



1100401621

YOUR SOCIAL SECURITY NUMBER

7a	Number of Dependents (DO NOT include yourself or your spouse)	▶	7a	2
b	Add Lines 6c and 7a. Enter total	▶	7b	4
If the amount on line 8, 9, 10, 13 or 15 is negative, check box.				
8	Federal adjusted gross income (From Federal Form 1040, 1040A or 1040EZ)	▶ <input type="checkbox"/>	8	
(Do not use FEDERAL TAXABLE INCOME) If the amount on Line 8 is \$40,000 or more, or your gross income is less than your W-2s, you must enclose a copy of your Federal Form 1040 Pages 1 and 2.				
9	Adjustments from Schedule 1 (See instructions)	▶ <input type="checkbox"/>	9	2000
10	Georgia adjusted gross income (Net total of Line 8 and Line 9)	▶ <input type="checkbox"/>	10	
11	Standard Deduction (Do not use FEDERAL STANDARD DEDUCTION) see instructions	▶	11a	
b	Self: 65 or over? <input type="checkbox"/> Blind? <input type="checkbox"/> Spouse: 65 or over? <input type="checkbox"/> Blind? <input type="checkbox"/>	▶		
	Total of boxes x 1,300 =	▶	11b	
c	Total Standard Deduction (Line 11a + Line 11b)	▶	11c	
Use EITHER Line 11c OR Line 12C (Do not write on both lines)				
12	Total Itemized Deductions used in computing Federal Taxable Income. If you use itemized deductions, you must enclose Federal Schedule A			
a	Federal Itemized Deductions (Schedule A-Form 1040)	▶	12a	
b	Less adjustments: see instructions for Line 12	▶	12b	0
c	Georgia Total Itemized Deductions	▶	12c	
13	Subtract either Line 11c or Line 12c from Line 10; enter balance	▶ <input type="checkbox"/>	13	
14a	Number on Line 6c 2 multiplied by \$2,700	▶	14a	
14b	Number on Line 7a 2 multiplied by \$3,000	▶	14b	
14c	Add Lines 14a and 14b. Enter total	▶	14c	
15	Georgia taxable income (Line 13 less Line 14c or Schedule 3, Line 14)	▶ <input type="checkbox"/>	15	
16	Tax (Use Tax Table in the instructions)	▶	16	10582
17	Credits from Schedule 2, Page 5, Line 12 of Form 500 (Enter total but not more than the amount on Line 16)	▶	17	2360
18	Balance (Line 16 less Line 17) if zero or less than zero, enter zero	▶	18	8222
19	Georgia Income Tax Withheld (Enter Tax Withheld Only and enclose W-2s, 1099s, etc.)	▶	19	7384
20	Estimated Tax for 2010 and Form IT-560	▶	20	



1100401641

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Georgia Form 500
Individual Income Tax Return
Georgia Department of Revenue
2010 Version 1

SCHEDULE 1 ADJUSTMENTS to INCOME BASED on GEORGIA LAW (see instructions)

ADDITIONS to INCOME

1	Interest on Non-Georgia Municipal and State Bonds	▶	1	
2	Lump-Sum Distributions	▶	2	
3	Federal deduction for income attributable to domestic production activities (IRC Section 199)	▶	3	
4	Other(specify) QUALIFIED EDUCATION EXP ADJ	▶	4	2000
5	Total Additions (enter sum of Lines 1-4 here)	▶	5	2000

SUBTRACTION from INCOME

6	Retirement Income Exclusion (see instructions)			
a	Self: Date of Birth	Date of Disability:	Type of Disability:	6 a
b	Spouse: Date of Birth	Date of Disability:	Type of Disability:	6 b
7	Social Security Benefits (Taxable portion from Federal return)	▶	7	
8	Georgia Higher Education Savings Plan	▶	8	
9	Interest on United States Obligations (see instructions)	▶	9	
10	Other Adjustments (specify)	Adjustment	Amount	
		Adjustment	Amount	
		Adjustment	Amount	
		Adjustment	Amount	
	Total	▶	10	
11	Total Subtractions (enter sum of Lines 6-10 here)	▶	11	
12	Net Adjustments (Line 5 less Line 11.) Enter Net Total here and on Line 9 of Page 2 (+ or -) of Form 500	▶ <input type="checkbox"/>	12	2000



1100401651

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SCHEDULE 2 CREDITS for LINE 17, PAGE 2 (see instructions)

1	Other State(s) Tax Credit (see instructions)	▶	1	
2	Credits from Form IND-CR (Rural Physicians Credit, Disabled Person Home Purchase or Retrofit Credit, Driver Education Credit, Disaster Assistance Credit, Qualified Caregiving Expense Credit, Georgia National Guard/Air National Guard Credit, Child and Dependent Care Expense Credit, Adoption Credit, Eligible Single-Family Residence Credit)	▶	2	360
3	Low and Zero Emission Vehicle Credit	▶	3	
4	Qualified Education Expense Credit (Individual/Non pass through)	▶	4	2000
5	Clean Energy Property Credit (Individual/Non pass through)	▶	5	

Pass Through Credits from Ownership of Sole Proprietor, S Corp., LLC or Partnership Interest and Other Credits
 You must list the appropriate Credit Type Code in the space provided. If you claim more than four credits, enclose a schedule. Enter the schedule total on Line 10. See instructions for a list of available credits and their applicable codes.

6 COMPANY NAME **CREDIT CODE TYPE**

OWNERSHIP **FEIN** **CREDIT CLAIMED ON THIS RETURN**

7 COMPANY NAME **CREDIT CODE TYPE**

OWNERSHIP **FEIN** **CREDIT CLAIMED ON THIS RETURN**

8 COMPANY NAME **CREDIT CODE TYPE**

OWNERSHIP **FEIN** **CREDIT CLAIMED ON THIS RETURN**

9 COMPANY NAME **CREDIT CODE TYPE**

OWNERSHIP **FEIN** **CREDIT CLAIMED ON THIS RETURN**

10 Any additional pass-through credits claimed (attach schedule)

11 Low Income Credit (see instructions) 11a▶ 11b▶ 11c

12 Enter the total of Lines 1 through 11 here and on Line 17, Page 2 of 500 form 12 2360

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