residence	1. County of residence
2. County of practice	2. County of practice
3. Type of practice	3. Type of practice
4. Date started working as a rural physician	4. Date started working as a rural physician
5. Number of hospital beds in the rural hospital	5. Number of hospital beds in the rural hospital
6. Rural physicians credit, enter \$5,000 per rural physician	n
7. Credit used this tax year (enter here and include on IN Summary Worksheet Line 7)	







YOUR SOCIAL SECURITY NUMBER

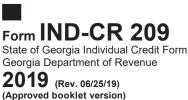
# - Include with Form 500 or 500X, if this schedule is applicable. -

SCHEDULE 208 Adoption of a Foster Child Credit - Tax Credit 208

### Adoption of a Foster Child Credit - Tax Credit 208

Georgia Code Section 48-7-29.15 provides an income tax credit for the adoption of a qualified foster child. The amount of the credit is \$2,000 per qualified foster child per taxable year, commencing with the year in which the adoption becomes final, and ending in the year in which the adopted child attains the age of 18. This credit applies to adoptions occurring in the taxable years beginning on or after January 1, 2008. Any unused credit can be carried forward until used.

1. Credit remaining from previous years	1.	
2. Enter \$2,000 per qualified foster child	2.	
3. Credit used this tax year (enter here and include on IND-CR Summary Worksheet Line 8)	3.	
4. Carryover to next tax year (Line 1 plus Line 2 less Line 3)	4.	







YOUR SOC

YOUR SOCIAL SECURITY NUMBER

# - Include with Form 500 or 500X, if this schedule is applicable. -

SCHEDULE 209 Eligible Single-Family Residence Tax Credit - Tax Credit 209

#### Eligible Single-Family Residence Tax Credit - Tax Credit 209

O.C.G.A. § 48-7-29.17 provides taxpayers a credit for the purchase of an eligible single-family residence located in Georgia. An eligible single-family residence is a single-family structure (including a condominium unit as defined in O.C.G.A.§ 44-3-71) that is occupied for residential purposes by a single family, that is:

a) Any residence (including a new residence, one occupied at the time of sale, or a previously occupied residence) that was for sale prior to May 11, 2009 and that remained for sale after May 11, 2009; or

b) A residence with respect to which a foreclosure event has taken place and which is owned by the mortgagor or the mortgagor's agent; or

c) An owner-occupied residence with respect to which the owner's acquisition indebtedness was in default on or before March 1, 2009. Acquisition indebtedness is debt incurred in acquiring, constructing, or substantially improving a qualified residence and which is secured by such residence. Refinanced debt is acquisition debt if at least a portion of such debt refinances the principal amount of existing acquisition indebtedness.

A taxpayer is allowed the tax credit for a purchase of one eligible single-family residence made between June 1, 2009 and November 30, 2009. The credit amount is the lesser of 1.2 percent of the purchase price of the eligible single-family residence or \$1,800.00. The amount of the tax credit that may be claimed and allowed in a single tax year cannot exceed the lesser of 1/3 of the credit or the taxpayer's income tax liability. Any unused tax credit can be carried forward but cannot be carried back.

The taxpayer must have claimed the credit in 2009 in order to claim the unused credit below.

1. Total credit. (Enter amount from 2009 IND-CR, Part 9, Line 5.)	1
2. Maximum allowed per year	2. <b>33.33</b> %
3. Maximum credit allowed, (multiply Line 1 by Line 2)	3.
4. Enter unused credit (Total credit less amounts used in previous years)	4
5. Credit allowed, lesser of Line 3 or Line 4	5
6. Credit used this tax year (enter here and include on IND-CR Summary Worksheet Line 9)	6
7. Carryover to next tax year (Line 4 less Line 6)	7







2019 (Rev. 06/25/19) (Approved booklet version)

YOUR SOCIAL SECURITY NUMBER

# - Include with Form 500 or 500X, if this schedule is applicable. -

SCHEDULE 212 Community Based Faculty Preceptor Tax Credit - Tax Credit 212

#### Community Based Faculty Preceptor Tax Credit - Tax Credit 212

O.C.G.A. § 48-7-29.22 provides an income tax credit for a community based faculty preceptor that conducts a preceptorship rotation(s). This tax credit is applicable for taxable years beginning on or after January 1, 2019 and ending on or before December 31, 2023.

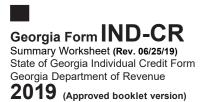
For a community based faculty preceptor who is a physician as defined in O.C.G.A. § 43-34-21, the credit shall accrue on a per preceptorship rotation basis in the amount of \$500 for the first, second, or third preceptorship rotation and \$1,000 for the fourth, fifth, sixth, seventh, eighth, ninth, or tenth preceptorship rotation completed in one calendar year. For a community based faculty preceptor who is an advanced practice registered nursed as defined in O.C.G.A. § 43-26-3 or a physician assistant as defined in O.C.G.A. § 43-34-102, the credit shall accrue on a per preceptorship rotation basis in the amount of \$375 for the first, second, or third preceptorship rotation and \$750 for the fourth, fifth, sixth, seventh, eighth, ninth, or tenth preceptorship rotation completed in one calendar year. An individual shall not accrue credit for more than ten preceptorship rotations in one calendar year. The credit cannot be carried forward and cannot be carried back. Certification from the Area Health Education Centers Program Office at Augusta University must be enclosed with the return.

By filing this form I certify that I did not receive payment during such tax year from any source for the training of a medical student, advanced practice registered nurse student, or physician assistant student.

. C	ommunity Based Faculty Preceptor Tax Credit for a <b>First through Third Rotation</b>			
	1. Number of Rotations (enter no more than 3) (not to exceed \$1,500)	x 500.00	1.	00
	Fourth through Tenth Rotation			
	2. Number of Rotations (enter no more than 7) (not to exceed \$7,000)	x1,000.00	2.	, 00
	3. Add Line 1 and Line 2, Current Year Credit Amou		3.	

B. Community Based Faculty Preceptor Tax Credit for an advanced practice registered nurse or physician assistant. **First through Third Rotation** 

1. Number of Rotations (enter no more than 3) (not to exceed \$1,125)	x 375.00	1.	00
Fourth through Tenth Rotation			
2. Number of Rotations (enter no more than 7) (not to exceed \$5,250)	<b>X 7 5 0 0</b>	2.	00
3 Add Line 1 and Line 2 Current Year Credit Am		3	







YOUR SOCIAL SECURITY NUMBER

- Please print your numbers like this in black or blue ink: 9 8 7 6 5 4 3 2 1 0
- 1. Only Georgia Individual Tax Credits (series 200) are claimed on Form IND-CR supporting schedules (IND-CR 201 through 212).
- 2. Enter the amount of credit used for the current tax year from each applicable IND-CR schedules on Lines 1-10.
- 3. If there is a credit remaining from previous years eligible for carryover for this tax year, the supporting IND-CR schedule must be completed even if the credit is not used for this tax year.
- 4. The total of Line 11 should be entered on Form 500 or Form 500X, Page 3, Line 19.
- 5. All applicable IND-CR schedules must be attached to Form 500 or Form 500X for the credit(s) to be allowed on the return.

Note: The other state(s) tax credit and low income credit are claimed directly on Form 500. Series 100 Georgia tax credits are claimed on Form 500 Schedule 2.

The total credit amount used from the low income credit, the other state(s) tax credit, all IND-CR schedules, and all Schedules 2s cannot exceed the tax liability listed on Line 16 of Form 500 or 500X.

