



First Name Surname ZIXIN YIN
Selected mailing address 935 MARIETTA ST. NW UNIT 734
City ATLANTA
State/Province, ZIP/Postal Code GA 30318
Country UNITED STATES OF AMERICA

Dear ZIXIN,

Thank you for preparing your Georgia State tax return via Sprintax tax prep software. Enclosed are two copies of your 2021 Georgia tax return. Please file one copy with the State and retain the second copy for your records. We have attached instructions detailing how to file your tax return with the Georgia State tax office. Please remember to review, sign and date your filing copy on page 5 before mailing.

Tax Summary

<i>Filing status</i>	Single
<i>Georgia adjusted gross income</i>	6250
<i>Georgia taxable income</i>	3339
<i>Refund amount</i>	140

How much is my Georgia refund?

Your Georgia tax refund is \$140. This will be deposited directly into your savings account as per your instructions.

How do I file my tax return?

You must post your Georgia tax return with the required documents (see table 2 on page Georgia State Tax return Checklist) to the address below. Your tax return must be received by April 18th . We recommend you mail your return as soon as possible, using the United States Post Office certified mail service or an approved delivery service that will provide proof of your mailing date, to the following address:

**PROCESSING CENTER
GEORGIA DEPARTMENT OF REVENUE
PO BOX 740380
ATLANTA, GA 30374-0380
USA**

When will I receive my refund?

The Georgia tax office will take approximately 8-12 weeks to process your application, once they receive it. You can check the status of your Georgia tax refund using Check your refund status an interactive tool available [here](#) 4 or more weeks after you mail your return.



You can also call the Georgia tax office at (877) 423-6711 to check your personal income tax refund status.

When you call or visit the Georgia State website, you will need the following information:

- Social security number
- Requested refund amount

If you have any questions, please email us at hello@sprintax.com.

Please consider the following when printing your tax return:

- Standard 8.5" x 11" paper must be used
- Use portrait orientation in printing tax forms
- Do not hand write in any corrections on the printed paper return. Hand writing in corrections will result in capturing incorrect data and delaying the processing of this income tax return. Make any corrections to this income tax return within Sprintax, then print and mail
- Sign the return using black or blue ink

Sincerely,

The Sprintax team

DO NOT MAIL
WITH YOUR
RETURN





Georgia Tax Return Checklist

1. Review and sign the following forms where indicated.

Form	Action
500	Sign on page 5

2. Attach copies of your Federal Tax return and all your income and tax withholding statements showing the US income sources you used to prepare your Georgia tax return:

Supporting Documents	Quantity
W2	1
1042-S	1

3. Confirm that the SSN on your tax return and all your W-2 forms is correct. If you don't have your W-2 form(s) or if the SSN is incorrect, then you'll need to obtain a valid W-2 form(s) from your employer(s).

4. Mail your Georgia State tax return with all necessary supporting documents and attachments as soon as possible, using the United States Post Office certified mail service or an approved delivery service that will provide proof of your mailing date, to:

**PROCESSING CENTER
GEORGIA DEPARTMENT OF REVENUE
PO BOX 740380
ATLANTA, GA 30374-0380
USA**



Georgia Tax Return Frequently Asked Questions

How long will it take to process my Georgia tax return?

The Georgia Tax office will take approximately 8-12 weeks after receiving your return to process your application.

What is the April 18th deadline?

The April 18th tax deadline is the date by which all tax returns must be filed for the previous year. If you owe the Georgia tax office money and you don't file your tax return by April 18th, the Georgia tax authorities will impose late filing penalties and interest on the amount you owe, so the sooner you apply the better. If you need to file an extension to give you more time to file your return, the extension request must also be submitted by the due date. Extension requests only extend your time to file your return, not to pay your taxes. Make sure your estimated tax liability is paid before the deadline to avoid paying any late payment penalties and interest.

What taxes can Sprintax prepare for me?

