



2000804015

Georgia Form 501 (Rev. 06/29/20)
Fiduciary Income Tax Return**2019** **Page 1**Fiscal Year Beginning - - Fiscal Year Ending - -

- ☐ Part Year Resident _____ to _____
☐ Nonresident
☐ Change in Trust or Estate Name
☐ Change in Fiduciary
☐ Change of Address
- ☐ Grantor Trust
☐ Trust is a Qualified Funeral Trust
☐ Estate is a Bankruptcy Estate
☐ 500 UET Exception Attached

Department Use Only

A. Federal Employer ID No.		Name of Estate or Trust		Date of Creation of Trust	
B. Date of Decedent's Death		Name of Fiduciary		Title of Fiduciary	Telephone No.
C. Address of Fiduciary (Number and Street)					(Apt., Suite or Building Number)
City		State	Zip Code	Country	

Schedule 1 - Computation of Tax

1. Income of fiduciary (Adjusted total income from attached Form 1041).....	1.	
2. Adjustments: (List of all items in Schedule 2, Page 3).....	2.	
3. Total (Net total of Lines 1 and 2)	3.	
4. Beneficiaries' Share of Income (Total of Schedule 3).....	4.	
5. Balance (Line 3 less Line 4)	5.	
6. Exemptions: <input type="checkbox"/> 6a. Trust \$1350 <input type="checkbox"/> 6b. Estate \$2700	6.	
7a. Georgia Taxable Income before GA NOL (Line 5 less Line 6).....	7a.	
7b. Georgia NOL utilized (cannot exceed Line 7a or the amount after applying the 80% limitation, see instructions for more information).....	7b.	
7c. Net taxable income of fiduciary (Line 7a less Line 7b).....	7c.	
8. Total tax	8.	
9. Less Credits used 9a. Other state(s) tax credit used (Include a copy of the other state(s) tax return).....	9a.	
9b. Schedule 4 credits cannot be claimed unless filed electronically.	9b.	
9c. Total Credits used (cannot exceed Line 8).....	9c.	
10. Tax less credit (Net total of Line 8 less Line 9c, if 0 or less, enter 0)	10.	
11. Less: 11a. Georgia Estimated Tax Paid	11a.	

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Schedule 1- Computation of Tax (continued)

11b. Georgia Tax Withheld (G2-A, G2-LP and/or G2-RP)	11b.	
11c. Schedule 4B Refundable Tax Credits (cannot be claimed unless filed electronically)	11c.	
11d. Total (Add Lines 11a, 11b and 11c).....	11d.	
12. Balance of tax due. If Line 10 exceeds Line 11d, enter Line 10 less Line 11d.....	12.	
13. Overpayment. If Line 11d exceeds Line 10, enter Line 11d less Line 10.....	13.	
14. Amount from Line 13 to be credited to next year's estimated tax.....	14.	
15. Interest	15.	
16. Late payment penalty	16.	
17. Late filing penalty	17.	
18. Penalty for underpayment of estimated tax (UET)	18.	
19. (If you owe) Add Lines 12, 15 thru 18. Make check payable to Georgia Department of Revenue.	19.	
20. (If you are due a refund) Subtract the sum of Lines 14 thru 18 from Line 13. This is your refund.	20.	

Mailto: Georgia Department of Revenue Processing Center PO Box 740316 Atlanta, Georgia 30374-0316

Direct Deposit Options

20a. Direct Deposit (For U.S. Accounts Only)

Type: Checking ☐ Routing Number

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Savings ☐ Account Number

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See Instructions in the IT-511 booklet for further details.
 If you do not enter Direct Deposit information or if you are a first time filer you will be issued a paper check.

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 the taxpayer, 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.

SIGNATURE OF FIDUCIARY

DATE _____

PHONE NUMBER

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 account(s).

FIDUCIARY E-MAIL ADDRESS

☐ Check the box to authorize the Georgia Department of Revenue to discuss the contents of this return with the named preparer.