		_	 				_
1. Disabled Person Home Purchase or Retrofit Credit (IND-CR 201, Line 3)	1.			, 🗌			0
2. Child and Dependent Care Expense Credit (IND-CR 202, Line 4)	2.			, 🗆			)0
3. Georgia National Guard /Air National Guard Credit (IND-CR 203, Line 3)	3.			$, \square$			)0
4. Qualified Caregiving Expense Credit (IND-CR 204, Line 6)	4.						)0
5. Reserved	5			Í			
6. Disaster Assistance Credit (IND-CR 206, Line 6)	0.			,			)0
						) - C 1 6	
7. Rural Physicians Credit (IND-CR 207, Line 7)		Н		,	ŀ	) - L' 1  7	2
8. Adoption of a Foster Child Credit (IND-CR 208, Line 3)	8.	님		,		- Ľ   6	<u> </u>
9. Eligible Single-Family Residence Credit (IND-CR 209, Line 6)	9.	님		,		]. Ľ 1 G	끼
10. Community Based Faculty Preceptor Credit (IND-CR 212, Lines 3A and 3B)	10.	님				]. [ 1 [	낀
11. Total of Lines 1 through 10 (Enter here and on Form 500, Page 3 Line 19)	11.			,L_		].[	0

All applicable IND-CR (201-212) Schedules must be attached to Form 500 or Form 500X

Keep IND-CR Summary Worksheet for your records.



	9	8	7	6	5	4	З	2	1	0
Georgia Form 500EZ (Rev. 06/20/19) Short Individual Income Tax Return YOUR SSN		٦٢	זר	٦.	ĥ	Ξ.	П	Ы		
Georgia Department of Revenue TOUR SSN 2019 (Approved booklet version)	N#	솪		4	H		님	님		
SPOUSE'S SSN	1#									
Page 1 STATE YOUR DRIVER'S LICENSE/STATE ID										
YOUR FIRST NAME MI LAST NAME (For Name Change See IT-511 T	Tax Bo	ookle	et)					SU	FIX	
SPOUSE'S FIRST NAME MI LAST NAME	_	-			_	_	_	SU	FFIX	_
	_									
ADDRESS (NUMBER AND STREET or P.O. BOX) (Use 2nd address line for Apt, Suite or Building Number)	СН	IECK	IF AD	DRES	S CHA	NGED				
		4								
							DEPAR	TMENT	USE (	ONLY
CITY (Please insert a space if the city has multiple names) STATE ZIP CODE		_	-	_	_	1				
(COUNTRY IF FOREIGN)		Ι								
Use Federal Adjusted Gross Income, NOT Federal Taxable Income, on Line 1 below									_	_
1. Adjusted Gross Income from Federal Form 1040 (Cannot exceed \$99,999 for Line 1)				1.		_,[				00
2. If your filing status is single, enter \$7,300.00, married filing joint, enter \$13,400.00				2.		],[			].	00
				- [	٦r	٦ï		٦٢	٦	00
3. Subtract Line 2 from Line 1. If Line 2 is larger than Line 1, enter zero				3.	۲ř	-1"	۲ř	۲ř	۲.	
4. Find the tax on the amount on Line 3. (Use the Tax Table in the IT-511 Tax Booklet)				4.		   	=	╡╎╴	ť	
5. Low income tax credit. (Not allowed if you are claimed as a dependent on another return) 5a.		5b		JL,	<u> </u>	5c.	_!	<u>_</u>	Ę.	00
6. Subtract Line 5c from Line 4. If zero or less than zero, enter zero				6.		_,[				00
7. Georgia income tax withheld (Enter tax withheld only and include W-2s and 1099s)				7.		٦.[			٦.	00
<ol> <li>8. If Line 6 is larger than Line 7, subtract Line 7 from Line 6. THE AMOUNT OF TAX YOU OWE</li> </ol>				8.	7	٦ï	7	7	٦	00
				- ř	-	37	=;;	ᆊ	4.	
9. If Line 7 is larger than Line 6, subtract Line 6 from Line 7. THE AMOUNT OF YOUR OVERPAYMENT	I			9.	╡┝	╡╬	=	닉뷰	÷	
10. Georgia Wildlife Conservation Fund (No gift less than \$1.00)			1	).		,_			<u>-</u> .	00
11. Georgia Fund for Children and Elderly (No gift less than \$1.00)			1	1.		<u>_</u> ,[				00
12. Georgia Cancer Research Fund (No gift less than \$1.00)			1	,		٦Ì		٦٢	٦.	00
				Ē	٦ř	77	٦ř	٦ř	٦	
13. Georgia Land Conservation Program (No gift less than \$1.00)			1	3. L	ᅻ┝	J,L ¬\ r	╡╎	井	4.	
14. Georgia National Guard Foundation (No gift less than \$1.00)			1	4.	ᆜĻ	ᅴᆡ	ЦĻ	ᆜᆝ	<b>-</b>  -	
15. Dog and Cat Sterilization Fund (No gift less than \$1.00)			1	5.		_,				00
16. Saving the Cure Fund (No gift less than \$1.00)			1	a		],[				00
SIGNATURES ARE REQUIRED ON PAGE 2 OF THIS F										



Georgia Form 500 <b>EZ</b>		205921	
Short Individual Income Tax Retu Georgia Department of Revenue			
2019	YOUR SOCI		
Page 2			
17. Realizing Educational Achie	evement Can Happen (REACH) Program <b>(</b>	No gift less than \$1.00)	17
18. Public Safety Memorial Gra	nt (No gift less than \$1.00)		18
19. Add Lines 10 thru Line 18, e	enter total here		19
	Line 19. Complete and mail 525-TV with		
Make check for this amou Amount Due Mail To: GEORGIA DEPARTMENT PROCESSING CENTER, F ATLANTA, GA 30374-0399	PO BOX 740399	NT OF REVENUE	20
21. (If you are due a refund) S	Subtract Line 19 from Line 9. THIS IS YO	UR REFUND	21.
If you do not enter Direct Deposit	information or if you are a first time filer you		
21a. Direct Deposit (For U.S. Acco	ounts Only) Routing	1	Refund Due Mail To:
Type: Checking 🔲 Savings 🔲	Number		GEORGIA DEPARTMENT OF REVENUE
	Account Number		PROCESSING CENTER, PO BOX 740380 ATLANTA, GA 30374-0380
belief, it is true, correct and complet		er(s), this declaration is based on a	tatements) and to the best of my/our knowledge and all information of which the preparer has knowledge. ee of any expense to the State of Georgia.
Date		Date	
Taxpayer's Phone Numbe			this return with the named preparer.
	am authorizing the Georgia Department of Reve		
my account(s).	an autorizing the Georgia Department of New	enue to electronically notify me at t	the below e-mail address regarding any updates to
Taxpayer's E-mail Address		enue to electronically notify me at t	the below e-mail address regarding any updates to
			the below e-mail address regarding any updates to
			the below e-mail address regarding any updates to
Taxpayer's E-mail Address			
	5 5 		s Phone Number
Taxpayer's E-mail Address	5 5 	Preparer's	s Phone Number
Taxpayer's E-mail Address	5 5 	Preparer's Preparer's	s Phone Number

PLEASE COMPLETE INCOME STATEMENT DETAILS ON PAGE 3.

