	Pag	age 1) Version 1			ur numbers like th	is in black or blue ink:
	Geo	orgia Form 500 EZ (Rev. 10/10)		98	765	1 3 2 1 0
	Geor	rt Individual Income Tax Return gia Department of Revenue	DEL EXT	YOUR SSN#		
ш		10 (Approved web version)	MI LAST NAME	SPOUSE'S SSN#		SUFFIX
L HERE				1		50111X
(LABE	SPO	DUSE'S FIRST NAME	MI LAST NAME			SUFFIX
AFFIX						
ORMATION	ADDRESS (NUMBER AND STREET or P.O. BOX) (Use 2nd address line for Apt, Suite or Building Number) CHECK IF ADDRESS HAS CHANGED					Special Program Code See Tax Booklet on Page 8
AYER INFORM						
	017					DEPARTMENT USE ONLY
TAXP/	CIT	Y (PLEASE INSERT SPACE IF CITY HAS MULTIPI	LE NAMES) 3	TATE ZIP CODE		
E 1	СО	UNTRY IF FOREIGN)				
STE		Use Federal Adjusted Gross Income. NOT	Endoral Taxable Income or	Line 1 holow		
STEP 2 TAX COMPUTATION	1.	Adjusted Gross Income from Form 1040EZ, 1040			1.	_ 00
	2.	If your filing status is single, enter \$5,000.00, mai	rried filing joint, enter \$8,400.00	0	2.	00
	3. Subtract Line 2 from Line 1. If Line 2 is larger than Line 1 enter zero					_ 00
	4.	Find the tax on the amount on Line 3. (Use Tax	Table in the Tax Booklet on	Pages 19-21)	4.	_ 00
	5.	Low income tax credit. (Not allowed if you are claim	med as a dependent on anothe	r return) 5a. 5b.	► 5c	. 00
	6.	Line 4 Less Line 5c. If zero or less than zero,	enter zero		6.	_ 00
	7.	Georgia income tax withheld (Enter tax withh	eld only and enclose W-2's	, 1099s, etc.)	7.	_ 00
	8.	If Line 6 is larger than Line 7, subtract Line 7 fr	om Line 6. THE AMOUNT OF	TAX YOU OWE	8.	00
	9.	If Line 7 is larger than Line 6, subtract Line 6 from L	ine 7. THE AMOUNT OF YOUR (9.	_ 00
	10.	Georgia Wildlife Conservation Fund (No gift I	less than \$1.00)		10.	_ 00
	11.	Georgia Children and Elderly Fund (No gift le	ess than \$1.00)		11.	_ 00
	12.	Georgia Cancer Research Fund (No gift less	s than \$1.00)		12.	_ 00
	13.	Statewide Land Conservation Program (No gi	ift less than \$1.00)		13.	_ 00
	14.	Georgia National Guard Foundation (No gift I	less than \$1.00)		14.	_ 00
	15.	Dog and Cat Sterilization Fund (No gift less t	than \$1.00)		15.	_ 00
	16.	Save the Cure Fund (No gift less than \$1.00)		16.	00
	17.	Georgia Student Finance Authority Fund (No	gift less than \$1.00)		17.	_ 00
		SIGN	IATURES ARE REQUIRED O	N PAGE 2 OF THIS FORM		

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Page 2

	1100204021						
STEP 2 TAX COMPUTATION CONTINUED	Georgia Form 500 EZ Short Individual Income Tax Return Georgia Department of Revenue 2010 Version 1 18. Add Line 10 thru Line 17 enter total here						
14	20. (If you are due a refund) Subtract Line 18 from Line 9. THIS IS YOUR REFUND						
TEP 2-	STATE USE ONLY						
S	(PAYMENT) Green Label Georgia Department of Revenue Processing Center, PO Box 740399 Atlanta, GA, 30374-0399 (REFUND) Blue Label Georgia Department of Revenue Processing Center, PO Box 740380 Atlanta, GA, 30374-0380						
	Under penalty of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Georgia Public Code Section 48-2-31 requires that taxes shall be paid in lawful money of the United States, free of any expense to the State of Georgia.						
SIGNATURE	A PHONE NUMBER axpayer's Signature (Check box if deceased) DATE						
	Spouse's Signature (Check box if deceased) DATE NAME OF PREPARER OTHER THAN TAXPAYER Image: Check box if deceased Image: Check box if deceased						
STEP 3	Do you want to authorize DOR to discuss this return with the named preparer. YES NO PREPARER'S FEIN						
	Signature of Preparer PREPARER'S SSN/PTIN						
YOU MAY USE FORM 500EZ IF: PHONE NUMBER • Your are not 65 or over, or blind. PHONE NUMBER • Your filing status is single or married filing joint and you do not claim any exemptions other than yourself and your spouse. Phone NUMBER • Yourincome does not exceed \$99,999 and you do not train any exemptions. • Yourincome does not exceed \$99,999 and you do not train any exemptions. • You are a full-year Georgia resident. • TAXPAYER EMAIL ADDRESS • You had wages, salaries, tips, dividends, and interest income only. Do not use this form if you paid or are claiming a credit of estimated tax. • You do not have any adjustments to Federal Adjusted Gross Income.							
WHEN COMPLETING YOUR RETURN PLEASE REMEMBER TO: Use label only if correct. If not, print or type name(s), address and social security number(s). Keep numbers inside boxes. Do not use dollar signs, commas or decimals. Round off figures for easier computations. Sign and date your return. See Tax Booklet on Page 4 for signature requirements concerning deceased taxpayers.							
	INSTRUCTIONS: LINE 1. Enter the adjusted gross income shown on Federal Form 1040EZ, Form 1040 or Form 1040A. LINE 2. If your filing status is single, enter \$5,000.00. If your filing status is married filing joint, enter \$8,400.00. LINE 3. Subtract Line 2 from Line 1. If Line 2 is larger than Line 1, enter 0. LINE 4. Find the tax for the amount on Line 3. LINE 5. Enter your low income credit. See Page 13 of the tax Booklet for instructions on calculating the credit. LINE 6. Line 4 less Line 5c. If zero or less than zero, enter zero. LINE 7. Enter the amount of Georgia income tax withheld. Generally, the amount of tax withheld is located in a box that references state income tax withheld. Enclose your W-2, 1099, and other income statement(s) showing Georgia income tax withheld with your return. LINE 8. If Line 6 is larger than Line 7, subtract Line 6 from Line 6. THE AMOUNT OF TAX YOU OWE. LINE 9. If Line 7 is larger than Line 6, subtract Line 6 from Line 7. THE AMOUNT OF YOUR OVERPAYMENT. LINE 10. If the amount(s) you wish to contribute. LINE 10. If Line 7 is larger than Line 7. LINE 11. Enter total of Lines 10 thru 17. LINE 18. Enter total of Lines 10 t						