Georgia Form 501X(Rev. 06/22/17) Amended Fiduciary Income Tax Return

2017



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

i age i

Fiscal Year Beginning Fiscal Year Linding A. Federal Employer ID No.		(please atta	nended Ret	urn Filed	to Change in Change in Change of			Nonresident Trust is a Qualified Funeral Trust Estate is a Bankruptcy Estate 500 UET Exception Attached ate of Creation of Trust
	N 65:1 :				I	· - ·	-	
B. Date of Decedent's Death	Name of Fiduciary				l itle o	f Fiduciary	16	elephone No.
			_					
C. Address of Fiduciary (Nur	mber and Street)			(Apt., Suite or	Buildin	g Number)		
City		State	Zip Cod	de		Country		
						,		
			<u> </u>					
D. If no return was filed last year	ar, state reason							
Schedule 1 - Computat	ion of Tax							
1. Income of fiduciary (Adjusted total income t	from atta	ached F	orm 1041)			<u> </u>	
2. Adjustments: (List of	f all items in Schedule (3, Page	3)			2	2.	
•			•					
3. Total (Net total of L	ines 1 and 2)						3.	
4. Beneficiaries' Share	of Income (Total of Sc	hedule :	2)				.	
	,		·					
5. Balance (Line 3 les	s Line 4)					<u>5</u>	5.	
6. Exemptions: ☐ 6a.	Trust \$1350 □ 6b	Estate \$	\$2700				,	
o. Exemplione. E ea			,_,					
7. Net taxable income	of fiduciary (Line 5 less	Line 6))			<u>7</u>	7.	
O Total tax								
 Total tax Less Credits used 9 							2.	
0. 2000 0.00.10 0.000 0	state(s) tax return)						a	
9	9b. Schedule 4 credits u	ısed				<u>9k</u>	0.	
9	c. Total Credits used (cannot e	exceed	Line 8)		90	c.	
	·			•				
10. Tax less credit (Ne	t total of Line 8 less L	ine 9c,	if 0 or I	ess, enter 0)	<u>10</u>).	
11. Less payments: 11	la. Georgia Estimate d	Tax Pa	aid			11a	a.	
, ,	•							
	lb. Georgia Tax Withh				,).	
11	Ic. Amount paid with payments made af							
							<u>- </u>	
11	ld. Total (Add Lines 11	a, 11b,	and 110	c)		110	ı.	

Schedule 1- Computation of Tax (continued)					
12. Previous refund(s), if any, shown on previous retur	n(s)		12.		
13. Net (Line 11d minus Line 12)			13.		
14. Balance of tax due. If Line 10 exceeds Line 13, e	nter Line 10 less Line 13		14.		
15. Overpayment. If Line 13 exceeds Line 10, enter L	ine 13 less Line 10		15.		
16. Amount from Line 15 to be credited to next year's	estimated tax		16.		
17. Interest			17.		
18. Late payment penalty			18.		
19. Late filing penalty			19.		
20. Penalty for underpayment of estimated tax (UET) .			20.		
21. (If you owe) Add Lines 14, 17 thru 20. Make check payable to Georgia Department of Revenue.					
22. (If you are due a refund) Subtract Lines 16 and 20 from	n Line 15. This is your refund		22.		
Direct Deposit Options			<u> </u>		_
222 Direct Denosit (For II & Accounts Only) A. Type: Checking Ro	uting				
See Instructions in the IT-511 booklet for further details. If you do not enter Direct Deposit information or if you	count mber				
DECLARATION:I/We declare under the penalties of perjury that I/we have examing knowledge and belief, it is true, correct, and complete. If prepared by a person of knowledge. Georgia Public Revenue Code Section 48-2-31 stipulates that taxes section 48-2-31 stip	her than the taxpayer, this declaration is b	ased on all	information of	f which the preparer has	
EXPLANATIONS OF CHANGES: Provide an explanation of changes by					
-					
SIGNATURE OF FIDUCIARY	DATE	PHONI	E NUMBER	8	
SIGNATURE OF PREPARER OTHER THAN FIDUCIARY	DATE	PREPA	RER'S IDE	ENTIFICATION NUMBE	— ∃R
NAME OF PREPARER OTHER THAN FIDUCIARY	PHONE NUMBER				1
Check the box to authorize the Georgia Department of Revenue to discuss the contents of this return with the named preparer.		Departm	ent Use Only		
]



