

2014 Income Tax Return



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Beginning	Endi	ing										
Original Return	Amended Retur	n	Final Retu	n	Name Char	nge		Addr	ess Change	Compo	osite Retu	urn Filed
A. Federal Employer Id.	No.	Name							Location of E	Books for Audi	t (City) 8	(State)
B. GA. Withholding Tax I		Number	and Street				С	ountry	1	Telephone N	lumber	
Payroll WH Number Non	resident WH Number											
C. GA. Sales Tax Reg. N	lo.	City or T	Town						State	Zip Code		
D. Name (if different from	n last year's return)				Number an	nd Stre	eet (if	differe	ent from last yea	ar's return)		
City		State	Zip Cod	е		lf no	o retur	n was	filed last year,	state the reaso	on why	
E. NAICS Code	F. Kind of Busine	ess			e began doin iness in GA	g		H. Ba	sis of this return	٦		
								() C	ASH ()ACC	CRUAL () O	THER	
I. Indicate latest taxable adjusted by the IRS	year J. Nu	mber of Pa		rtners?	ave Nonresio	dent	L. Nu Partr		of Nonresident	M. Amount o Withholding		
				() Yes	or () No							

_	COMPUTATION OF GEORGIA NET INCOME	(ROUND TO NEAREST DOLLA	AR) SCHEDULE 1	
1.	Total Income for Georgia purposes (Line 12, Schedule 7)	1	1.	
2.	Income allocated everywhere (Attach Schedule)	2	2.	
3.	Business income subject to apportionment (Line 1 less Line 2)		3.	
4.	Georgia ratio (Schedule 6, Column C)	4	4.	
5.	Net business income apportioned to Georgia (Line 3 x Line 4) .	5	5.	
6.	Net income allocated to Georgia (Attach Schedule)	6	6.	
7.	Total Georgia net income (Add Line 5 and Line 6)		7.	

Copy of the Federal Return and supporting Schedules must be attached. Otherwise this return shall be deemed incomplete. DECLARATION

I/We declare under the penalties of perjury that I/we have examined this return (including accompanying schedules and statements) and to the best of my/our knowledge and belief it is true, correct, and complete. If prepared by a person other than taxpayer, this declaration is based on all information of which the preparer has any knowledge.

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

Date

Preparer's Firm Name

Preparer's SSN or PTIN

Date



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(Partnership) Name	FEIN	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 14 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 9-14 of the instructions for additional information)

INCOME TO PARTNERS (ROUND TO NEAREST DOL			(ROUND TO NEAREST DOLLAR)	SCHEDULE 3		
	(1.) Na (2.) Si	ame treet and Number	(3.) City, State and Zip (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	2.					
	3.					
	4.					
	1.			5.	6.	
D	2.					
	3.					
	4.					
	1.			5.	6.	
E	2.			-		
	3.			-		
	4.					
	DTAL					
ADDITIONS TO FEDERAL TAXABLE INCOME (ROUND TO NEAREST DOLLAR) SCHEDULE 4						
1. S						
2. N	et inc	come or net profits ta	axes imposed by taxing juris	dictions other than Georgia 2		
3. E	xpens	ses attributable to ta	x exempt income			

Schedule 4 continued on Page 3

Georgia Form 700/2014



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(Par	tnership) Name		FE	N	
	ADDITIONS TO FEDERAL TAXABLE INCOME	(ROUND TO NEARES	ST DOLLAR)		SCHEDULE 4 (continued)
4.	Federal deduction for income attributable to domestic	production activities (IR	C section 199)	4.	
5.	Intangible expenses and related interest costs			5.	
6.	Captive REIT expenses and costs	6.			
-	Other additions (Attach schedule)	7.			
8.		8.			
	Total (Add Lines 1 through 8) Enter here and on Line 9,	Schedule 7		9.	
	SUBTRACTIONS FROM FEDERAL TAXABLE INCOME	(ROUND TO NEARE		0.1	SCHEDULE 5
1.	Interest on obligations of United States (must be reduced b	by direct and indirect interest	t expenses)	1.	
	Exception to intangible expenses and related interest c	-		2.	
	Exception to captive REIT expenses and costs (Attach I			3.	
	Other subtractions (Attach Schedule)			4.	
5.				5.	
6.				6.	
	Total (Add Lines 1 through 6) enter here and on Line 1	1. Schedule 7		7.	
_	APPORTIONMENT OF INCOME	(ROUND TO NEARE			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	DSES (ROUND TO NEARE	EST DOLLAR)		SCHEDULE 7
1.	Ordinary income (loss)			1.	
	Net income (loss) from rental real estate activities			2.	
3.	a. Gross income from other rental activities	3a. 🕨			
	b. Less expenses (attach schedule)	3b. 🕨		<u> </u>	
	c. Net income (loss) from other rental activities (Line	3a 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	. ,		4d.	
	e. Net long-term capital gain			4e.	
	f. Other portfolio income (lo	ss)	····· ►	4f.	
	Guaranteed payments to partners			5.	
	Net gain (loss) under Section 1231		-	6.	
	Other Income (loss)		-	7.	
	Total Federal income (add Lines 1 through 7)			8.	
	Additions to Federal income (Schedule 4, Line 9)		-	9.	
	Total (add Lines 8 and 9)			10.	
	Subtractions from Federal income (Schedule 5, Line 7			11.	
	Total income for Georgia purposes (Line 10 less Line	11)	····· ►	12.	
Oth	er 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.	