SIGNATURE OF PREPARER OTHER THAN FIDUCIARY

DATE _____

PREPARER'S IDENTIFICATION NUMBER

NAME OF PREPARER OTHER THAN FIDUCIARY

PHONE NUMBER

THE FIDUCIARY MUST ATTACH TO THIS RETURN A COPY OF ITS FEDERAL RETURN AND SUPPORTING SCHEDULES



Schedule 2 - Adjustments to Income

ADDITIONS			
1. Municipal bond interest - Other states.....		1.	
2. Income tax deduction other than Georgia.....		2.	
3. Expense allocable to exempt income (Other than U.S. obligations).....		3.	
4. Net operating loss carryover deducted on the Federal return		4.	
5. Other <input type="text"/>		5.	
6. TOTAL ADDITIONS		6.	

SUBTRACTIONS			
7. Interest - U.S. Government Obligations (Must be reduced by direct and indirect interest expense).		7.	
8. Income Tax Refund other than Georgia.....		8.	
9. Reserved		9.	
10. Other <input type="text"/>		10.	
11. TOTAL SUBTRACTIONS		11.	
12. NET ADJUSTMENT: Total additions less total subtractions. (Enter also on Line 2, Schedule 1).....		12.	

Schedule 3 - Beneficiaries' Share of Income (For each Beneficiary complete Name, Address, City, State, ZIP, Country, ID Number and Share of Income)

A	Name	ID Number		Share of Income
	Address			
	City	State	ZIP	Country
B	Name	ID Number		Share of Income
	Address			
	City	State	ZIP	Country
C	Name	ID Number		Share of Income
	Address			
	City	State	ZIP	Country
D	Enter total (Including additional Beneficiaries' Share of Income from attached schedule)			



TAXPAYER'S FEIN

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Schedule 4 - Credit Usage and Carryover

(ROUND TO NEAREST DOLLAR)

1. Complete a separate schedule for each Credit Code.
2. Total the amounts on Line 13 of each schedule and enter the total on the credit line of the return.
3. If there is a credit eligible for carryover to this tax year, please complete a schedule even if the credit is not used for this tax year.
4. See the instructions for a list of credit codes.
5. See the relevant forms, statutes, and regulations to determine how the credit is allocated to the owners and to determine when carryovers expire.
6. If the credit for a particular credit code originated with more than one person or company, enter separate information on Lines 3 through 9 below.
7. The credit certificate number is issued by the Department of Revenue for credits that are preapproved. If applicable, please enter the Department of Revenue credit certificate number where indicated.
8. Before the Line 14 carryover is applied to next tax year, the amount must be reduced by any amounts elected to be applied to withholding for this tax year and by any carryovers that have expired.

For the credit generated this tax year, list the Company Name, ID number, Credit Certificate number, if applicable, and % of credit (purchased credits should also be included). If the credit originated with this taxpayer, enter this taxpayer's name and ID# below and 100% for the percentage.

- | | | |
|---|-------------|--------------------------------|
| 1. Credit Code | | |
| 2. Credit remaining from previous years (do not include amounts elected to be applied to withholding) | | |
| 3. Company Name | ID Number | |
| Credit Certificate # | % of Credit | Credit Generated this Tax Year |
| 4. Company Name | ID Number | |
| Credit Certificate # | % of Credit | Credit Generated this Tax Year |
| 5. Company Name | ID Number | |
| Credit Certificate # | % of Credit | Credit Generated this Tax Year |
| 6. Company Name | ID Number | |
| Credit Certificate # | % of Credit | Credit Generated this Tax Year |
| 7. Company Name | ID Number | |
| Credit Certificate # | % of Credit | Credit Generated this Tax Year |
| 8. Company Name | ID Number | |
| Credit Certificate # | % of Credit | Credit Generated this Tax Year |
| 9. Company Name | ID Number | |
| Credit Certificate # | % of Credit | Credit Generated this Tax Year |
| 10. Total available credit for this tax year (sum of Lines 2 through 9) | 10. | |
| 11. Enter the amount of the credit sold (only certain credits can be sold, see instructions) | 11. | |
| 12. List the credit allocated to the beneficiaries (See Schedule 5) | 12. | |
| 13. Credit used for this tax year | 13. | |
| 14. Potential carryover to next tax year (Line 10 less Lines 11,12, and 13) | 14. | |

CREDITS MUST BE FILED ELECTRONICALLY

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SCHEDULE 4B
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TAXPAYER'S FEIN