Schedule 2 - Beneficiaries' Share of Income (For each Beneficiary complete Name, Address, City, State, ZIP, Country, ID Number and Share of Income)

SCII	edule 2-Belleficiaries Share of incom-	e (For each Beneficiary complete Name, Addre	ess, City,	State, ZIP, C	ountry	, ID Number and Share of Income)
	Name		ID N	lumber		Share of Income
Α	Address	City	State	ZIP		Country
	Name		ID N	umber		Share of Income
В	Address	City	State	ZIP		Country
	Name		IDN	lumber		Share of Income
С	Address	City	State	ZIP		Country
	Enter total (Including	additional Beneficiaries' Share of Income	from att	ached sched	dule).	_
Sc	hedule 3 - Adjustments to Income					
Al	DDITIONS					
1.	Municipal bond interest - Other states	3			1.	
2. Income tax deduction other than Georgia					2.	
ŭ						
, , , , , , , , , , , , , , , , , , ,					3.	
Net operating loss carryover deducted on the Federal return					4.	
5a. Other					5a.	
5b. Other					5b.	
6. TOTAL ADDITIONS					6.	
SU	BTRACTIONS					
Interest - U.S. Government Obligations (Must be reduced by direct and indirect interest expense).					1.	
Income Tax Refund other than Georgia					2.	
Georgia net operating loss carryover from previous years (See the instructions)					3.	
4a. Other					4a.	
4b	. Other				4b.	
5. TOTAL SUBTRACTIONS					5.	
6. NET ADJUSTMENT: Total additions less total subtractions. (Enter also on Line 2, Schedule 1)					6.	

CREDIT USAGE AND CARRYOVER

(ROUND TO NEAREST DOLLAR)

SCHEDULE 4

- 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 2017, please complete a schedule even if the credit is not used in 2017.
- 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, to determine when carryovers expire, and to see if the credit is limited to a certain percentage tax.
- 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 year, the amount must be reduced by any amounts elected to be applied to withholding in 2017 and by any carryovers that have expired.

For the credit generated this 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		
Credit remaining from previous years (do not include withholding)	le amounts elected to be applied to	
3. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated in 2017
4. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated in 2017
5. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated in 2017
6. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated in 2017
7. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated in 2017
8. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated in 2017
9. Company Name		ID Number
Credit Certificate #	% of Credit	Credit Generated in 2017
10. Total available credit for 2017 (sum of Lines 2 thro		
11. Enter the amount of the credit sold (Conservation		
Historic Rehabilitation Tax Credits)		
12. List the credit allocated to the beneficiaries (See S		
13. Credit Used in 2017	13. 12 and 13) 14.	
14. Potential carryover to 2018 (Line 10 less Lines 11		





CREDIT ALLOCATION TO BENEFICIARIES

(ROUND TO NEAREST DOLLAR)

SCHEDULE 5

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 than one credit code can be entered on this schedule. However, additional schedules can be attached as needed.

	Credit Code	Name of Beneficiary	ID Number of Beneficiary	Amount Allocated	Credit Certificate #
1.			20.10.10.10.1	7 0 0 0 0 0	
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19. 20. 21. 22.					
20.					
21.					
22.					
23.					
24.					
25. 26.					
26.					
27.					
28.					
29.					
30.					
31. 32.					
32.					
33. 34.					
34.					

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 <u>dor.georgia.gov</u> or one produced by an approved software company listed at <u>dor.georgia.gov/approved-software-vendors</u>.
- 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.

| S25-TV (Rev. 06/22/17) | Individual and Fiduciary Payment Voucher | 1852504016 | | 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

PLEASE DO NOT STAPLE. REMOVE ALL CHECK STUBS.

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

Amount Paid \$

Instructions

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.

Returns are required to be filed by the 15th day of the 4th month following the close of the taxable 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.

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.

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 3.