# PAGES (1-3) ARE REQUIRED FOR PROCESSING



# Georgia Form 500**EZ**

Short Individual Income Tax Return Georgia Department of Revenue





INCOME STATEMENT DETAILS Only enter income on which Georgia tax was withheld. Enter information from W-2s and 1099s in the section below.													
(INCOME STATEMENT A)		(INCOME STATEMENT B)		(INCOME STATEMENT C)									
1. WITHHOLDING TYPE: W-2 1099	1.	WITHHOLDING TYPE: W-2 1099	1.	WITHHOLDING TYPE: W-2 1099									
2. EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN) SSN	2.	EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN) SSN	2.	EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN) SSN									
3. EMPLOYER/PAYER STATE WITHHOLDING ID	3.	EMPLOYER/PAYER STATE WITHHOLDING ID	3.	EMPLOYER/PAYER STATE WITHHOLDING ID									
4. GA WAGES / INCOME	4.	GA WAGES / INCOME	4.	GA WAGES / INCOME									
5. GA TAX WITHHELD	5.	GA TAX WITHHELD	5.	5. GA TAX WITHHELD									
(INCOME STATEMENT D)		(INCOME STATEMENT E)		(INCOME STATEMENT F)									
1. WITHHOLDING TYPE: W-2 1099	1.	WITHHOLDING TYPE: W-2 1099	1	WITHHOLDING TYPE: W-2 1099									
		WITHHOLDING TYPE: W-2 1099	1.										
2. EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN) SSN	2.	EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN) SSN	1. 2.										
		EMPLOYER/PAYER FEDERAL		EMPLOYER/PAYER FEDERAL									
ID NUMBER (FEIN)	2. 3.	EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN)	2.	EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN)									

#### YOU MAY USE FORM 500EZ IF:

- Your filing status is single or married filing joint and you do not claim any exemptions other than yourself or yourself and your spouse.
- Your income does not exceed \$99,999 and you do not itemize deductions.
- You are a full-year Georgia resident.
- You had wages, salaries, tips, dividends, and interest income only. Do not use this form if you paid or are claiming a credit of estimated tax
- *or the timber tax credit.* You do not have any adjustments to Federal Adjusted Gross Income.

#### WHEN COMPLETING YOUR RETURN PLEASE REMEMBER TO:

- Print or type name(s), address and social security number(s).
- Keep numbers inside boxes.
- Do not use dollar signs, commas or decimals. Round off figures for easier computations. These have been preprinted for your convenience.
- Sign and date your return. See IT-511 Tax Booklet for signature requirements.