Schedule 4B - Refundable Tax Credits

(ROUND TO NEAREST DOLLAR)

1. Complete a separate schedule for each Credit Code.
2. Total the amounts on Line 13 of each schedule and enter the total on the credit line of the return.
3. If there is a credit eligible for carryover to this tax year, please complete a schedule even if the credit is not used for this tax year.
4. See the instructions for a list of credit codes.
5. See the relevant forms, statutes, and regulations to determine how the credit is allocated to the owners and to determine when carryovers expire.
6. If the credit for a particular credit code originated with more than one person or company, enter separate information on Lines 3 through 9 below.
7. The credit certificate number is issued by the Department of Revenue for credits that are preapproved. If applicable, please enter the Department of Revenue credit certificate number where indicated.
8. Before the Line 14 carryover is applied to next tax year, the amount must be reduced by any amounts elected to be applied to withholding for this tax year and by any carryovers that have expired.

For the credit generated this tax year, list the Company Name, ID number, Credit Certificate number, if applicable, and % of credit (purchased credits should also be included). If the credit originated with this taxpayer, enter this taxpayer's name and ID# below and 100% for the percentage.

Note: A purchased Timber Tax Credit is not a refundable tax credit. Use Schedule 4 if the Timber Tax Credit was purchased.

1. Credit Code		
2. Credit remaining from previous years (do not include amounts elected to be applied to withholding)		
3. Company Name	ID Number	
Credit Certificate #	% of Credit	Credit Generated this Tax Year
4. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated this Tax Year
5. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated this Tax Year
6. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated this Tax Year
7. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated this Tax Year
8. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated this Tax Year
9. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated this Tax Year
10. Total available credit for this tax year (sum of Lines 2 through 9)		10.
11. Enter the amount of the credit sold (only certain credits can be sold, see instructions)		11.
12. List the credit allocated to the beneficiaries (See Schedule 5)		12.
13. Credit used for this tax year, enter here and on 501 Line 11c		13.
14. Potential carryover to next tax year (Line 10 less Lines 11, 12, and 13)		14.

CREDITS MUST BE FILED ELECTRONICALLY



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TAXPAYER'S FEIN

Schedule 5 - Credit Allocation to Beneficiaries (ROUND TO NEAREST DOLLAR)

Credits are apportioned between the fiduciary and their respective beneficiaries on the basis of the income of the fiduciary and the income that is distributed to the beneficiaries. List the details regarding the amounts allocated to the beneficiaries for each credit code. More than one credit code can be entered on this schedule.

Credit Code	Name of Beneficiary	ID Number of Beneficiary	Amount Allocated	Credit Certificate #
1.				
2.				
3.				
4.				
5.				
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33.				
34.				

CREDITS MUST BE FILED ELECTRONICALLY

Instructions for the Individual/Fiduciary (525-TV) Payment Voucher

- For faster and more accurate posting to your account, use a payment voucher with a **valid scanline** from the Georgia Department of Revenue's website dor.georgia.gov or one produced by an approved software company listed at dor.georgia.gov/approved-software-vendors.
- Only complete this voucher if you owe taxes.
- Complete the name and address field located on the upper right side of the voucher.
- Please write your SSN or FEIN on your check or money order.
- Remove your check stub to keep with your records.
- If the due date falls on a weekend or holiday, the tax shall be due on the next day that is not a weekend or holiday.
- If you are **filing electronically**, mail only your voucher and payment to:

**Processing Center
Georgia Department of Revenue
PO Box 740323
Atlanta, Georgia 30374-0323**

- If you are filing a paper return; mail your return, 525-TV payment voucher and your payment to the address that appears on the return.

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.

PLEASE DO NOT mail this entire page. Please cut along dotted line and mail only your voucher and payment.
PLEASE DO NOT STAPLE. PLEASE REMOVE ALL ATTACHED CHECK STUBS.

- Cut along dotted line

525-TV (Rev. 03/20/19)

Individual and Fiduciary Payment Voucher

Individual or Fiduciary Name and Address:

2052504018

☐ Amended Return

☐ Paper Return

☐ Electronically Filed

Type of Return:

Taxpayer's SSN or Fiduciary FEIN	Spouse's SSN (if joint or combined return)	Tax Year	Daytime Telephone Number	Vendor Code 040
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PLEASE DO NOT STAPLE. REMOVE ALL CHECK STUBS.

