IT-550 (Rev. 01/22/19) STATE OF GEORGIA DEPARTMENT OF REVENUE TAXPAYER SERVICES DIVISION

# CLAIM FOR REFUND OF GEORGIA INCOME TAX ERRONEOUSLY OR ILLEGALLY COLLECTED

IMPORTANT			
SEE INSTRUCTIONS ON	Street and Number		
BACK PAGE FOR USES			
OF THIS FORM AND FOR MAILING	City or Town	or Town County State Zip C	
ADDRESSES	Federal Employer ID Number	Georgia W	ithholding Number
	Taxpayer's Social Security Nu	umber Spouse's S	Social Security Number
Tax Type:   With	thholding $\square$ C	Corporate □ Indiv	idual
Taxable year or period for white	•	-	
Calendar year or period——	<del>-</del>	or fiscal year ending	
2. Amount of tax paid		\$	
. Amount of tax due		\$	
4. Amount of refund claimed		\$	
Claimant believes that this claim	should be allowed for the fo		
			iles and statements) has been examin
by me (us) and to the best of my (or	ur) knowledge and belief is tru	rue and correct.	iles and statements) has been examin
by me (us) and to the best of my (or  Date  (Claim must be signed by both hu	ur) knowledge and belief is true,	Signed:	
by me (us) and to the best of my (or  Date  (Claim must be signed by both hu	ur) knowledge and belief is true,	Signed:	
by me (us) and to the best of my (or Date  (Claim must be signed by both hua joint return was filed. Corpora	ur) knowledge and belief is true,,	er title.)  S FOR OFFICIAL USE (	ONLY.
by me (us) and to the best of my (or Date  (Claim must be signed by both hu a joint return was filed. Corpora	ur) knowledge and belief is true,,	er title.)  S FOR OFFICIAL USE (	ONLY.
Date  (Claim must be signed by both hu a joint return was filed. Corporation  I recommend that action on the Amount Claimed	ur) knowledge and belief is true,	er title.)  S FOR OFFICIAL USE Coated in the following sche	ONLY.
by me (us) and to the best of my (or Date  (Claim must be signed by both he a joint return was filed. Corpora  I recommend that action on the Amount Claimed  Amount Rejected	ur) knowledge and belief is true,	er title.)  S FOR OFFICIAL USE (cated in the following sche	ONLY.
Date	ur) knowledge and belief is true,	er title.)  S FOR OFFICIAL USE (cated in the following sche	ONLY.
Date	ur) knowledge and belief is true,	er title.)  S FOR OFFICIAL USE (cated in the following sche	ONLY.
I (we) declare under the penalties or by me (us) and to the best of my (or Date  (Claim must be signed by both he a joint return was filed. Corpora  I recommend that action on the Amount Claimed  Amount Rejected  Amount Allowed  Interest From  Total  Examined by:	ur) knowledge and belief is true,	er title.)  S FOR OFFICIAL USE (cated in the following sche	ONLY.

Georgia Department of Revenue, Taxpayer Services Division

### **INSTRUCTIONS FOR FORM IT-550**

Form IT -550 may be used to request a refund of withholding, corporate, and individual income taxes. Instructions for completing the form are listed below for each tax type.

### WITHHOLDING TAX

Effective July 1, 2016, any employer required to pay taxes electronically (those owing more than \$500.00 in connection with any return, report, or other document pertaining to withholding tax) is required to file any claims for refund electronically through the Department's Georgia Tax Center (GTC). For all other employers Form IT -550 can be used to claim a refund of withholding tax for a particular period. An amended return for the period in question and applicable W-2Cs (if the year has ended) should be attached to the IT-550. To amend Form G-7, check the "Amended Return" box near the top of the form and write the corrected information in the appropriate fields. Additionally, O.C.G.A. § 48-7-104 allows an employer to adjust a prior period on a subsequent return for the same calendar year. If the adjustment results in a refund, Form G-7 for the period in which the adjustment is taken should be attached to the IT-550 and mailed to the Taxpayer Services Division. The mailing address for a withholding tax related IT-550 is Taxpayer Services Division, 1800 Century Blvd. NE, 8th Floor, Atlanta, Georgia 30345-3205. For additional information, contact the Taxpayer Services Division at 1-877-423-6711.

# CORPORATE INCOME OR NET WORTH TAX

In general, Form IT-550 should only be used to claim a refund for estimated taxes that were not claimed on the original corporate income tax return. The mailing address for a corporate income or net worth tax related IT-550 is Georgia Taxpayer Services Division, 1800 Century Blvd. NE, 8th Floor, Atlanta, Georgia 30345-3205. For additional information, contact the Taxpayer Services Division at 1-877-423-6711.

# INDIVIDUAL INCOME TAX

Generally, Form 500 Individual Income Tax Return or Form 500X Amended Individual Income Tax Return should be used to claim a refund of individual income tax. However, if your return reflects a refund of less than \$1, you will not receive a refund check unless a separate application is filed in duplicate on Form IT-550. A **copy of Form 500 or 500X**, **as applicable, should be attached to the IT-550 when filed.** Form IT-550 should be mailed to the mailing address listed on Form 500 or Form 500X. For additional information, contact the Taxpayer Services Division at 1-877-423-6711.