Enter on Line 4 the total portion of income distributable to all beneficiaries as listed in Schedule 2.

Enter on Line 6 the exemption: Trusts \$1,350, Estates \$2,700.

Compute the total income tax on the amount shown on Line 7 from the following tax rate schedule, entering the total tax due on Line 8.

If the amount	But Not	Amount of	Of
on Line 7 is	Over	Tax is	Excess
Over			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+6%	\$ 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 7.

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.

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

If there are more than 3 beneficiaries, attach a list showing the same information for each. The total of Schedule 2 must be the same as the amount on Line 4, Schedule 1.

Schedule 3

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 3. 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 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 3 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. Please list only the amount being used.

Schedule 4 and Schedule 5

Credits are from the Fiduciary or from the ownership of an S Corp., LLC, LLP, or Partnership interest.

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%. Failure to pay is not due if the return is being amended due to an IRS audit, check the box at the top of Page 1.

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 from 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 20 of the Form 501X (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.

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 501X, Schedule 4. 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.

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

Code	Name of Credit
101	Employer's Credit for Basic Skills Education
102	Employer's Credit for Approved Employee Retraining
103	Employer's Jobs Tax Credit
104	Employer's Credit for Purchasing Child Care Property
105	Employer's Credit for Providing or Sponsoring Child Care for Employees
106	Manufacturer's Investment Tax Credit
107	Optional Investment Tax Credit
108	Qualified Transportation Credit
109	Low Income Housing Credit (enclose Form IT-HC and K-1)
110	Diesel Particulate Emission Reduction Technology Equipment
111	Business Enterprise Vehicle Credit
112	Research Tax Credit
113	Headquarters Tax Credit
114	Port Activity Tax Credit
115	Bank Tax Credit
116	Low Emission Vehicle Credit (enclose DNR certification)
117	Zero Emission Vehicle Credit (enclose DNR certification)
118	New Facilities Job Credit
119	Electric Vehicle Charger Credit (enclose DNR certification)
120	New Manufacturing Facilities Property Credit
121	Historic Rehabilitation Credit for Historic Home (enclose Form IT-RHC and DNR certification)
122	Film Tax Credit (Use code 133 if the credit is for a Qualified Interactive Entertainment Production Company)
124	Land Conservation Credit (enclose Form IT-CONSV and DNR certification)
125	Qualified Education Expense Credit (enclose Form IT-QEE-SS01 and Form IT-QEE-TP2)
126	Seed-Capital Fund Credit
127	Clean Energy Property Credit (enclose Form IT-CEP)
128	Wood Residual Credit
129	Qualified Health Insurance Expense Credit (enclose Form IT-QHIE)
130	Quality Jobs Tax Credit
131	Alternate Port Activity Tax Credit
132	Qualified Investor Tax Credit
133	Film Tax Credit for a Qualified Interactive Entertainment Production Company
134	Alternative Fuel Heavy-Duty Vehicle and Alternative Fuel Medium-Duty Vehicle Tax Credits
135	Historic Rehabilitation Tax Credit for any Other Certified Structures (not a historic home)
136	Qualified Rural Hospital Organization Expense Tax Credit
137	Qualified Parolee Jobs Tax Credit

WORKSHEET FOR OTHER STATE(S) TAX CREDIT

Georgia allows a credit for tax paid to another state on income taxable to Georgia <u>and</u> 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.

FU	ILL-YEAR RESIDENTS		
1.	Other state(s) taxable income before exemptions		\$
2.	Georgia taxable income before exemptions (Line 5, Form 501) \$		
3.	Ratio: Line 1 divided by Line 2	%	
4.	Georgia personal exemption Form 501, Line 6	<u> </u>	
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		\$
<i>PA</i> 1.	ART-YEAR RESIDENTS Taxable Income earned in another state(s) while a Georgia res	sident hefore exemptions	\$
	•	\$	Ψ
2.	Georgia taxable income before exemptions	Ψ	
3.	Ratio: Line 1 divided by Line 2	%	
4.	Georgia personal exemption after applying the ratio of Georgi taxable income before exemptions to the total taxable income before exemptions	a \$	
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 taxe	ed by Georgia*	\$

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