#### This amount should be placed on Line 16, Form 500 or Line 4, Form 500EZ GEORGIA INCOME TAX TABLE

		GEORGIA INCOME TAX																						
50	ic, Form 0 or 8. Form		Married		Line 15c, Form 500 or			Married		or Line	Line 15c, Form 500 or Line 3, Form 500EZ		Married		or Line	Form 500 3, Form		Married		or Line			Married	
	0EZ		Filing Jointly or	Married	Line 3, Fo	orm 500EZ		Filing Jointly or	Married	50	DEZ		Filing Jointly or	Married	50	0EZ		Filing Jointly or	Married	500	EZ		Filing Jointly or	Married
At Least	But Less Than	Single	Head of House- hold	Filing Sepa- rately	At Least	But Less Than	Single	Head of House- hold	Filing Sepa- rately	At Least	But Less Than	Single	Head of House- hold	Filing Sepa- rately	At Least	But Less Than	Single	Head of House- hold	Filing Sepa- rately	At Least	But Less Than	Single	Head of House- hold	Filing Sepa- rately
		Single		Tately	7,000					14,000					21,000					28,000				
\$0 100	100 200	0 2	0 2	0 2	7,000 7,100	7,100 7,200	233 239	193 198	288 294	14,000 14,100	14,100 14,200	635 641	573 579	690 696		21,100 21,200	1,038 1,044	975 981	1,093 1,099	28,000 28,100		1,440 1,446	1,378 1,384	1,495 1,501
200	300	3	3	3	7,200	7,300	244	203	299	14,200	14,300	647	584	702		21,200	1,049	987	1,104	28,200		1,452	1,389	1,507
300	400	4	4	4	7,300	7,400	250	208	305	14,300	14,400	653	590	708		21,400	1,055	993	1,110		28,400	1,458	1,395	1,513
400 500	500 600	5 6	5 6	5 6	7,400 7,500	7,500 7,600	256 262	213 218	311 317	14,400 14,500	14,500 14,600	658 664	596 602	713 719		21,500 21,600	1,061 1,067	998 1,004	1,116 1,122	28,400 28,500		1,463 1,469	1,401 1,407	1,518 1,524
600	700	7	7	8	7,600	7,700	267	223	322	14,600	14,700	670	607	725	,	21,700	1,072	1,010	1,127	28,600		1,475	1,412	1,530
700 800	800 900	8 10	8 9	10 12	7,700 7,800	7,800 7,900	273 279	228 233	328 334	14,700 14,800	14,800 14,900	676 681	613 619	731 736		21,800 21,900	1,078 1,084	1,016 1,021	1,133 1,139	28,700 28,800	28,800 28,900	1,481 1,486	1,418 1,424	1,536 1,541
900	1,000	12	10	14	7,900	8,000	285	238	340	14,900	15,000	687	625	742	21,900	22,000	1,090	1,027	1,145	28,900		1,492	1,430	1,547
<b>1,000</b>	1,100	14	11	16	<b>8,000</b> 8,000	8,100	290	243	345	<b>15,000</b> 15,000	15,100	693	630	748	22,000 22.000	22,100	1,095	1,033	1,150	<b>29,000</b> 29,000	29,100	1.498	1,435	1,553
1,100	1,200	16	13	18	8,100	8,200	296	248	351	15,100	15,200	699	636	754	22,100	22,200	1,101	1,039	1,156	29,100	29,200	1,504	1,441	1,559
1,200 1,300	1,300 1,400	18 20	15 17	20 22	8,200 8,300	8,300 8,400	302 308	253 258	357 363	15,200 15,300	15,300 15,400	704 710	642 648	759 765		22,300 22,400	1,107 1,113	1,044 1,050	1,162 1,168	29,200 29,300		1,509 1,515	1,447 1,453	1,564 1,570
1,400	1,500	22	19	24	8,400	8,500	313	263	368	15,400	15,500	716	653	771		22,500	1,118	1,056	1,173		29,500	1,521	1,458	1,576
1,500	1,600	24 26	21 23	27 30	8,500	8,600	319 325	268 273	374	15,500 15,600	15,600	722 727	659 665	777 782	· ·	22,600 22,700	1,124	1,062 1,067	1,179 1,185		29,600	1,527 1.532	1,464	1,582 1,587
1,600 1,700	1,700 1,800	20 28	23 25	30 33	8,600 8,700	8,700 8,800	325 331	273	380 386	15,600	15,700 15,800	733	665 671	788		22,700	1,130 1,136	1,007	1,105	29,600 29,700		1,532	1,470 1,476	1,507
1,800	1,900	30	27	36	8,800	8,900	336	283	391	15,800	15,900	739	676	794		22,900	1,141	1,079	1,196		29,900		1,481	1,599
1,900 <b>2,000</b>	2,000	32	29	39	8,900 <b>9,000</b>	9,000	342	288	397	15,900 <b>16,000</b>	16,000	745	682	800	22,900 23,000	23,000	1,147	1,085	1,202	29,900 <b>30,000</b>	30,000	1,550	1,487	1,605
2,000	2,100	34	31	42	9,000	9,100	348	293	403	16,000	16,100	750	688	805		23,100	1,153	1,090	1,208	30,000			1,493	1,610
2,100 2,200	2,200 2,300	36 38	33 35	45 48	9,100 9,200	9,200 9,300	354 359	298 303	409 414	16,100 16,200	16,200 16,300	756 762	694 699	811 817	.,	23,200 23,300	1,159 1,164	1,096 1,102	1,214 1,219	30,100 30,200	30,200 30,300	1,561 1,567	1,499 1,504	1,616 1,622
2,300	2,400	41	37	51	9,300	9,400	365	308	420	16,300	16,400	768	705	823		23,400	1,170	1,108	1,225		30,400	1,573	1,510	1,628
2,400 2,500	2,500 2,600	44 47	39 41	54 57	9,400 9,500	9,500 9,600	371 377	313 318	426 432	16,400 16,500	16,500 16,600	773 779	711 717	828 834		23,500 23,600	1,176 1,182	1,113 1,119	1,231 1,237	,	30,500 30,600	1,578 1,584	1,516 1,522	1,633 1,639
2,600	2,700	50	43	61	9,600	9,700	382	323	437	16,600	16,700	785	722	840	· ·	23,700	1,187	1,125	1,242		30,700	1,590	1,527	1,645
2,700 2,800	2,800 2,900	53 56	45 47	65 69	9,700 9,800	9,800 9,900	388 394	328 333	443 449	16,700 16,800	16,800 16,900	791 796	728 734	846 851		23,800 23,900	1,193 1,199	1,131 1,136	1,248 1,254	30,700	30,800 30,900	1,596	1,533 1,539	1,651 1,656
2,800	3,000	50 59	47 49	73	9,800	,	400	338	449 455	16,900	17,000	802	740	857		23,900	1,205	1,130	1,254			1,607	1,539	1,662
<b>3,000</b> 3,000	3,100	62	52	77	<b>10,000</b> 10,000	10,100	405	343	460	<b>17,000</b> 17,000	17,100	808	745	863	24,000	24,100	1,210	1,148	1,265	<b>31,000</b>	31,100	1 613	1,550	1,668