PROCESSING CENTER
GEORGIA DEPARTMENT OF REVENUE
PO BOX 740323
ATLANTA GA 30374-0323

Amount Paid \$

Instructions

Federal Tax Changes, New Legislation, and other Policy Information are available via the Department's website <https://dor.georgia.gov/rules-policies/income-tax>

Every resident and nonresident fiduciary having income from sources within Georgia or managing funds or property for the benefit of a resident of this state is required to file a Georgia income tax return on Form 501 (see our website for information regarding the U.S. Supreme Court Kaestner Decision).

Returns are required to be filed by the 15th day of the 4th month following the close of the taxable year. The due date for a calendar year 2019 fiduciary is April 15, 2020.

The Georgia Code provides penalties for failure to comply with its provisions and for interest on late payments of tax and deficiencies.

SPECIFIC INSTRUCTIONS

If you are a Trust which is a Qualified Funeral trust or an Estate which is a Bankruptcy Estate, please check the appropriate box on Page 1, fill in the correct tax on Line 8 and attach supporting documentation.

Grantor Trust Instructions. If the taxpayer is a grantor trust, in addition to checking the Grantor Trust box on page 1 of the return, the grantor trust should attach to the return the schedule which shows the activity (as they do for Federal purposes), leave the rest of the return blank except when the grantor trust generates credits or has credits assigned, allocated, or transferred to it. In this case, Schedule 4 and Schedule 4B (if applicable) should be completed. Schedule 5 should be used to transfer the credit to the owner of the grantor trust. This is necessary so that the returns can be processed and the credits flow to the proper taxpayer.

Schedule 1

Enter on Line 1 the amount of gross income less the itemized deductions shown on the Federal Form 1041.

Enter on Line 2 the net adjustment from Schedule 2.

Enter on Line 4 the total portion of income distributable to all beneficiaries as listed in Schedule 3.

Enter on Line 6 the exemption: Trusts \$1,350, Estates \$2,700. Compute the total income tax on the amount shown on Line 7c from the following tax rate schedule, entering the total tax due on Line 8.

If the amount on Line 7 is Over	But Not Over	Amount of Tax is	Of Excess Over
.....	\$ 750	1%.....	
\$ 750	\$ 2250	\$ 8.00+2%	\$ 750
\$ 2250	\$ 3750	\$ 38.00+3%	\$ 2250
\$ 3750	\$ 5250	\$ 83.00+4%	\$ 3750
\$ 5250	\$ 7000	\$ 143.00+5%	\$ 5250
\$ 7000		\$ 230.00+5.75%	\$ 7000

Part-year/Nonresident Fiduciary. If the fiduciary is a part-year resident or nonresident please check the appropriate box at the top of the form and for a part-year resident fill in the part-year resident dates. **Lines 1 through 6 of the form should be left blank.** Instead a schedule should be attached which shows the total taxable income before exemptions (computed as if the fiduciary were a full year resident), the non taxable income before exemptions, and the Georgia taxable income before exemptions. The exemption amount should then be prorated based on the Georgia taxable income before exemptions to the total taxable income before exemptions. The Georgia taxable income before exemptions less the prorated exemption amount should be entered on Line 7a.

Line 9

All credits, except the credit for income tax paid to another state, should be listed on a separate Schedule 4 and the total amount from Line 13 of all Schedule 4s should be listed on Line 9b of Schedule 1. For the other states tax credit, a copy of the other state(s)' return must be attached. Please use the attached worksheet to compute the other state(s) tax credit. A return is required to be electronically filed if the return generates, claims, utilizes, or includes in any manner a series 100 credit claimed on Schedule 4 or 4B (see page 9).

Enter the information as specified on each line of schedule 4 and 4B. With respect to Line 11, the "Tax Credit Summaries" on the Department's website dor.georgia.gov includes information regarding which credits can be sold.

