



1901704016

Georgia Form 700 (Rev. 08/01/18) Page 1

Partnership Tax Return
Georgia Department of Revenue

2018 Beginning

Income Tax Return

Original Return, Ending Amended Return, Amended Due to IRS Audit, Name Change, Address Change, Final Return, Composite Return Filed

Form with fields: A. Federal Employer ID No., B. Name, C. Location of Records for Audit (City)&(State), D. GA Withholding Tax Number, E. Number and Street, F. Country, G. Telephone Number, H. GA Sales Tax Reg. No., I. City or Town, J. State, K. Zip Code, L. NAICS Code, M. Type of Business, N. Date began doing business in GA, O. Accounting Method, P. Indicate latest taxable year adjusted by the IRS, Q. Number of K-1s, R. Do you have Nonresident Partners?, S. Number of Nonresident K-1s, T. Amount of Nonresident Withholding paid for tax year

AUDIT OR AMENDED RETURN PAYMENT ELECTION (ROUND TO NEAREST DOLLAR) SCHEDULE 1

By checking the box, the Partnership elects to pay the tax on behalf of its partners due to an IRS Audit, Georgia audit, or amended return.

Table with 5 rows: 1. Additional Georgia Taxable Income, 2. Tax-6% x Line 1, 3. Interest due, 4. Penalty due, 5. Total due

COMPUTATION OF GEORGIA NET INCOME (ROUND TO NEAREST DOLLAR) SCHEDULE 2

Table with 7 rows: 1. Total Income for Georgia purposes, 2. Income allocated everywhere, 3. Business income subject to apportionment, 4. Georgia ratio, 5. Net business income apportioned to Georgia, 6. Net income allocated to Georgia, 7. Total Georgia net income

Copy of the Federal Return and supporting Schedules must be attached if filing by paper. 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.

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

By providing my e-mail address I am authorizing the Georgia Department of Revenue to electronically notify me at the below e-mail address regarding any updates to my accounts. Check the box to authorize the Georgia Department of Revenue to discuss the contents of this return with the named preparer.

E-mail Address Preparer's Firm Name

Date Preparer's SSN or PTIN Date



1901704026

(Partnership) Name _____

FEIN _____

CREDIT USAGE AND CARRYOVER

(ROUND TO NEAREST DOLLAR)

SCHEDULE 3

TO
CLAIM
TAX

CREDITS YOU

MUST FILE

ELECTRONICALLY



1901704036

(Partnership) Name _____

FEIN _____

CREDIT ALLOCATION TO OWNERS

(ROUND TO NEAREST DOLLAR)

SCHEDULE 4

TO
CLAIM
TAX

CREDITS YOU

MUST FILE

ELECTRONICALLY



1901704046

(Partnership) Name _____ FEIN _____

INCOME TO PARTNERS		(ROUND TO NEAREST DOLLAR)		SCHEDULE 5
(1.) Name	(3.) City, State and Zip	Profit (Loss) Sharing %	Georgia Source Income	
(2.) Street and Number	(4.) ID Number			
A	1.	5.	6.	
	2.			
	3.			
	4.			
B	1.	5.	6.	
	2.			
	3.			
	4.			
C	1.	5.	6.	
	2.			
	3.			
	4.			
D	1.	5.	6.	
	2.			
	3.			
	4.			
E	1.	5.	6.	
	2.			
	3.			
	4.			
TOTAL				

ADDITIONS TO FEDERAL TAXABLE INCOME		(ROUND TO NEAREST DOLLAR)		SCHEDULE 6
1. State and municipal bond interest other than Georgia or political subdivision thereof		1.		
2. Net income or net profits taxes imposed by taxing jurisdictions other than Georgia		2.		
3. Expenses attributable to tax exempt income		3.		
4. Federal deduction for income attributable to domestic production activities (IRC section 199)		4.		
5. Intangible expenses and related interest costs		5.		
6. Captive REIT expenses and costs		6.		
7. Other additions (Attach schedule)		7.		
8. <input type="text"/>		8.		
9. Total (Add Lines 1 through 8) enter here and on Line 9, Schedule 9.....		9.		

SUBTRACTIONS FROM FEDERAL TAXABLE INCOME		(ROUND TO NEAREST DOLLAR)		SCHEDULE 7
1. Interest on obligations of United States (must be reduced by direct and indirect interest expenses)		1.		
2. Exception to intangible expenses and related interest cost (Attach IT-Addback).....		2.		
3. Exception to captive REIT expenses and costs (Attach IT-REIT).....		3.		
4. Other subtractions (Attach Schedule)		4.		
5. <input type="text"/>		5.		
6. <input type="text"/>		6.		
7. Total (Add Lines 1 through 6) enter here and on Line 11, Schedule 9.....		7.		

APPORTIONMENT OF INCOME		(ROUND TO NEAREST DOLLAR)		SCHEDULE 8
	A. WITHIN GEORGIA	B. EVERYWHERE	C. DO NOT ROUND COL (A)/ COL (B) COMPUTE TO SIX DECIMALS	
1. Gross receipts from business				
2. Georgia Ratio (Divide Column A by Column B).....				



1901704056

(Partnership) Name _____ FEIN _____

COMPUTATION OF TOTAL INCOME FOR GEORGIA PURPOSES (ROUND TO NEAREST DOLLAR)

SCHEDULE 9

1. Ordinary income (loss)		1.	
2. Net income (loss) from rental real estate activities		2.	
3. a. Gross income from other rental activities	3a.		
b. Less expenses (attach schedule)	3b.		
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 (loss)		4d.	
e. Net long-term capital gain (loss)		4e.	
f. Other portfolio income (loss)		4f.	
5. Guaranteed payments to partners		5.	
6. Net gain (loss) under Section 1231		6.	
7. Other Income (loss)		7.	
8. Total Federal income (add Lines 1 through 7)		8.	
9. Additions to Federal income (Schedule 6, Line 9)		9.	
10. Total (add Lines 8 and 9)		10.	
11. Subtractions from Federal income (Schedule 7, Line 7)		11.	
12. Total income for Georgia purposes (Line 10 less Line 11)		12.	

Other 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.	