3,100	3,200	65	55	81	10,000		411	349	466	17,100	17,200	814	751	869	· ·	24,200	1,216	1,154	1,200		31,200	1,619	1,556	1,674
3,200 3,300	3,300 3,400	68 71	58 61	85 89	10,200 10,300	,	417 423	354 360	472 478	17,200 17,300	17,300 17,400	819 825	757 763	874 880		24,300 24,400	1,222 1,228	1,159 1,165	1,277 1,283		31,300 31,400	1,624 1,630	1,562 1,568	1,679 1,685
3,400	3,500	74	64	93	10,300	,	423	366	483	17,400	17,500	831	768	886	· ·	24,400	1,233	1,103	1,288		31,500	1,636	1,573	1,691
3,500	3,600	77	67	98	10,500	,	434	372	489	17,500	17,600	837	774	892		24,600	1,239	1,177	1,294		31,600	1,642	1,579	1,697
3,600 3,700	3,700 3,800	80 83	70 73	103 108	10,600 10,700	,	440 446	377 383	495 501	17,600 17,700	17,700 17,800	842 848	780 786	897 903		24,700 24,800	1,245 1,251	1,182 1,188	1,300 1,306		31,700 31,800	1,647 1,653	1,585 1,591	1,702 1,708
3,800	3,900	87	76	113	10,800	,	451	389	506	17,800	17,900	854	791	909		24,900	1,256	1,194	1,311			1,659	1,596	1,714
3,900 <b>4,000</b>	4,000	91	79	118	10,900 <b>11,000</b>	11,000	457	395	512	17,900 <b>18,000</b>	18,000	860	797	915	24,900 25,000	25,000	1,262	1,200	1,317	31,900 32,000	32,000	1,665	1,602	1,720
4,000	4,100	95	82	123	11,000	11,100	463	400	518	18,000	18,100	865	803	920	25,000	,	1,268	1,205	1,323	32,000		1,670	1,608	1,725
4,100 4,200	4,200 4,300	99 103	85 88	128 133	11,100 11.200	11,200 11,300	469 474	406 412	524 529	18,100 18,200	18,200 18,300	871 877	809 814	926 932	25,100 25.200	25,200 25,300	1,274 1,279	1,211 1,217	1,329 1,334	32,100 32.200	32,200 32,300	1,676 1.682	1,614 1,619	1,731 1,737
4,300	4,400		91	138	11,300	11,400		418	535	18,300	18,400	883	820	938	25,300	25,400	1,285	1,223	1,340		32,400		1,625	1,743
4,400 4,500			94 97	143 148		11,500 11,600		423 429	541 547		18,500 18,600	888 894	826 832	943 949		25,500 25,600		1,228 1,234	1,346 1,352		32,500 32,600		1,631 1,637	1,748 1,754
4,600			100	153	11,600	11,700	497	435	552	18,600	18,700	900	837	955	25,600	25,700	1,302	1,240	1,357	32,600	32,700	1,705	1,642	1,760
4,700 4,800			103 106	158 163		11,800 11,900		441 446	558 564		18,800 18,900	906 911	843 849	961 966		25,800 25,900		1,246 1,251	1,363 1,369		32,800 32,900		1,648 1,654	1,766 1,771
4,900			100	168	11,900	12,000		440	570	18,900	19,000		855	972	25,900	26,000		1,257		32,900	33,000		1,660	1,777
<b>5,000</b> 5,000	5,100	135	112	173	12,000 12,000	12,100	520	458	575	<b>19,000</b> 19,000	19,100	923	860	978	26,000 26,000	26,100	1.325	1,263	1,380	33,000 33,000	33,100	1,728	1,665	1,783
5,100	5,200	139	116	179	12,100	12,200	526	464	581	19,100	19,200	929	866	984	26,100	26,200	1,331	1,269	1,386	33,100	33,200	1,734	1,671	1,789
5,200 5,300			120 124	184 190		12,300 12,400		469 475	587 593		19,300 19,400	934 940	872 878	989 995		26,300 26,400		1,274 1,280	1,392 1,398		33,300 33,400		1,677 1,683	1,794 1,800
5,300 5,400			124	190 196		12,400		475 481	593 598		19,400 19,500	940 946	878	995 1,001		26,400 26,500		1,280	1,398		33,400 33,500		1,683	1,800
5,500	5,600	158	132	202	12,500	12,600	549	487	604		19,600	952	889	1,007	26,500	26,600	1,354	1,292	1,409	33,500	33,600	1,757	1,694	1,812
5,600 5,700			136 140	207 213		12,700 12,800		492 498	610 616		19,700 19,800	957 963	895 901	1,012 1,018		26,700 26,800		1,297 1,303	1,415 1,421		33,700 33,800		1,700 1,706	1,817 1,823
5,800	5,900	173	144	219	12,800	12,900	566	504	621	19,800	19,900	969	906	1,024	26,800	26,900	1,371	1,309	1,426	33,800	33,900	1,774	1,711	1,829
5,900 <b>6,000</b>	6,000	178	148	225	12,900 13,000	13,000	572	510	627	19,900 <b>20,000</b>	20,000	975	912	1,030	26,900 27,000	27,000	1,377	1,315	1,432	33,900 34,000	34,000	1,780	1,717	1,835
6,000			152	230	13,000	13,100		515	633	20,000	20,100	980	918	1,035	27,000	27,100		1,320	1,438	34,000	34,100		1,723	1,840
6,100 6,200			156 160	236 242		13,200 13,300		521 527	639 644		20,200 20,300		924 929	1,041 1,047		27,200 27,300		1,326 1,332	1,444 1,449		34,200 34,300		1,729 1,734	1,846 1,852
6,300	6,400	198	164	248	13,300	13,400	595	533	650	20,300	20,400	998	935	1,053	27,300	27,400	1,400	1,338	1,455	34,300	34,400	1,803	1,740	1,858
6,400 6,500			168 172	253 259		13,500 13,600		538 544	656 662		20,500 20,600		941 947			27,500 27,600		1,343 1 349	1,461 1,467		34,500 34,600		1,746 1,752	1,863 1,869
6,600			172	259 265		13,600		544 550	667		20,600		947 952			27,600		1,349 1,355	1,467		34,600 34,700		1,752	1,869
6,700	6,800	218	180	271	13,700	13,800	618	556	673	20,700	20,800	1,021	958	1,076	27,700	27,800	1,423	1,361	1,478	34,700	34,800	1,826	1,763	1,881
6,800 6,900	6,900 7,000	223 228	184 188	276 282		13,900 14,000		561 567	679 685		20,900 21,000		964 970			27,900 28,000		1,366 1,372			34,900 35,000		1,769 1,775	1,886 1,892
-,,505	,200				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,				.,	,	,		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	, <b>-</b>	,	,500	,	,	,	,

