

Georgia Form 600 (Rev. 06/20/19) Page 1
Corporation Tax Return
Georgia Department of Revenue (Approved web version)

<b>20</b> 2	Beginning Original Return Consolidated GA Parent Return Addr (attach approval) Nam  Beginning Addr (attach approval) Nam  Amended Return GA Consolidated Subsidiary Final	6-272	Exception attached
E. (	GA Sales Tax Registration Number F. City or Town G. State H. Z	ip Cod	e I. Foreign Country Name
J. N	IAICS Code K. Date of Incorporation L. Incorporated under laws of what state		M. Date admitted into GA
N.	_ocation of Records for Audit (City) & (State) O. Corporation's Telephone Number P. Type of Bu	siness	
Q. Ir	dicate latest taxable year adjusted by IRS R. And when reported to	Geor	gia
CC	MPUTATION OF GEORGIA TAXABLE INCOME AND TAX (ROUND TO NEAREST DOLLAR)		SCHEDULE 1
1.	Federal Taxable Income (Copy of Federal return and supporting schedules must be attached)	1.	
	Additions to Federal Income (from Schedule 4)	2.	
3.	Total (add Lines 1 and 2)	3.	
4.	Subtractions from Federal Income (from Schedule 5)	4.	
5.	Balance (Line 3 less Line 4)	5.	
6.	Georgia Net Operating Loss deduction (from Schedule 9; See IT-611 instructions for 80% limitation)	6.	
7.	Georgia Taxable Income (Line 5 less Line 6 or Schedule 7, Line 9)	7.	
8.	Income Tax (5.75% x Line 7)	8.	
CC	MPUTATION OF NET WORTH TAX (ROUND TO NEAREST DOLLAR)		SCHEDULE 2
1.	Total Capital stock issued	1.	
2.	Paid in or Capital surplus	2.	
3.	Total Retained earnings	3.	
4.	Net Worth (Total of Lines 1, 2, and 3)	4.	
5.	Ratio (GA. and Dom. For. Corp100%) (Foreign Corp Line 4, Sch. 8)		
6.	Net Worth Taxable by Georgia (Line 4 x Line 5 )	6.	
7	Net Worth Tay (from table in instructions)	<sub>7</sub>	

(Corporation) Name

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COMPUTATION OF TAX DUE OR OVERPAYMENT	(ROUND TO NEA	REST 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.						
Credits and payments of estimated tax			2.						
Schedule 10* Credits must be filed electronically									
4. Withholding Credits (G2-A, G2-LP, and/or G2-RP)			4.						
5. Schedule 10B Refundable tax credits must be filed electronically			5.						
6. Balance of tax due (Line 1, less Lines 2, 3, 4, and 5)									
7. Amount of overpayment (Lines 2, 3, 4, and 5 less Line 1)			7.						
Interest due (See Instructions)			8.						
9. Form 600 UET (Estimated tax penalty)			9.						
10. Other penalty due (See Instructions)			10.						
11. Balance of tax, interest and penalty due with return			11.						
12. Amount to be credited to 2020 estimated tax (Line 7 less Lines 8-10)		Refunded	12.						
*NOTE: Any tax credits from Schedule 10 may be applied a									
SEE PAGE 3 SIGNATURE SECTION FOR DIRECT DEPOSIT OPTIONS									
ADDITIONS TO FEDERAL TAXABLE INCOME	(ROUND TO NEAF		SCHEDULE 4						
1. State and municipal bond interest (other than Georgia or politic		,	1.						
2. Net income or net profits taxes imposed by taxing jurisdictions	_		2.						
3. Expense attributable to tax exempt income			3. <u> </u>						
·	et operating loss deducted on Federal return								
	leserved								
6. Intangible expenses and related interest cost		6.							
7. Captive REIT expenses and costs	I .	7. 8.							
•	Other Additions (Attach Schedule)								
			9.						
SUBTRACTIONS FROM FEDERAL TAXABLE INCOME	(ROUND TO NEAR	EST DOLLAR)	SCHEDULE 5						
1. Interest on obligations of United States (must be reduced by d	direct and indirect in	nterest expense) 1							
2. Exception to intangible expenses and related interest cost (At	tach IT-Addback)		2.						
3. Exception to captive REIT expenses and costs (Attach IT-REIT	·)		3.						
4. Other Subtractions (Must Attach Schedule)		1.							
5. TOTAL - Enter also on Line 4, Schedule 1	TOTAL - Enter also on Line 4, Schedule 1								
APPORTIONMENT OF INCOME			SCHEDULE 6						
A. V	WITHIN GEORGIA	B. EVERYWHERE	C. DO NOT ROUND						
			COL (A) / COL (B) COMPUTE TO SIX DECIMALS						
Gross receipts from business									
Georgia Ratio (Divide Column A by Column B) 2.									
COMPUTATION OF GEORGIA NET INCOME (RC	OUND TO NEAREST	DOLLAR)	SCHEDULE 7						
·									
Net business income (Schedule 1, Line 5)			I.						
Net business income (Schedule 1, Line 5)      Income allocated everywhere (Must Attach Schedule)			1. 2.						
Net business income (Schedule 1, Line 5)      Income allocated everywhere (Must Attach Schedule)      Business income subject to apportionment (Line 1 less Line 2)	)		I.						
Net business income (Schedule 1, Line 5)      Income allocated everywhere (Must Attach Schedule)      Business income subject to apportionment (Line 1 less Line 2)      Georgia Ratio (Schedule 6, Column C)	)		2.						
Net business income (Schedule 1, Line 5)      Income allocated everywhere (Must Attach Schedule)      Business income subject to apportionment (Line 1 less Line 2).      Georgia Ratio (Schedule 6, Column C)	) 4.		2						
Net business income (Schedule 1, Line 5)      Income allocated everywhere (Must Attach Schedule)      Business income subject to apportionment (Line 1 less Line 2).      Georgia Ratio (Schedule 6, Column C)	4.		5. 3.						
Net business income (Schedule 1, Line 5)      Income allocated everywhere (Must Attach Schedule)      Business income subject to apportionment (Line 1 less Line 2).      Georgia Ratio (Schedule 6, Column C)	4.		2						

