

Georgia Form 600 (Rev. 9/14) Corporation Tax Return

Georgia Department of Revenue (Approved web version)

2014 Income Tax Re	eturn					Page 1
Beginning		Original F	(-441	t Return	Address Chang	
Ending		Initial Net		<u> </u>	Name Change	,
2015 Net Worth Tax	Return	Amended Amended		•	Final (attach expla	anation) IT-552 attached Extension attached
Beginning		IRS Audit				
Ending						
A. Federal Employer I.D	. Number	Name (Corporate title) Please give former r	name if applica	able.	
B. GA Withholding Tax Ac	count Number	Busine	ss Address (Number and Street)			
C. GA. Sales Tax Regis	tration Number	r City or	Town	State	Zip Code	Foreign Country Name
D. NAICS Code	E. Date of I	ncorporation	F. Incorporated under laws of what	at state		G. Date admitted into GA
Location of Books fo	or Audit (City)	(Stato)	Telephone Number	☐ ☐ Kind	of Business	
Location of Books ic	i Addit (City)	x (State)	relephone Number	TI. KIIIU	OI DUSINESS	
Indicate latest taxable	e year adjuste	ed by IRS -	Ar	d when repo	rted to Georgia	a >
COMPUTATION OF	GEORGIA TA	XABLE INCOM	IE AND TAX (ROUND TO N	EAREST DOLI	_AR)	SCHEDULE 1
			·			
			turn and supporting schedules mus			
			le 4)			
•	,		chedule 5)		1 1	
·	•		m Schedule 11)		1 1	
			6 or Schedule 7, Line 9)			
•	•					
COMPUTATION O	F NET WORTH	I TAX	(ROUND TO NEAR	REST DOLLAR)	SCHEDULE 2
·						
•						
			Corp Line 4, Sch. 8) 5.		4.	
			9 5)		. 6.	
7 Net Worth Tax (fr		•			7.	

(Corporation) Name ___



_____ FEIN _____

CON	IPUTATION OF TAX DUE OR OVERPAYMENT		(ROUND TO NE.	AREST DOLLAR)		SCHEDULE 3		
			A. Income Tax	B. Net Worth Tax		C. Total		
1	Total Tax (Schedule 1, Line 8, and Schedule 2, Line 7) .				1.			
	Less Credits and payments of estimated tax				2.			
	Less Credits from Schedule 9, Line 6*				3.			
	Withholding Credits (G2-A, G2-LP, and/or G2-RP)				4.			
5.					5.			
	Amount of overpayment (Lines 2, 3, and 4 less Line 1)				6.			
7.					7.			
8.	Form 600 UET (Estimated tax penalty)				8.			
	Other penalty due (See Instructions)				9.			
	Balance of tax, interest and penalty due with return				10.			
	Amount of Line 6 less Line 8 to be credited to 2015 estimated		(Refunded	11.			
	*NOTE: Any tax credits from Schedule 9 may be					net worth tax liability		
	DIRECT DEPOSIT OPTIO	•	. •			•		
ADD	ITIONS TO FEDERAL TAXABLE INCOME		(ROUND TO NEA	REST DOLLAR)		SCHEDULE 4		
1.	State and municipal bond interest (other than Georgia of	r p	olitical subdivision the	reof)	1.			
2.	Net income or net profits taxes imposed by taxing jurisc	licti	ions other than Georgi	a	2.			
3.	Expense attributable to tax exempt income				3.			
4.	Net operating loss deducted on Federal return				4.			
5.	Federal deduction for income attributable to domestic pr	od	uction activities (IRC S	Section 199)	5.			
6.	Intangible expenses and related interest cost				6.			
7.	Captive REIT expenses and costs				7.			
	Other Additions (Attach Schedule)				8.			
9.	TOTAL - Enter also on LINE 2, SCHEDULE 1				9.			
SUE	TRACTIONS FROM FEDERAL TAXABLE INCOME		(ROUND TO NEAR	EST DOLLAR)		SCHEDULE 5		
4	Interest on abligations of United Ctates (would be reduced	الما	over dispost and in dispost i	ntaraat avaanaa)	4			
	Interest on obligations of United States (must be reduce Exception to intangible expenses and related interest of		=		2.			
	Exception to intangible expenses and related interest of Exception to captive REIT expenses and costs (Attach I				3.			
	Other Subtractions (Must Attach Schedule)				4.			
	TOTAL - Enter also on LINE 4, SCHEDULE 1				5.			
					0.			
APF	ORTIONMENT OF INCOME					SCHEDULE 6		
			A. WITHIN GEORGIA	B. EVERYWHERI	■	C. DO NOT ROUND COL (A)/ COL (B)		
	Ocean acceptate form business	_		+	_	COMPUTE TO SIX DECIMALS		
	·	<u>1.</u> 2.						
۷.	Georgia Ratio (Bivide Goldini 77 by Goldini 12)	۷.						
CON	COMPUTATION OF GEORGIA NET INCOME (ROUND TO NEAREST DOLLAR) SCHEDULE 7							
	Net business income (Schedule 1, Line 5)				1.			
	Income allocated everywhere (Must Attach Schedule)				2.			
	Business income subject to apportionment (Line 1 less				3.			
	Georgia Ratio (Schedule 6, Column C)							
_	Net business income apportioned to Georgia (Line 3 x L		5.					
6.	Net income allocated to Georgia (Attach Schedule)		6.					
7.	Total of Lines 5 and 6		7. 8.					
	Less: net operating loss apportioned to GA (from Schedule 11) Georgia taxable income (Enter also on Schedule 1, Line 7)							