This amount should be placed on Line 16, Form 500 or Line 4, Form 500EZ
GEORGIA INCOME TAX

										GEORGIA														
Line 15c,	Form 500				Line 15c, F	Form 500				Line 15c,	Form 500				Line 15c,	Form 500				Line 15c,	Form 500			
C Line 2 Fe	or orm 500EZ		Married Filing		or Line 3, For	- m 500EZ		Married Filing			3, Form DEZ		Married Filing		or Line 500			Married Filing		or Line 3 500			Married Filing	
Line 3, Fo	rm 500EZ		Jointly or	Married	Line 3, Por	III SUUEZ		Jointly or	Married	50	JEZ		Jointly or	Married	500	EZ		Jointly or	Married	500	EZ		Jointly or	Married
At	But Less		Head of	Filing	At	But Less		Head of	Filing	At	But Less		Head of	Filing	At	But Less		Head of	Filing	At	But Less		Head of	Filing
Least	Than	Single	House- hold	Sepa- rately	Least	Than	Single	House- hold	Sepa- rately	Least	Than	Single	House- hold	Sepa- rately	Least	Than	Single	House- hold	Sepa- rately	Least	Than	Single	House- hold	Sepa- rately
35,000					42,000					49,000					56,000					63,000				
35,000	35,100	1,843	1,780	1,898	42,000	42,100	2,245	2,183	2,300	49,000	49,100	2,648	2,585	2,703	56,000	56,100	3,050	2,988	3,105	63,000	63,100	3,453	3,390	3,508
35,100	35,200	1,849	1,786	1,904	42,100	42,200	2,251	2,189	2,306	49,100	49,200	2,654	2,591	2,709	56,100	56,200	3,056	2,994	3,111	63,100	63,200	3,459	3,396	3,514
35,200	35,300	1,854	1,792	1,909	42,200	42,300	2,257	2,194	2,312	49,200	49,300	2,659	2,597	2,714	56,200	56,300	3,062	2,999	3,117	63,200	63,300	3,464	3,402	3,519
35,300	35,400	1,860	1,798	1,915	42,300	42,400	2,263	2,200	2,318	49,300	49,400	2,665	2,603	2,720	56,300	56,400	3,068	3,005	3,123	63,300	63,400	3,470	3,408	3,525
35,400	35,500	1,866	1,803	1,921	42,400	42,500	2,268	2,206	2,323	49,400	49,500	2,671	2,608	2,726	56,400	56,500	3,073	3,011	3,128	63,400	63,500	3,476	3,413	3,531
35,500	35,600	1,872	1,809	1,927	42,500	42,600	2,274	2,212	2,329	49,500		2,677	2,614	2,732	56,500	56,600	3,079	3,017	3,134	63,500	63,600	3,482	3,419	3,537
35,600	35,700	1,877	1,815	1,932	42,600	42,700	2,280	2,217	2,335	49,600		2,682	2,620	2,737	56,600	56,700	3,085	3,022	3,140	63,600	63,700	3,487	3,425	3,542
35,700	35,800	1,883	1,821	1,938	42,700	42,800	2,286	2,223	2,333	49,700		2,688	2,626	2,743	56,700	56,800	3,091	3,022	3,146	63,700	63,800	3,493	3,431	3,548
35,800			1,826		42,800	42,000		2,229		49,800		2,694	2,620		56,800	56,900	3,096		3,140	63,800	63,900	3,499		
	36,000	1,889	1,832	1,944			2,291	2,229	2,346	49,800				2,749			· · ·	3,034				3,505	3,436 3,442	3,554
35,900	30,000	1,895	1,032	1,950	42,900 43,000	43,000	2,297	2,235	2,352	49,900 50,000	50,000	2,700	2,637	2,755	56,900 57,000	57,000	3,102	3,040	3,157	63,900 64,000	64,000	3,505	3,442	3,560
36,000 36,000	36,100	1,900	1,838	1,955	43,000	43,100	2,303	2,240	2,358	50,000	50,100	2,705	2,643	2,760	57,000	57,100	3,108	3,045	3,163	64,000	64,100	3,510	3,448	3,565
36,100	36,200	1,906	1,844	1,961	43,000	43,200	2,309	2,240	2,364	50,000		2,711	2,649	2,766	57,100	57,200	3,114	3,051	3,169	64.100	64,200	3,516	3,454	3,571
	36,300		1,849		43,100					50,200			2,654		57,100				3,109	64,200		3,510	3,454	
36,200		1,912		1,967		43,300	2,314	2,252	2,369			2,717		2,772		57,300	3,119	3,057			64,300			3,577
36,300	36,400	1,918	1,855	1,973	43,300	43,400	2,320	2,258	2,375	50,300		2,723	2,660	2,778	57,300	57,400	3,125	3,063	3,180	64,300	64,400	3,528	3,465	3,583
36,400	36,500	1,923	1,861	1,978	43,400	43,500	2,326	2,263	2,381	50,400		2,728	2,666	2,783	57,400	57,500	3,131	3,068	3,186	64,400	64,500	3,533	3,471	3,588
36,500	36,600	1,929	1,867	1,984	43,500	43,600	2,332	2,269	2,387	50,500	,	2,734	2,672	2,789	57,500	57,600	3,137	3,074	3,192	64,500	64,600	3,539	3,477	3,594
36,600	36,700	1,935	1,872	1,990	43,600	43,700	2,337	2,275	2,392	50,600		2,740	2,677	2,795	57,600	57,700	3,142	3,080	3,197	64,600	64,700	3,545	3,482	3,600
36,700	36,800	1,941	1,878	1,996	43,700	43,800	2,343	2,281	2,398	50,700		2,746	2,683	2,801	57,700	57,800	3,148	3,086	3,203	64,700	64,800	3,551	3,488	3,606
36,800	36,900	1,946	1,884	2,001	43,800	43,900	2,349	2,286	2,404	50,800	,	2,751	2,689	2,806	57,800	57,900	3,154	3,091	3,209	64,800	64,900	3,556	3,494	3,611
36,900	37,000	1,952	1,890	2,007	43,900	44,000	2,355	2,292	2,410	50,900	51,000	2,757	2,695	2,812	57,900	58,000	3,160	3,097	3,215	64,900	65,000	3,562	3,500	3,617
37,000					44,000					51,000					58,000					65,000				
37,000	37,100	1,958	1,895	2,013	44,000	44,100	2,360	2,298	2,415	51,000	,	2,763	2,700	2,818	58,000	58,100	3,165	3,103	3,220	65,000	65,100	3,568	3,505	3,623
37,100	37,200	1,964	1,901	2,019	44,100	44,200	2,366	2,304	2,421	51,100		2,769	2,706	2,824	58,100	58,200	3,171	3,109	3,226	65,100	65,200	3,574	3,511	3,629
37,200	37,300	1,969	1,907	2,024	44,200	44,300	2,372	2,309	2,427	51,200	51,300	2,774	2,712	2,829	58,200	58,300	3,177	3,114	3,232	65,200	65,300	3,579	3,517	3,634
37,300	37,400	1,975	1,913	2,030	44,300	44,400	2,378	2,315	2,433	51,300	51,400	2,780	2,718	2,835	58,300	58,400	3,183	3,120	3,238	65,300	65,400	3,585	3,523	3,640
37,400	37,500	1,981	1,918	2,036	44,400	44,500	2,383	2,321	2,438	51,400	51,500	2,786	2,723	2,841	58,400	58,500	3,188	3,126	3,243	65,400	65,500	3,591	3,528	3,646
37,500	37,600	1,987	1,924	2,042	44,500	44,600	2,389	2,327	2,444	51,500	51,600	2,792	2,729	2,847	58,500	58,600	3,194	3,132	3,249	65,500	65,600	3,597	3,534	3,652
37,600	37,700	1,992	1,930	2,047	44,600	44,700	2,395	2,332	2,450	51,600	51,700	2,797	2,735	2,852	58,600	58,700	3,200	3,137	3,255	65,600	65,700	3,602	3,540	3,657
37,700	37,800	1,998	1,936	2,053	44,700	44,800	2,401	2,338	2,456	51,700	51,800	2,803	2,741	2,858	58,700	58,800	3,206	3,143	3,261	65,700	65,800	3,608	3,546	3,663
37,800	37,900	2,004	1,941	2,059	44,800	44,900	2,406	2,344	2,461	51,800		2,809	2,746	2,864	58,800	58,900	3,211	3,149	3,266	65,800	65,900	3,614	3,551	3,669
37,900	38,000	2,010	1,947	2,065	44,900	45,000	2,412	2,350	2,467	51,900		2,815	2,752	2,870	58,900	59,000	3,217	3,155	3,272	65,900	66,000	3,620	3,557	3,675