(Corporation) Name \_\_



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COMPUTATION OF GEORGIA NET WORTH RATIO		(TO	BE USE	ED BY	FOR	EIGN	COF	RPS	ONL)	Y)	S	CHE	DULE	8
		A. W	ITHIN GE	ORGIA			в. тот	AL EV	ERYW	HERE		DO NO	tio (A/B OT ROUN TO SIX I	
Total value of property owned (Total assets from Federal balance sheet)	1.													
2. Gross receipts from business	2.													
3. Totals (Line 1 plus Line 2)	3.				$\perp$									
4. Georgia Ratio (Divide Line 3A by 3B)	4.													
A copy of the Federal Return and supporting schedules must be allowed unless a copy of the request for Federal extension or Formal Make check payable to: Georgia Department of Revenue Mail to: Georgia Department of Revenue, Processing Center,	rm IT	-303 is	attach	ed to	this	retur	<u>n.</u>				r filin	g wil	II be	
DIRECT DEPOSIT OPTIONS														
A. Direct Deposit (For U.S. Accounts Only) See booklet for further instr	ructio	ns. If	Direct I	Depos	sit is	not s	elect	ted, a	a pap	er cl	heck	will l	be iss	ued.
Type: Checking Savings Routing Number	g						]							
Accoun Number			П			I	Ш					$\Box$		
the best of my/our knowledge and belief, it is true, correct, and complete. information of which the preparer has knowledge. Georgia Public Reventhe United States, free of any expense to the State of Georgia.														
By providing my e-mail address I am authorizing the Georgia Department of my account(s).  Taxpayer's E-mail Address:	f Reve	enue to	electroni	cally n	otify n	ne at t	he be	elow e	e-mail	addre	ess reį	gardir	ng any	updates to
Check the box to authorize the Georgia Department of Rev	venue	e to di	scuss	the co	onter	its of	this	s tax	retu	rn wi	th th	e nar	med p	reparer.
SIGNATURE OF OFFICER	SICN	ATI IDE	OF IND	IVIDU	N 05	) EIDM	I DDF	- DA DI	INC T	TE D	ETI IP			
SIGNATURE OF OFFICER	SIGIN	AIUNE	טו וועט	וטטוייו	AL OR	A I IFAIV	IFRE	_F#KI	iivo I	TIL K	LIUK	14		
TITLE	FIRM	PREPA	ARING T	HE RE	TURN	١								
DATE	IDEN	TIFICA	TION OF	R SOC	IAL S	ECUR	ITY N	NUMB	ER			—		



(Corporation) Name FEIN \_\_\_\_\_

For calendar yea	ar or fiscal year beginn	ing	and end	ng	
A Loss Year	B Loss Amount	C Income Year	D NOL Utilized	E Balance	F Remaining NO
2000 1001	2000 / timodift	moonio roai	TTOE GUILZOU	Balarios	T torrianning i to
	<u> </u>				
	orward Available to Cu Income/(Loss) (Sched		dulo 7 Lino 7)		
3. NOL from Tax					
4. NOL from Tax					
exceed 80%					
5. Total NOL appl	lied (Add Lines 3 and 4, E	Enter on Schedule 1, Lin	e 6 or Schedule 7, Line 8	)*	
<ol><li>NOL Carry For</li></ol>	ward Available to Next Y	ear (Line 1 less Line 5 p	lus any loss amount on Li	ne 2)	

### **INSTRUCTIONS**

\*Cannot Exceed the Current Year Income Reported on Line 2.

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 remainder of the schedule. Create photocopies as needed. See example worksheet in IT-611 instructions.



FEIN (Corporation) Name

**CREDIT USAGE AND CARRYOVER** (ROUND TO NEAREST DOLLAR) **SCHEDULE 10** 

### **CLAIM** TAX

### CREDITS YOU MUST FILE ELECTRONICALLY

Page 6 SCHEDULE 10B



(Corporation) Name \_\_\_\_\_ FEIN \_\_\_\_\_

GEORGIA REFUNDABLE TAX CREDITS (ROUND TO NEAREST DOLLAR) SCHEDULE 10B

# TO CLAIM TAX

## CREDITS YOU MUST FILE ELECTRONICALLY



(Corporation) Name FEIN \_\_\_\_\_ FEIN

ASSIGNED TAX CREDITS (ROUND TO NEAREST DOLLAR) SCHEDULE 11

## TO CLAIM TAX

### CREDITS YOU MUST FILE ELECTRONICALLY