

Georgia Form 700 (Rev. 11/09)
Partnership Tax Return



MAIL TO:
Georgia Department of Revenue
Processing Center
P.O. Box 740315
Atlanta, Georgia 30374-0315

2009 or other taxable year
Beginning _____ 20____, and Ending _____ 20____

If Listing Credits on Schedule 2:
Georgia Department of Revenue
Taxpayer Services Division
P.O. Box 49431
Atlanta, Georgia 30359-1431

Original Return Amended Return Final Return Change of Address Composite Return Filed

A. FEI Number		Name		Location of Books for Audit (city & state)	
B. GA. Withholding Tax Numbers		Number and Street		Country	
Payroll WH Number	Nonresident WH Number			Telephone Number	
C. GA. Sales Tax Reg. No.	City or Town	State	County	*County Code No.	Zip Code
D. Name & address on last year's return if different from above. If no return was filed last year, state reason.					
E. Business Code No. shown on Federal Return		F. Kind of Business		G. Basis of this return () CASH () ACCRUAL () OTHER	
H. Indicate latest taxable year (within last 5 years) adjusted by the IRS		I. Number of Partners	J. Do you have Nonresident Partners? () Yes or () No		K. Number of Nonresident Partners

*See Page 7 of the instruction booklet for a list of Georgia county code numbers.

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

Signature of Partner

(Must be signed by partner)

Date

Signature of preparer other than partner or member

Preparer's SSN or PTIN

Date

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 9-11 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)				11.
12. TOTAL ALLOWABLE GEORGIA TAX CREDITS FOR THE YEAR				12.

Attach the appropriate form or a detailed schedule for each credit claimed (See pages 9-11 of the instructions for additional information)

INCOME TO PARTNERS

(ROUND TO NEAREST DOLLAR)

SCHEDULE 3

(1.) Name (2.) Street and Number		(3.) City, State and Zip (4.) I.D. Number	Profit Sharing %	Georgia Source Income
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 4

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. Other additions (Attach schedule)	6.
7. <input type="text"/>	7.
8. Total (Add Lines 1 through 7) Enter here and on Line 9, Schedule 7	8.

SUBTRACTIONS FROM FEDERAL TAXABLE INCOME

(ROUND TO NEAREST DOLLAR)

SCHEDULE 5

1. Interest on obligations of United States (must be reduced by direct and indirect interest expense) ▶	1.	
2. Exception to intangible expenses and related interest cost..... ▶	2.	
3. Other subtractions (Attach Schedule)..... ▶	3.	
4. <input type="text"/> ▶	4.	
5. <input type="text"/> ▶	5.	
6. Total (Add Lines 1 through 5) enter here and on Line 11, Schedule 7..... ▶	6.	

APPORTIONMENT OF INCOME

(ROUND TO NEAREST DOLLAR)

SCHEDULE 6

	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)..... ▶			

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

SCHEDULE 7

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 4, Line 8)	▶	9.	
10. Total (add Lines 8 and 9)	▶	10.	
11. Subtractions from Federal income (Schedule 5, Line 6)	▶	11.	
12. Total income for Georgia purposes (Line 10 less Line 11)	▶	12.	

Other Required Federal Information

1. Salaries and wages (Form 1065, Page 1, Line 9)	▶	1.	
2. Taxes and licenses (Form 1065, Page 1, Line 14)	▶	2.	
3. Section 179 deduction (Form 1065, Page 4, Line 12)	▶	3.	
4. Contributions (Form 1065, Page 4, Line 13a)	▶	4.	
5. Investment interest expense (Form 1065, Page 4, Line 13b)	▶	5.	
6. Section 59(e)(2) expenditures (Form 1065, Page 4, Line 13c)	▶	6.	