DATE



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(Corporation) Name			FEIN	
COMPUTATION OF GEORGIA NET WORTH RATIO		(TO BE USED BY FOR	REIGN CORPS ONLY)	SCHEDULE 8
		A. WITHIN GEORGIA	D TOTAL EVEDYAMIEDE	C. GA Ratio (A/B) DO NOT ROUND
Total value of property owned (Total assets from Federal balance sheet)	1	A. WITHIN GEORGIA	B. TOTAL EVERYWHERE	COMPUTE TO SIX DECIMALS
Gross receipts from business	2.			
3. Totals (Line 1 plus Line 2)	3.			
4. Georgia Ratio (Divide Line 3A by 3B)	4.			
A Copy of the Federal Return and supporting Schedules must be a	attach	ned, otherwise this ret	urn shall be deemed inc	complete.
No extension of time for filing will be allowed unless a copy of the	requ	est for a Federal exter	nsion or Form IT-303 is a	attached to this return
Make check payable to: Georgia Department of Revenue Mail to: Georgia Department of Revenue, Processing Center,	РО	Box 740397, Atlanta	ı, Georgia 30374-0397	
DIRECT DEPOSIT OPTIONS				
A. Direct Deposit (For U.S. Accounts Only) See booklet for further instr	ructio	ns. If Direct Deposit is	not selected, a paper ch	eck will be issued.
Routing Type: Checking ☐ Savings ☐ Numbe			\Box	
Accoun			<u></u>	
Number				
United States, free of any expense to the State of Georgia. I authorize the Georgia Department of Revenue to electronical	lv not	ify me at the below e-ma	nil address regarding any u	pdates to my account(s)
_	.y	,	ada see regaran gany a	paatoo to my account(c)
Email Address:				
Check the box to authorize the Georgia Department of Rev	/enue	e to discuss the conte	nts of this tax return wit	h the named preparer.
SIGNATURE OF OFFICER	SIGN	ATURE OF INDIVIDUAL O	R FIRM PREPARING THE RE	ETURN
TITLE	FIRM	PREPARING THE RETUR	:N	

IDENTIFICATION OR SOCIAL SECURITY NUMBER



1501404045

(Corporation) Name		FEIN
CLAIMED TAX CREDITS	(ROUND TO NEAREST DOLLAR)	SCHEDULE 9

See pages 16 through 21 for a list of available credits and their applicable codes. You must list the appropriate credit type code in the space provided. If you claim more than four credits, attach a schedule. Enter the total of the additional schedule on Line 5. If the tax credit is flowing or being assigned into this corporation from another corporation, please enter the name and FEIN of the corporation where the tax credit originated. If the credit originated with the corporation filing this return, enter "Same" in the spaces for corporation and FEIN.

