



| 2013 or other taxable Beginning  | e year                    | Ending _        |          |              | 1401                 | 704011                       |         |                  |         |                    |        |                                    |            |
|--|---------------------------|-----------------|----------|--------------|----------------------|------------------------------|---------|------------------|---------|--------------------|--------|------------------------------------|------------|
| Original Return  | Amendeo                   | -<br>г          |          | Final Retu   | rn                   | Name Cha                     | nge     |                  | Addre   | ess Change         |        | Composite Re                       | turn Filed |
| A. Federal Employer Id. N  | lo.                       | Na              | ame      |              |                      |                              |         |                  |         | Location of E      | Books  | for Audit (city)                   | & (state)  |
|  |                           |                 |          |              |                      |                              |         |                  |         |                    |        |                                    |            |
| B. GA. Withholding Tax Nu  |                           |                 | imber a  | and Street   |                      |                              |         | Co               | ountry  |                    | Tele   | ephone Number                      |            |
| Payroll WH Number Nonre  | esident WH N              | umber           |          |              |                      |                              |         |                  |         |                    |        |                                    |            |
| C. GA. Sales Tax Reg. No   | C. GA. Sales Tax Reg. No. |                 |          | City or Town |                      |                              |         | State            | *C      | County Code No     | ). Z   | ip Code                            |            |
|  |                           |                 |          |              |                      |                              |         |                  |         |                    |        |                                    |            |
| D. Name (if different from   | last year's r             | return)         |          |              |                      | Number a                     | nd Stre | eet (if d        | differe | nt from last yea   | r's re | turn)                              |            |
|  |                           |                 |          |              |                      |                              |         |                  |         |                    |        |                                    |            |
| City   |                           | Sta             | ate      | Zip Cod      | е                    |                              | If no   | returr           | n was f | filed last year, s | state  | he reason why                      |            |
|  |                           |                 |          |              |                      |                              |         |                  |         |                    |        |                                    |            |
| E. NAICS Code  | F. Kind of                | Business        |          |              |                      | e began doir<br>siness in GA | ng      |                  | H. Bas  | sis of this return | 1      |                                    |            |
|  |                           |                 |          |              |                      |                              |         | (                | ) C/    | ASH ( )ACC         | RUA    | L ( ) OTHER                        |            |
| I. Indicate latest taxable y last 5 years) adjusted                                    |                           | J. Number       | r of Pai |              | Do you h<br>irtners? | nave Nonresi                 | dent    | L. Nur<br>Partne |         | of Nonresident     |        | mount of Nonre<br>holding paid for |            |
|  |                           |                 |          |              | () Yes               | or ( ) No                    |         |                  |         |                    |        |                                    |            |
| *See Page 7 of the inst  | uction bo                 | <br>oklot for a | list o   | f Goorgi     | a count              | / codo num                   | bors    |                  |         |                    |        |                                    |            |
| COMPUTATION OF GI  |                           |                 | 1131 0   | l Georgia    | a county             | (ROUND T                     |         |                  | DOLL    | AR)                |        | SCHEDULE 1                         |            |
| 1. Total Income for Geo  |                           |                 | 12, S    | chedule      | 7)                   |                              |         |                  |         | 1.                 |        |                                    |            |
| 2. Income allocated eve  | erywhere (                | Attach Sch      | nedule   | e)           |                      |                              |         |                  | ▶       | 2.                 |        |                                    |            |
| 3. Business income subject to apportionment (Line 1 less Line 2                        |                           |                 |          | s Line 2     | 2)                   |                              |         | ▶∟               | 3.      |                    |        |                                    |            |
| 4. Georgia ratio (Scheo  | dule 6, Col               | umn C)          |          |              |                      |                              |         |                  | ▶∟      | 4.                 |        |                                    |            |
| 5. Net business income apportioned to Georgia (Line 3 x Line 4)                        |                           |                 |          |              |                      |                              |         | ▶∟               | 5.      |                    |        |                                    |            |
| 6. Net income allocated to Georgia (Attach Schedule)                                   |                           |                 |          |              |                      |                              |         | ▶∟               | 6.      |                    |        |                                    |            |
| 7. Total Georgia net inc   | come (Add                 | Line 5 and      | d Line   | 9 6)         |                      |                              |         |                  |         | 7.                 |        |                                    |            |
| Copy of the Federal Re   | turn and s                | upporting       | g Sche   | edules n     | nust be a            | attached. C                  | Other   | wise t           | his re  | eturn shall be     | dee    | med incompl                        | ete.       |
| I/We declare under the pen<br>our knowledge and belief it<br>which the preparer has an | is true, cori             | rect, and co    |          |              |                      | turn (includin               | 0       | • •              | , 0     |                    |        | ,                                  |            |

MAIL TO: Georgia Department of Revenue, Processing Center, PO Box 740315, Atlanta, Georgia 30374-0315

Signature of Partner (Must be signed by partner)

Signature of Preparer other than partner or member

I authorize the Georgia Department of Revenue to electronically notify me at the below e-mail address regarding any updates to my account(s).