Line 11b

Credit for nonresident withholding on distributions from pass through entities and sale of property by nonresidents. See O.C.G.A. Sections 48-7-128 and 48-7-129. **Attach a copy of G2-RP or G2-A or the closing statement showing the amount withheld. The amount withheld from a G2-LP should also be put on Line 11b.**

Schedule 2

Georgia taxable income of a fiduciary is its Federal income with certain adjustments as provided in Code Section 48-7-27. List all additions and all subtractions in the appropriate sections of Schedule 2. The more common adjustments are shown.

ADDITIONS: Interest on State and Municipal bonds other than Georgia and its political subdivisions. Any income tax claimed as a deduction on Form 1041 other than Georgia. Fiduciary fee and other expense allocable to income exempt from Georgia tax (other than U.S. obligations).

SUBTRACTIONS: Interest and dividends on U.S. Government bonds and other U.S. obligations. U.S. obligation income must be reduced by direct and indirect interest expense. To arrive at this reduction, the total interest expense is multiplied by a fraction, the numerator of which is the taxpayers average adjusted basis of the U.S. obligations, and the denominator of which is the average adjusted basis of all assets of the taxpayer. NOTE: Interest received from the Federal National Mortgage Association (FNMA), Government National Mortgage Association (GNMA), Federal Home Loan Mortgage Corporation (FHLMC), and interest derived from repurchase agreements are not considered to be obligations of the United States and are taxable. Federally taxable interest on "Build America Bonds" and other Georgia municipal interest for which there is a special exemption under Georgia law. "Recovery Zone

Instructions

Economic Development Bonds" under Section 1400U-2 of the Internal Revenue Code or any other bond treated as a "Qualified Bond" under Section 6431(f) of the Internal Revenue code are considered "Build America Bonds" for this purpose. Income Tax refunds included as income on Form 1041 other than Georgia. Enter the total adjustments on the indicated line of Schedule 2 and on Line 2, Schedule 1. See Georgia Code Section 48-7-27 for additional adjustments.

Georgia net operating loss (NOL) carryover from previous years. Please note that before determining how much NOL can be carried from the previous year to the current year, the income from the previous year must be recomputed using the schedule at the top of Page 3 of the Form 500-NOL. Please see the schedule at the top of Page 3 of the Form 500-NOL and the related instructions on Page 4 of the Form 500-NOL.

Line 7b: Georgia NOL Utilized

Net operating losses (NOLs) for tax years 2018 and later that are applied to Georgia income cannot exceed 80% of Georgia income before NOLs. Use the schedule below to compute the net operating losses that can be used in the current year.

1. NOL carry forward available for current year from years before 2018 _____
2. NOL carry forward available for current year from years 2018 and later _____
3. Income before GA NOL (Line 7a of Form 501 or 501X) _____
4. NOL from Line 1 applied to current year _____
5. NOL from Line 2 applied to current year (cannot exceed 80% of Line 3) _____
6. Total NOL applied - add Lines 4 and 5, also enter on Line 7b of Form 501 or 501X _____

Schedule 3

If there are more than 3 beneficiaries, attach a list showing the same information for each. The total of Schedule 3 must be the same as the amount on Line 4, Schedule 1.

Schedule 4, Schedule 4B and Schedule 5

Credits are from the Fiduciary or from the ownership of an S Corp., LLC, LLP, or Partnership interest. If credits are claimed on Schedule 4 or 4B the return must be filed electronically.

GENERAL INFORMATION

PENALTIES AND INTEREST

DELINQUENT FILING OF RETURN - 5% of the tax not paid by original due date

for each month or fractional part thereof - up to 25%. **FAILURE TO PAY** tax shown on a return by due date - 1/2 of 1% of the tax due for each month or fractional part thereof - up to 25%.

Note: Late payment and late filing penalties together cannot exceed 25% of tax not paid by the original due date.

A PENALTY OF \$1,000 may be assessed against an individual who files a frivolous return.

NEGLIGENT underpayment of tax - 5% of the underpayment.

FRAUDULENT UNDERPAYMENT - 50% thereof.

FAILURE TO FILE ESTIMATED TAX - 9% per annum for the period of underpayment.

Form 500 UET is available upon request and on our website for computation of underestimated installment payments. If you were eligible for an estimated tax penalty exception on Form 500 UET, please check the "500 UET Exception Attached" box, include the revised penalty on Line 18 of the Form 501 (if the revised penalty is zero, enter zero), and include the 500 UET with the return.