	Credit Type Code	Corporation Name	FEIN		Amount of Credit		
1.				1.			
2.				2.			
3.				3.			
4.				4.			
5.	5. Enter the total from attached schedule(s)						
6.	Enter the total of Li	ines 1 through 5 here and on Schedule 3, Line 3	Page 2	6.			
		-	-				
A	SSIGNED TAX CREDI	TS (ROUN	TO NEAREST DOLLAR)		SCHEDULE 10		

Georgia Code Section 48-7-42 provides that in lieu of claiming any Georgia income tax credit for which a taxpayer otherwise is eligible for the taxable year, the taxpayer may elect to assign credits in whole or in part to one or more "affiliated entities". The term "affiliated entities" is defined as:

- 1) A corporation that is a member of the taxpayer's affiliated group within the meaning of Section 1504(a) of the Internal Revenue Code: or
- 2) An entity affiliated with a corporation, business, partnership, or limited liability company taxpayer, which entity:
 - (a) Owns or leases the land on which a project is constructed;
 - (b) Provides capital for construction of the project; and
 - (c) Is the grantor or owner under a management agreement with a managing company for the project.

No carryover attributable to the unused portion of any previously claimed or assigned credit may be assigned or reassigned, except if the assignor and the recipient of an assigned tax credit cease to be affiliated entities, then any carryover attributable to the unused portion of the credit is transferred back to the assignor of the credit. The assignor is permitted to use any such carryover and also shall be permitted to assign the carryover to one or more affiliated entities, as if such carryover were an income tax credit for which the assignor became eligible in the taxable year in which the carryover was transferred back to the assignor. In the case of any credit that must be claimed in installments in more than one taxable year, the election under this subsection may be made on an annual basis with respect to each such installment. For additional information, please refer to Georgia Code Section 48-7-42.

If the corporation filing this return is assigning tax credits to other affiliates, please provide detail below specifying where the tax credits are being assigned.

All assignments of credits must be made before the statutory due date (including extensions) per O.C.G.A. § 48-7-42 (b).

	Credit Type Code	Corporation Name	FEIN		Amount of Credit
1.				1.	
2.				2.	
3.				3.	
4.				4.	

(Corporation) Name ______ FEIN ______

GA NOL Carry Forward Worksheet (ROUND TO NEAREST DOLLAR) SCHEDULE 11

For calendar year	ır or fiscal year beginn	ing	and ending					
A Loss Year	B Loss Amount	C Income Year	D NOL Utilized	E Balance	F Remaining NOL			
LOSS ICAI	L03374modrit	moome real	TVOE Otilized	Balarice	Tterriairing TtoL			
	rward Available to Cu	rrent Year (Enter on S	Schedule 1, Line 6 or 9	Schedule 7, Line 8)				
2. Current Year I	ncome / (Loss)							

INSTRUCTIONS

Column A: List the loss year(s).

Column B: List the loss amount for the tax year listed in Column A.

Columns C & D: List the years in which the losses were utilized and the amount utilized each year.

Column E: List the balance of the NOL after each year has been applied.

Column F: List the remaining NOL applicable to each loss year.

Total the remaining NOL (Col. F) and enter in the space at the bottom of the worksheet for "NOL Carry Forward Available to Current Year". Then insert "Current Year Income / (Loss)" in the space provided and compute the "NOL Carry Forward Available to Next Year" in the last space. **DO NOT check the box for IT 552 on the return if Schedule 11 is used.**

Create photocopies as needed. See example worksheet on page 11.