Email Address

Preparer's SSN or PTIN

Date



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| (Partnership) Name  | FEIN                      |            |  |
|---------------------|---------------------------|------------|--|
| GEORGIA TAX CREDITS | (ROUND TO NEAREST DOLLAR) | SCHEDULE 2 |  |

These are for information purposes only and do not affect Schedules 1 or 3-7. See Pages 9 through 11 of the instructions for a list of available credits and their applicable codes. You must list the appropriate credit type code in the area provided. If you claim more than ten credits, enclose a schedule. Enter the schedule total on Line 11. List the percentage of credit claimed in the percent (%) column.

| Credit Type Code    | Company Name              | FEIN | % |     | Amount of Credit |
|---------------------|---------------------------|------|---|-----|------------------|
| 1.                  |                           |      |   | 1.  |                  |
| 2.                  |                           |      |   | 2.  |                  |
| 3.                  |                           |      |   | 3.  |                  |
| 4.                  |                           |      |   | 4.  |                  |
| 5.                  |                           |      |   | 5.  |                  |
| 6.                  |                           |      |   | 6.  |                  |
| 7.                  |                           |      |   | 7.  |                  |
| 8.                  |                           |      |   | 8.  |                  |
| 9.                  |                           |      |   | 9.  |                  |
| 10.                 |                           |      |   | 10. |                  |
| 11. Enter the total | from attached schedule(s) |      |   |     |                  |
|                     |                           |      |   |     |                  |

Attach the appropriate form or a detailed schedule for each credit claimed (See pages 9-11 of the instructions for additional information)

| INCOME TO PARTNERS (ROUND TO NEAREST DO   |   |                        |                              | (ROUND TO NEAREST DOLLAR)     | SCHEDULE 3            |  |  |
|---|---|------------------------|------------------------------|-------------------------------|-----------------------|--|--|
| (1.) Name(3.) City, State and Zip(2.) Street and Number(4.) I.D. Number                     |   |                        |                              | Profit Sharing %              | Georgia Source Income |  |  |
|   | 1.  |                        |                              | 5.                            | 6.                    |  |  |
| A   | 2.  |                        |                              |                               |                       |  |  |
|   | 3.  |                        |                              |                               |                       |  |  |
|   | 4.  |                        |                              |                               |                       |  |  |
|   | 1.  |                        |                              | 5.                            | 6.                    |  |  |
| в   | 2.  |                        |                              |                               |                       |  |  |
|   | 3.  |                        |                              |                               |                       |  |  |
|   | 4.  |                        |                              |                               |                       |  |  |
|   | 1.  |                        |                              | 5.                            | 6.                    |  |  |
| C C   | 2.  |                        |                              |                               |                       |  |  |
|   | 3.  |                        |                              |                               |                       |  |  |
|   | 4.  |                        |                              |                               |                       |  |  |
|   | 1.  |                        |                              | 5.                            | 6.                    |  |  |
| D   | 2.  |                        |                              | -                             |                       |  |  |
|   | 3.  |                        |                              | -                             |                       |  |  |
|   | 4.  |                        |                              |                               |                       |  |  |
|   | 1.  |                        |                              | 5.                            | 6.                    |  |  |
| E   | 2.  |                        |                              | 4                             |                       |  |  |
|   | 3.  |                        |                              | -                             |                       |  |  |
|   | 4.  |                        |                              |                               |                       |  |  |
|   | DTAL  |                        |                              |                               |                       |  |  |
| ADDITIONS TO FEDERAL TAXABLE INCOME (ROUND TO NEAREST DOLLAR) SCHEDULE 4                    |   |                        |                              |                               |                       |  |  |
| 1. State and municipal bond interest other than Georgia or political subdivision thereof 1. |   |                        |                              |                               |                       |  |  |
| 2. N  | et inc  | come or net profits ta | axes imposed by taxing juris | dictions other than Georgia 2 |                       |  |  |
| 3. E  | 3. Expenses attributable to tax exempt income |                        |                              |                               |                       |  |  |