38,000			1-		45,000	- ,	,	,		52,000		1		,	59,000	,	- /	-,	- 1	66,000	,	- ,	- /	
38,000	38,100	2,015	1,953	2,070	45,000	45,100	2,418	2,355	2,473	52,000	52,100	2,820	2,758	2,875	59,000	59,100	3,223	3,160	3,278	66,000	66,100	3,625	3,563	3,680
38,100	38,200	2,021	1,959	2,076	45,100	45,200	2,424	2,361	2,479	52,100	52,200	2,826	2,764	2,881	59,100	59,200	3,229	3,166	3,284	66,100	66,200	3,631	3,569	3,686
38,200	38,300	2,027	1,964	2,082	45,200	45,300	2,429	2,367	2,484	52,200	52,300	2,832	2,769	2,887	59,200	59,300	3,234	3,172	3,289	66,200	66,300	3,637	3,574	3,692
38,300	38,400	2,033	1,970	2,088	45,300	45,400	2,435	2,373	2,490	52,300		2,838	2,775	2,893	59,300	59,400	3,240	3,178	3,295	66,300	66,400	3,643	3,580	3,698
38,400	38,500	2,038	1,976	2,000	45,400	45,500	2,441	2,378	2,496	52,400		2,843	2,781	2,898	59,400	59,500	3,246	3,183	3,301	66,400	66,500	3,648	3,586	3,703
38,500	38,600	2,030	1,982	2,000	45,500	45,600	2,447	2,384	2,502	52,500		2,849	2,787	2,904	59,500	59,600	3,252	3,189	3,307	66,500	66,600	3,654	3,592	3,709
38,600	38,700	2,044	1,987	2,000	45,600	45,700	2,452	2,390	2,502	52,600		2,855	2,792	2,910	59,600	59,700	3,257	3,195	3,312	66,600	66,700	3,660	3,597	3,715
38,700	38,800	2,050	1,993	2,103	45,700	45,800	2,458		2,513	52,000		2,853	2,792	2,910	59,700	59,700 59,800	3,263	3,201	3,312	66,700	66,800	3,666	3,603	
								2,396																3,721
38,800	38,900	2,061	1,999	2,116	45,800	45,900	2,464	2,401	2,519	52,800		2,866	2,804	2,921	59,800	59,900	3,269	3,206	3,324	66,800	66,900	3,671	3,609	3,726
38,900 39,000	39,000	2,067	2,005	2,122	45,900 46,000	46,000	2,470	2,407	2,525	52,900 53,000	53,000	2,872	2,810	2,927	59,900 60,000	60,000	3,275	3,212	3,330	66,900 67,000	67,000	3,677	3,615	3,732
39,000	39,100	2,073	2,010	2,128	46,000	46,100	2,475	2,413	2,530	53,000	53,100	2,878	2,815	2,933	60,000	60,100	3,280	3,218	3,335	67,000	67,100	3,683	3,620	3,738
39,000	39,200	2,073	2,010	2,120	46,000	46,200	2,473	2,419	2,530	53,100	53,200	2,884	2,813	2,939	60,000	60,100	3,286	3,224	3,341	67,100	67,100	3,689	3,626	3,744
					.,											,								
39,200	39,300	2,084	2,022	2,139	46,200	46,300	2,487	2,424	2,542	53,200		2,889	2,827	2,944	60,200	60,300	3,292	3,229	3,347	67,200	67,300	3,694	3,632	3,749
39,300	,	2,090	2,028	2,145	46,300	46,400	2,493	2,430	2,548	53,300		2,895	2,833	2,950	60,300	60,400	3,298	3,235	3,353	67,300	67,400	3,700	3,638	3,755
39,400		2,096	2,033	2,151	46,400	46,500	2,498	2,436	2,553	53,400		2,901	2,838	2,956	60,400	60,500	3,303		3,358	67,400	67,500	3,706	3,643	3,761
39,500						46,600		2,442	2,559		53,600		2,844	2,962	60,500	60,600			3,364	67,500		3,712	3,649	
39,600			2,045			46,700		2,447	2,565		53,700		2,850		60,600				3,370		67,700	3,717	3,655	
39,700				2,168		46,800		2,453	2,571		53,800	2,918	2,856		60,700	60,800	3,321	3,258	3,376		67,800	3,723	3,661	3,778
39,800						46,900		2,459			53,900		2,861			60,900			3,381		67,900			
39,900	40,000	2,125	2,062	2,180		47,000	2,527	2,465	2,582		54,000	2,930	2,867	2,985		61,000	3,332	3,270	3,387		68,000	3,735	3,672	3,790
40,000	40 100	2 1 2 0	2 000	2 105	47,000	47 100	2 500	2 470	2 500	54,000	54,100	2 0 2 5	2 070	2 000	61,000	61 100	3 2 2 0	3 775	3 200	68,000	68 100	3 740	3 670	3 705
40,000			2,068	2,185		47,100		2,470	2,588			2,935	2,873		-	61,100	3,338		3,393		68,100	3,740	3,678	3,795
40,100				2,191		47,200		2,476	2,594		54,200	2,941	2,879		-	61,200	3,344		3,399		68,200	3,746	3,684	3,801
40,200				2,197		47,300		2,482	2,599		54,300	2,947	2,884	3,002	61,200		3,349		3,404		68,300	3,752	3,689	
40,300				2,203		47,400		2,488	2,605		54,400	2,953	2,890		61,300		3,355		3,410	68,300		3,758	3,695	
40,400				2,208		47,500		2,493	2,611		54,500	2,958	2,896			61,500	3,361	3,298	3,416		68,500	3,763	3,701	3,818
40,500				2,214		47,600		2,499	2,617		54,600	2,964	2,902		61,500	61,600	3,367	3,304	3,422	68,500		3,769	3,707	3,824
40,600			2,102	2,220		47,700		2,505	2,622		54,700	2,970	2,907			61,700	3,372		3,427	68,600		3,775	3,712	
40,700			2,108	2,226		47,800		2,511	2,628		54,800		2,913	3,031	61,700	61,800	3,378	3,316	3,433		68,800	3,781	3,718	3,836
40,800					47,800	47,900		2,516			54,900		2,919		61,800	61,900	3,384		3,439	68,800	68,900	3,786	3,724	3,841
40,900	41,000	2,182	2,120	2,237	47,900	48,000	2,585	2,522	2,640	<u>54</u> ,900	55,000	2,987	2,925	3,042	61,900	62,000	3,390	3,327	3,445	68,900	69,000	3,792	3,730	3,847
41,000					48,000					55,000					62,000					69,000				
41,000				2,243		48,100		2,528	2,645	55,000			2,930		62,000	62,100	3,395		3,450		69,100	3,798	3,735	3,853
	41,200		2,131	2,249	48,100	48,200	2,596	2,534	2,651	55,100	55,200	2,999	2,936	3,054	62,100	62,200	3,401	3,339	3,456	69,100	69,200	3,804	3,741	3,859
41,200	41,300	2,199	2,137	2,254	48,200	48,300	2,602	2,539	2,657	55,200	55,300	3,004	2,942	3,059	62,200	62,300	3,407	3,344	3,462	69,200	69,300	3,809	3,747	3,864
	41,400			2,260		48,400		2,545	2,663		55,400	3,010	2,948		62,300	62,400	3,413		3,468		69,400	3,815	3,753	3,870
	41,500		2,148	2,266		48,500		2,551	2,668		55,500	3,016	2,953		62,400	62,500	3,418		3,473		69,500	3,821	3,758	
41,500			2,154	2,272		48,600		2,557	2,674		55,600	3,022	2,959		62,500	62,600		3,362	3,479		69,600	3,827	3,764	3,882
	41,700	2,222	2,160	2,277		48,700	2,625	2,562	2,680		55,700	3,027	2,965	3,082	62,600	62,700	3,430		3,485	69,600		3,832	3,770	3,887
41,700			2,166	2,283	48,700	48,800		2,568	2,686		55,800	3,033	2,971	3,088	62,700	62,800	3,436		3,491	69,700		3,838	3,776	
41,700			2,100	2,289		48,900		2,508	2,691		55,900	3,033	2,971			62,900	3,430	3,373	3,491		69,900	3,844	3,781	3,893
	41,900			2,209		48,900 49,000	2,630	2,574	2,691		55,900 56,000	3,039	2,976			62,900	3,441		3,496		70,000	3,850	3,787	
41,900	<del>4</del> ∠,000	2,240	∠,1//	2,290	40,900	+3,000	∠,042	∠,300	2,097	55,900	50,000	5,045	2,302	5,100	02,900	00,000	3,447	5,505	0,002	09,900	10,000	0,000	5,767	5,909