Interest accruing for months beginning before July 1, 2016 accrues at the rate of 12 percent annually. Interest that accrues for months beginning on or after July 1, 2016 accrues at an annual rate equal to the Federal Reserve prime rate plus 3 percent. The interest rate will be reviewed and may be adjusted in January of each subsequent calendar year based on the Federal Reserve Rate.

ESTIMATED TAX

Code Section 48-7-114 requires Fiduciaries to pay estimated tax. Each Fiduciary subject to Georgia Income Tax who reasonably expects to have during the year gross income which exceeds: (1) The personal exemption; plus (2) Estimated deductions; plus (3) \$1,000 income not subject to withholding is required to file. However, a fiduciary shall not be required to pay estimated tax with respect to any taxable year ending before the date two years after the date of the decedent's death in the case of:

1. the estate of a decedent; or
2. a testamentary trust as defined in IRC Section 6654(l)(2)(B)

WHEN AND WHERE TO FILE ESTIMATED TAX. Estimated tax payments required to be filed by persons not regarded as farmers or fishermen shall be filed on or before April 15th of the taxable year, except that if the above requirements are first met on or after April 1st, and before June 1st, the tax must be paid by June 15th; on or after June 1st and before September 1st, by September 15th; and on or after September 1st, by January 15th of the following year. If the due date falls on a weekend or holiday, the tax shall be due on the next day that is not a weekend or holiday. Fiduciaries filing on a fiscal-year basis ending after December 31st, must file on corresponding dates. The estimate coupon, Form 500 ES, should be mailed to the Department of Revenue, Processing Center, P.O. Box 740319, Atlanta, GA 30374-0319.

PAYMENT OF ESTIMATED TAX. Payment in full of your estimated tax may be made with the first required payment or in equal installments during the year on or before April 15th, June 15th, September 15th, and the following January 15th. Make your check or money order payable to "Georgia Department of Revenue." 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."

TAX CREDITS

The following Credits from the Fiduciary or from the ownership of an S Corp, LLC, LLP or Partnership Interest which will be reflected on the Fiduciary's K-1 must be listed on Form 501, Schedule 4 or 4B. The entity information and credit code must be included. Additional documentation for claiming a credit is required where indicated.

NOTE: Credit code numbers are subject to change annually. Current code numbers are listed below. See Form IND-CR for information about additional tax credits.

NOTE: A return is required to be filed electronically if the return generates, allocates, claims, utilizes, or includes in any manner a Series 100 credit claimed on Schedule 4 or 4B.

Grantor Trust Instructions. If the taxpayer is a grantor trust, in addition to checking the Grantor Trust box on page 1 of the return, the grantor trust should attach to the return the schedule which shows the activity (as they do for Federal purposes), leave the rest of the return blank except when the grantor trust generates credits or has credits assigned, allocated, or transferred to it. In this case, Schedule 4 and Schedule 4B (if applicable) should be completed. Schedule 5 should be used to transfer the credit to the owner of the grantor trust. This is necessary so that the returns can be processed and the credits flow to the proper taxpayer.

Disregarded Single Member LLC Credit Instructions. If the taxpayer owns or is owned by a disregarded single member LLC, the single member LLC should be disregarded for filing purposes. All credits should be claimed on the owner's return. All tax credit forms should be filed in the name of the single member LLC but included with the owner's return. This is necessary so that the returns can be processed and the credits flow to the proper taxpayer.

For additional information on the below-listed credits, please visit the Georgia Department of Revenue website at dor.georgia.gov.