## Schedule 4 continued on Page 3

Georgia Form 700/2013



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|     | L  | 401704031                      |                    |                        |                                  |
|-----|--|--------------------------------|--------------------|------------------------|----------------------------------|
| (Pa | tnership) Name   |                                | FEI                | N                      |                                  |
|     | ADDITIONS TO FEDERAL TAXABLE INCOME                          | ST DOLLAR)                     |                    | SCHEDULE 4 (continued) |                                  |
| 4.  | Federal deduction for income attributable to domestic p      | 4.                             |                    |                        |                                  |
| 5.  | Intangible expenses and related interest costs               | 5.                             |                    |                        |                                  |
| 6.  | Captive REIT expenses and costs                              | 6.                             |                    |                        |                                  |
| 7.  | Other additions (Attach schedule)                            | 7.                             |                    |                        |                                  |
| 8.  |  | 8.                             |                    |                        |                                  |
| -   | Total (Add Lines 1 through 8) Enter here and on Line 9, S    |                                | 9.                 |                        |                                  |
|     | SUBTRACTIONS FROM FEDERAL TAXABLE INCOME                     | (ROUND TO NEAR                 |                    |                        | SCHEDULE 5                       |
| 1.  | Interest on obligations of United States (must be reduced by | / direct and indirect interest | t expenses)        | 1.                     |                                  |
| 2.  |  |                                |                    | 2.                     |                                  |
| 3.  | Exception to captive REIT expenses and costs (Attach IT      |                                | 3.                 |                        |                                  |
| 4.  | Other subtractions (Attach Schedule)                         |                                | 4.                 |                        |                                  |
| 5.  |  |                                |                    | 5.                     |                                  |
| 6.  |  |                                |                    | 6.                     |                                  |
| 7.  | Total (Add Lines 1 through 6) enter here and on Line 11      | I, Schedule 7                  |                    | 7.                     |                                  |
|     | APPORTIONMENT OF INCOME                                      | (ROUND TO NEARE                | EST DOLLAR)        | <u> </u>               | SCHEDULE 6                       |
|     |  | A. WITHIN GEORGIA              | B. EVERYWH         | ERE                    | C. DO NOT ROUND COL (A)/ COL (B) |
|     |  |                                |                    |                        | COMPUTE TO SIX DECIMALS          |
| 1   | Gross receipts from business                                 |                                |                    |                        |                                  |
|     | Georgia Ratio (Divide Column A by Column B)                  |                                |                    |                        |                                  |
|     | COMPUTATION OF TOTAL INCOME FOR GEORGIA PURPO                |                                | EST DOLLAR)        |                        | SCHEDULE 7                       |
| 1.  | Ordinary income (loss)                                       |                                | ,                  | 1.                     |                                  |
|     | Net income (loss) from rental real estate activities         |                                |                    | 2                      |                                  |
|     | a. Gross income from other rental activities                 |                                |                    |                        |                                  |
| -   |  | 3b. ►                          |                    |                        |                                  |
|     | c. Net income (loss) from other rental activities (Line 3    | a less Line 3b)                | ►                  | 3c.                    |                                  |
| 4.  | Portfolio income (loss): a. Interest Income                  | ·                              |                    | 4a.                    |                                  |
|     | b. Dividend Income   |                                |                    | 4b.                    |                                  |
|     | c. Royalty Income  |                                |                    | 4c.                    |                                  |
|     | d. Net short-term capital gain (loss)                        |                                |                    |                        |                                  |
|     | e. Net long-term capital gain                                |                                |                    | 4e.                    |                                  |
|     | f. Other portfolio income (los                               | s)                             | ······ <b>&gt;</b> | 4f.                    |                                  |
| 5.  | Guaranteed payments to partners                              | 5.                             |                    |                        |                                  |
| 6.  | Net gain (loss) under Section 1231                           | 6.                             |                    |                        |                                  |
| -   | Other Income (loss)  |                                |                    | 7.                     |                                  |
| 8.  |  |                                |                    | 8.                     |                                  |
|     | Additions to Federal income (Schedule 4, Line 9)             |                                | 9.                 |                        |                                  |
| 10. | ,  | 10.                            |                    |                        |                                  |
| 11. |  | 11.                            |                    |                        |                                  |
|     | Total income for Georgia purposes (Line 10 less Line         | 11)                            | ····· ►            | 12.                    |                                  |
| Oth | ner Required Federal Information                             |                                |                    |                        |                                  |
| 1.  | Salaries and wages (Form 1065)                               | 1.                             |                    |                        |                                  |
| 2.  | Taxes and licenses (Form 1065)                               | 2.                             |                    |                        |                                  |
| 3.  | Section 179 deduction (Form 1065)                            | 3.                             |                    |                        |                                  |
| 4.  | Contributions (Form 1065)                                    | 4.                             |                    |                        |                                  |
| 5.  | Investment interest expense (Form 1065)                      |                                | 5.                 |                        |                                  |
| 6.  | Section 59(e)(2) expenditures (Form 1065)                    |                                |                    | 6.                     |                                  |