

Georgia Form **500**
Individual Income Tax Return
Georgia Department of Revenue
2015



1600404046

YOUR SOCIAL SECURITY NUMBER

- 21. Estimated tax for 2015 and Form IT-560.....▶ 21.
- 22. Total prepayment credits (Add Lines 19, 20 and 21).....▶ 22.
- 23. If Line 18 exceeds Line 22 enter BALANCE DUE STATE.....▶ 23.
- 24. If Line 22 exceeds Line 18 enter OVERPAYMENT amount.....▶ 24.
- 25. Amount to be credited to 2016 ESTIMATED TAX▶ 25.
- 26. Georgia Wildlife Conservation Fund (No gift of less than \$1.00).....▶ 26.
- 27. Georgia Fund for Children and Elderly (No gift of less than \$1.00).....▶ 27.
- 28. Georgia Cancer Research Fund (No gift of less than \$1.00)▶ 28.
- 29. Georgia Land Conservation Program (No gift of less than \$1.00).....▶ 29.
- 30. Georgia National Guard Foundation (No gift of less than \$1.00)▶ 30.
- 31. Dog & Cat Sterilization Fund (No gift of less than \$1.00).....▶ 31.
- 32. Saving the Cure Fund (No gift of less than \$1.00).....▶ 32.
- 33. Realizing Educational Achievement Can Happen (REACH) Program▶ 33.
(No gift of less than \$1.00)
- 34. Form 500 UET (Estimated tax penalty).....▶ 34.
- 35. (If you owe) Add Lines 23, 26 thru 34
MAKE CHECK PAYABLE TO GEORGIA DEPARTMENT OF REVENUE.....▶ 35.
- 36. (If you are due a refund) Subtract the sum of Lines 25 thru 34 from Line 24
THIS IS YOUR REFUND▶ 36.

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36a. Direct Deposit (For U.S. Accounts Only) Type: Checking Savings Routing Number

Account Number

You can help eliminate \$1Million of processing costs by choosing Direct Deposit. If you do not enter Direct Deposit information, a paper check will be issued.

(PAYMENT) PROCESSING CENTER
GEORGIA DEPARTMENT OF REVENUE
PO BOX 740399
ATLANTA, GA 30374-0399

(REFUND and NO BALANCE DUE) PROCESSING CENTER
GEORGIA DEPARTMENT OF REVENUE
PO BOX 740380
ATLANTA, GA 30374-0380

ENCLOSE ALL ITEMS IN RETURN ENVELOPE. DO NOT STAPLE YOUR CHECK, W-2s, OTHER WITHHOLDING DOCUMENTS, OR TAX RETURN 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 the taxpayer(s), this declaration is based on all information of which the preparer has knowledge. Georgia Public Revenue Code Section 48-2-31 stipulates that taxes shall be paid in lawful money of the United States, free of any expense to the State of Georgia.

Taxpayer's Signature (Check box if deceased)

PHONE NUMBER

Spouse's Signature (Check box if deceased)

DATE

DATE

NAME OF PREPARER OTHER THAN TAXPAYER
Do you want to authorize DOR to discuss this return with the named preparer. Yes

Signature of Preparer

PREPARER'S FEIN

PREPARER'S SSN/PTIN

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

PHONE NUMBER

TAXPAYER'S EMAIL ADDRESS