This amount should be placed on Line 16, Form 500 or Line 4, Form 500EZ
GEORGIA INCOME TAX

Line 15c, or Line 500			Married Filing Jointly or	Married		Form 500 Form 500EZ		Married Filing Jointly or	Married	or Line	Form 500 3, Form 0EZ		Married Filing Jointly or	Married	or Line	Form 500 3, Form DEZ		Married Filing Jointly or	Married	Line 15c, F or Line 3, Fo			Married Filing Jointly or	Married
At Least 70,000	But Less Than	Single	Head of House- hold	Married Filing Sepa- rately	At Least 77,000	But Less Than	Single	Head of House- hold	Married Filing Sepa- rately	At Least 84,000	But Less Than	Single	Head of House- hold	Married Filing Sepa- rately	At Least 91,000	But Less Than	Single	Head of House- hold	Married Filing Sepa- rately	At Least 98,000	But Less Than	Single	Head of House- hold	Married Filing Sepa- rately
70,000		3,855	3,793		77,000	77,100		4,195	4,313	84,000	84,100		4,598		91,000	91,100		5,000	5,118	98,000	98,100		5,403	5,520
70,100 70,200	70,200	3,861 3,867	3,799 3,804	3,916 3,922	77,100 77,200		4,264 4,269	4,201 4,207	4,319 4,324		84,200 84,300		4,604 4,609			91,200 91,300	5,069 5,074	5,006 5,012	5,124 5,129	98,100 98,200	98,200 98,300	5,471 5,477	5,409 5,414	5,526 5,532
	70,400	3,873	3,810		77,300		4,275	4,213	4,330		84,400		4,615			91,400	5,080	5,018	5,135	98,300	98,400		5,420	5,538
70,400 70,500	70,500	3,878 3,884	3,816 3,822		77,400 77,500		4,281 4,287	4,218 4,224	4,336 4,342		84,500 84,600		4,621 4,627			91,500 91,600	5,086 5,092	5,023 5,029	5,141 5,147	98,400 98,500	98,500 98,600	5,488 5,494	5,426 5,432	5,543 5,549
	70,700	3,890	3,827		77,600		4,292	4,230	4,347		84,700		4,632			91,700	5,097	5,035	5,152	98,600	98,700	5,500	5,437	5,555
	70,800 70,900	3,896 3,901	3,833 3,839		77,700 77,800		4,298 4,304	4,236 4,241	4,353 4,359		84,800 84,900		4,638 4,644			91,800 91,900	5,103 5,109	5,041 5,046	5,158 5,164	98,700 98,800	98,800 98,900	5,506 5,511	5,443 5,449	5,561 5,566
70,900		3,907	3,845	3,962	77,900		4,310	4,247	4,365	84,900	85,000		4,650		91,900	92,000	5,115	5,052	5,170	98,900	99,000	5,517	5,455	5,572
<b>71,000</b> 71,000	71,100	3,913	3,850	3,968	<b>78,000</b> 78,000	78,100	4,315	4,253	4,370	<b>85,000</b> 85,000	85,100	4,718	4,655	4,773	<b>92,000</b> 92,000	92,100	5,120	5,058	5,175	<b>99,000</b> 99,000	99,100	5,523	5,460	5,578
	71,200 71,300	3,919 3,924	3,856 3,862	3,974 3,979		78,200 78,300	4,321 4,327	4,259 4,264	4,376 4,382		85,200 85,300	4,724	4,661 4,667	4,779 4,784		92,200 92,300	5,126	5,064 5,069	5,181 5,187	99,100 99,200	99,200 99,300	5,529 5,534	5,466 5,472	5,584 5,589
71,200		3,924	3,868		78,200		4,333	4,204	4,382		85,400		4,673	4,784		92,300 92,400		5,009	5,187	99,200 99,300	99,300 99,400	5,534 5,540	5,472	5,589
	71,500	3,936	3,873		78,400		4,338	4,276	4,393		85,500	4,741	4,678			92,500	5,143	5,081	5,198	99,400	99,500	5,546	5,483	5,601
71,600	71,600 71,700	3,942 3,947	3,879 3,885	3,997 4,002	78,500 78,600		4,344 4,350	4,282 4,287	4,399 4,405		85,600 85,700		4,684 4,690	4,802 4,807		92,600 92,700		5,087 5,092	5,204 5,210	99,500 99,600	99,600 99,700	5,552 5,557	5,489 5,495	5,607 5,612
71,700	71,800	3,953	3,891	4,008	78,700	78,800	4,356	4,293	4,411	85,700	85,800	4,758	4,696	4,813	92,700	92,800	5,161	5,098	5,216	99,700	99,800	5,563	5,501	5,618
71,800 71,900		3,959 3,965	3,896 3,902	4,014 4,020		78,900 79,000	4,361 4,367	4,299 4,305	4,416 4,422		85,900 86,000	4,764 4,770	4,701 4,707			92,900 93,000		5,104 5,110	5,221 5,227	99,800 99,900	99,900 100,000	5,569 5,575	5,506 5,512	5,624 5,630
72,000	72,100	3,970	3,908	4,025	79,000			4,310	4,428	86,000	86,100		4,713	4,830	93,000	93,100		5,115	5,233	\$100,000		5,578	5,515	5,633
	72,100	3,970 3,976	3,908 3,914	4,025		79,100	4,373 4,379	4,310	4,420 4,434		86,200		4,713			93,100 93,200	5,178 5,184	5,115 5,121	5,233 5,239					
72,200	72,300 72,400	3,982	3,919	4,037	.,	79,300	4,384	4,322	4,439		86,300		4,724			93,300		5,127	5,244	Plus 5.75	% of the	amount	over 10	10,000
	72,400 72,500	3,988 3,993	3,925 3,931	-	79,300 79,400		4,390 4,396	4,328 4,333	4,445 4,451		86,400 86,500		4,730 4,736	4,848 4,853		93,400 93,500	5,195 5,201	5,133 5,138	5,250 5,256					
	72,600	3,999	3,937	4,054	79,500		4,402	4,339	4,457		86,600		4,742			93,600	5,207	5,144	5,262					
	72,700 72,800	4,005 4,011	3,942 3,948	-	79,600 79,700		4,407 4,413	4,345 4,351	4,462 4,468		86,700 86.800		4,747 4,753	4,865 4,871		93,700 93.800	5,212 5,218	5,150 5,156	5,267 5,273					
72,800	72,900	4,016	3,954	4,071		79,900	4,419	4,356	4,474		86,900		4,759	4,876		93,900	5,224	5,161	5,279					
72,900 73,000	73,000	4,022	3,960	4,077	79,900 <b>80,000</b>	80,000	4,425	4,362	4,480	86,900 87,000	87,000	4,827	4,765	4,882	93,900 94,000	94,000	5,230	5,167	5,285					
	73,100	4,028	3,965	4,083	80,000			4,368	4,485		87,100		4,770	4,888		94,100		5,173	5,290					
73,200	73,200 73,300	4,034 4,039	3,971 3,977	4,089 4,094		80,200 80,300	4,436 4,442	4,374 4,379	4,491 4,497		87,200 87,300		4,776 4,782	4,894 4,899		94,200 94,300	5,241 5,247	5,179 5,184	5,296 5,302					
	73,400	4,045	3,983		80,300		4,448	4,385			87,400		4,788	4,905		94,400	5,253	5,190	5,308					
73,400	73,500 73,600	4,051 4,057	3,988 3,994		80,400 80,500		4,453 4,459	4,391 4,397			87,500 87,600	4,856 4,862	4,793 4,799	4,911 4,917		94,500 94,600	5,258 5,264	5,196 5,202	5,313 5,319					
73,600	73,700	4,062	4,000	4,117	80,600	80,700	4,465	4,402	4,520	87,600	87,700	4,867	4,805	4,922	94,600	94,700	5,270	5,207	5,325					
	73,800 73,900	4,068 4,074	4,006 4,011		80,700 80,800		4,471 4,476	4,408 4,414			87,800 87,900	4,873 4.879	4,811 4,816	4,928 4,934		94,800 94,900	5,276 5,281	5,213 5,219	5,331 5,336					
73,900	74,000	4,080	4,017	4,135	80,900	81,000	4,482	4,420	4,537	87,900	88,000		4,822	4,940	94,900	95,000	5,287	5,225	5,342					
74,000 74,000	74,100	4,085	4,023	4,140	<b>81,000</b> 81,000	81,100	4,488	4,425	4,543	<b>88,000</b> 88,000	88,100	4,890	4,828	4,945	<b>95,000</b> 95,000	95,100	5,293	5,230	5,348					
74,100	74,200	4,091	4,029	-	81,100		4,494	4,431			88,200		4,834	4,951		95,200	5,299	5,236	5,354					
74,200 74,300	74,300 74,400	4,097 4,103	4,034 4,040	-	81,200 81,300		4,499 4,505	4,437 4,443	4,554 4,560		88,300 88,400	4,902 4,908	4,839 4,845	4,957 4,963		95,300 95,400	5,304 5,310	5,242 5,248	5,359 5,365					
74,400	74,500	4,108	4,046	4,163	81,400	81,500	4,511	4,448	4,566	88,400	88,500	4,913	4,851	4,968	95,400	95,500	5,316	5,253	5,371					
74,500 74,600	74,600 74,700	4,114 4,120	4,052 4,057	,		81,600 81,700		4,454 4,460			88,600 88,700		4,857 4,862			95,600 95,700		5,259 5,265	5,377 5,382					
74,700	74,800	4,126	4,063	4,181	81,700	81,800	4,528	4,466	4,583	88,700	88,800	4,931	4,868	4,986	95,700	95,800	5,333	5,271	5,388					
	74,900 75,000	4,131 4,137	4,069 4,075			81,900 82,000		4,471 4,477			88,900 89,000		4,874 4,880			95,900 96,000		5,276 5,282	5,394 5,400					
75,000					82,000					89,000					96,000									
		4,143 4,149	4,080 4,086			82,100 82,200		4,483 4,489			89,100 89,200		4,885 4,891			96,100 96,200		5,288 5,294	5,405 5,411					
75,200	75,300	4,154	4,092	4,209	82,200	82,300	4,557	4,494	4,612	89,200	89,300	4,959	4,897	5,014	96,200	96,300	5,362	5,299	5,417					
		4,160 4,166	4,098 4,103			82,400 82,500		4,500 4,506			89,400 89,500		4,903 4,908			96,400 96,500		5,305 5,311	5,423 5,428					
75,500	75,600	4,172	4,109	4,227	82,500	82,600	4,574	4,512	4,629	89,500	89,600	4,977	4,914	5,032	96,500	96,600	5,379	5,317	5,434					
		4,177 4,183	4,115 4,121			82,700 82,800		4,517 4,523			89,700 89,800		4,920 4,926			96,700 96,800		5,322 5,328	5,440 5,446					
75,800	75,900	4,189	4,126	4,244	82,800	82,900	4,591	4,529	4,646	89,800	89,900	4,994	4,931	5,049	96,800	96,900	5,396	5,334	5,451					
75,900 <b>76,</b>		4,195	4,132	4,250		83,000 000	4,597	4,535	4,652		90,000 <b>,000</b>	5,000	4,937	5,055		97,000 000	5,402	5,340	5,457					
76,000	76,100		4,138		83,000	83,100		4,540		90,000	90,100		4,943		97,000	97,100		5,345	5,463					
		4,206 4,212	4,144 4,149			83,200 83,300		4,546 4,552			90,200 90,300		4,949 4,954			97,200 97,300		5,351 5,357	5,469 5,474					
76,300	76,400	4,218	4,155	4,273	83,300	83,400	4,620	4,558	4,675	90,300	90,400	5,023	4,960	5,078	97,300	97,400	5,425	5,363	5,480					
		4,223 4,229	4,161 4,167			83,500 83,600		4,563 4,569			90,500 90,600		4,966 4,972			97,500 97,600		5,368 5,374	5,486 5,492					
76,600	76,700	4,235	4,172	4,290	83,600	83,700	4,637	4,575	4,692	90,600	90,700	5,040	4,977	5,095	97,600	97,700	5,442	5,380	5,497					
	76,800 76,900	4,241 4,246	4,178 4,184			83,800 83,900		4,581 4,586			90,800 90,900		4,983 4,989			97,800 97,900		5,386 5,391	5,503 5,509					
		4,252	4,104			84,000					91,000		4,995			98,000		5,397						
	-													-										

STATE OF GEORGIA DEPARTMENT OF REVENUE TAXPAYER SERVICES DIVISION 1800 CENTURY BLVD. NE ATLANTA, GA 30345-3205