<u>Code</u>	<u>Name of Credit</u>	<u>Code</u>	<u>Name of Credit</u>
101	- Employer's Credit for Basic Skills Education	125	- Qualified Education Expense Credit (enclose Form IT-QEE-TP2)
102	- Employer's Credit for Approved Employee Retraining	126	- Seed-Capital Fund Credit
103	- Employer's Jobs Tax Credit	127	- Clean Energy Property Credit (enclose Form IT-CEP)
104	- Employer's Credit for Purchasing Child Care Property	128	- Wood Residual Credit
105	- Employer's Credit for Providing or Sponsoring Child Care for Employees	129	- Qualified Health Insurance Expense Credit (enclose Form IT-QHIE)
106	- Manufacturer's Investment Tax Credit	130	- Quality Jobs Tax Credit
107	- Optional Investment Tax Credit	131	- Alternate Port Activity Tax Credit
108	- Qualified Transportation Credit (only carryover can be used)	132	- Qualified Investor Tax Credit
109	- Low Income Housing Credit (enclose Form IT-HC and K-1)	133	- Film Tax Credit for a Qualified Interactive Entertainment Production Company
111	- Business Enterprise Vehicle Credit	134	- Alternative Fuel Heavy-Duty Vehicle and Alternative Fuel Medium-Duty Vehicle Tax Credits
112	- Research Tax Credit	135	- Historic Rehabilitation Tax Credit for any Other Certified Structures (not a historic home)
113	- Headquarters Tax Credit	136	- Qualified Rural Hospital Organization Expense Tax Credit
114	- Port Activity Tax Credit	137	- Qualified Parolee Jobs Tax Credit
115	- Bank Tax Credit	138	- Postproduction Film Tax Credit
116	- Low Emission Vehicle Credit (only carryover can be used)	139	- Small Postproduction Film Tax Credit
117	- Zero Emission Vehicle Credit (only carryover can be used)	140	- Qualified Education Donation Tax Credit
118	- New Facilities Job Credit	141	- Musical Tax Credit
119	- Electric Vehicle Charger Credit (enclose DNR certification)	142	- Rural Zone Tax Credits
120	- New Manufacturing Facilities Property Credit	143	- Agribusiness and Rural Jobs Tax Credit
121	- Historic Rehabilitation Credit for Historic Homes (enclose Form IT-RHC and DNR certification)	144	- Post-Consumer Waste Materials Tax Credit
122	- Film Tax Credit (Use code 133 if the credit is for a Qualified Interactive Entertainment Production Company)	145	- Timber Tax Credit
124	- Land Conservation Credit (enclose Form IT-CONSV and DNR certification)	146	- Railroad Track Maintenance Tax Credit

Georgia allows a credit for tax paid to another state on income taxable to Georgia and the other state. Use these worksheets to compute the other state(s) tax credit for full-year and part-year resident fiduciaries. Do not file these worksheets with your return. Keep them for your records.

Enter the Total Tax Credit on Form 501 line 9a. **Enclose a copy of tax return(s) filed with other state(s).** The credit is for state and U.S. local income tax only. The tax must have been imposed on net income. No other income taxes such as foreign local, foreign city, foreign province, foreign country, U.S. Possession, etc., qualify for this credit.

FULL-YEAR RESIDENTS

1. Other state(s) taxable income before exemptions \$ _____
2. Georgia taxable income before exemptions and after Georgia NOL Utilized \$ _____
3. Ratio: Line 1 divided by Line 2 _____ %
4. Georgia personal exemption Form 501, Line 6 \$ _____
5. Line 4 multiplied by ratio on Line 3 \$ _____
6. Income for computation of credit (Line 1 less Line 5) \$ _____
7. Tax at Georgia rates \$ _____
8. Tax shown on return(s) filed with other state(s)* \$ _____
9. Total Tax Credit (Lesser of Line 7 or Line 8) to be entered on Line 9a of Form 501 \$ _____

PART-YEAR RESIDENTS

1. Taxable Income earned in another state(s) while a Georgia resident before exemptions \$ _____
2. Georgia taxable income before exemptions and after Georgia NOL Utilized \$ _____
3. Ratio: Line 1 divided by Line 2 _____ %
4. Georgia personal exemption after applying the ratio of Georgia taxable income before exemptions to the total taxable income before exemptions \$ _____
5. Line 4 multiplied by ratio on Line 3 \$ _____
6. Income for computation of credit (Line 1 less Line 5) \$ _____
7. Tax at Georgia rates \$ _____
8. Tax shown on return(s) filed with other state(s) for income taxed by Georgia* \$ _____
9. Total Tax Credit (Lesser of Line 7 or Line 8) to be entered on Line 9a of Form 501 \$ _____

** The amount entered must be reduced by credits that have been allowed by the other states.*