With Sprintax, you can prepare your Federal, State, FICA tax returns. Once prepared, you must then sign and submit them yourself to the relevant authorities (as detailed in your instruction pack). Sprintax cannot file any returns on your behalf.

Can I use an international tax treaty on my Georgia State tax return?

Yes. Georgia State complies with all tax treaties that the Internal Revenue Service uses.

Could I owe money to the State tax authorities?

Depending on how your employer taxed you and what the actual tax liability under the tax law is, you may owe tax or be due a tax refund. If you have a tax liability or if other particular factors apply, then you have an obligation to file a tax return. Sprintax takes into consideration all of these factors. Remember, if you owe money and don't file your return before the deadline, you'll get penalties and fines added to the amount you owe.



GEORGIA STATE TAX RETURN FOR

ZIXIN YIN

2021

DO NOT MAIL
WITH YOUR
RETURN

STATE FILING COPY

SUBMIT TO THE GEORGIA TAX OFFICE





2200423213

**Georgia Form 500** (Rev. 08/02/21)

Individual Income Tax Return

Georgia Department of Revenue

2021 (Approved software version)**Page 1**Fiscal Year
BeginningSTATE
ISSUEDFiscal Year
EndingYOUR DRIVER'S
LICENSE/STATE ID

YOUR FIRST NAME

1. ZIXIN

MI

YOUR SOCIAL SECURITY NUMBER

843-62-1522

LAST NAME (For Name Change See IT-511 Tax Booklet)

YIN

SUFFIX

SPOUSE'S FIRST NAME

MI

SPOUSE'S SOCIAL SECURITY NUMBER

DEPARTMENT USE ONLY

LAST NAME

SUFFIX

ADDRESS (NUMBER AND STREET or P.O. BOX) (Use 2nd address line for Apt, Suite or Building Number)

CHECK IF ADDRESS HAS CHANGED

2. 935 MARIETTA ST. NW

UNIT 734

CITY (Please insert a space if the city has multiple names)

3. ATLANTA

STATE

GA

ZIP CODE

30318

(COUNTRY IF FOREIGN)

4. Enter your Residency Status with the appropriate number 4. 3

Residency Status

1. FULL- YEAR RESIDENT 2. PART- YEAR RESIDENT

TO

3. NONRESIDENT

Omit Lines 9 thru 14 and use Form 500 Schedule 3 if you are a part-year or nonresident filer.

5. Enter Filing Status with appropriate letter (See IT-511 Tax Booklet)..... 5. A

Filing Status

A. Single B. Married filing joint C. Married filing separate (Spouse's social security number must be entered above) D. Head of Household or Qualifying Widow(er)

6. Number of exemptions (Check appropriate box(es) and enter total in 6c.) 6a. Yourself X 6b. Spouse 6c. 1

7a. Number of Dependents (Enter details on Line 7b., and DO NOT include yourself or your spouse)..... 7a.

PAGES (1-5) ARE REQUIRED FOR PROCESSING



YOUR SOCIAL SECURITY NUMBER
843-62-1522

7b. Dependents (If you have more than 4 dependents, attach a list of additional dependents)

First Name, MI.

Last Name

Social Security Number

Relationship to You

First Name, MI.

Last Name

Social Security Number

Relationship to You

First Name, MI.

Last Name

Social Security Number

Relationship to You

First Name, MI.

Last Name

Social Security Number

Relationship to You

INCOME COMPUTATIONS

If amount on line 8, 9, 10, 13 or 15 is negative, use the minus sign (-). Example -3456.

8. Federal adjusted gross income (From Federal Form 1040)..... 8. 6250
(Do not use FEDERAL TAXABLE INCOME) If the amount on Line 8 is \$40,000 or more, or your gross income is less than your W-2s you must include a copy of your Federal Form 1040 Pages 1, 2, and Schedule 1.
9. Adjustments from Form 500 Schedule 1 (See IT-511 Tax Booklet) 9.
10. Georgia adjusted gross income (Net total of Line 8 and Line 9)..... 10.
11. Standard Deduction (Do not use FEDERAL STANDARD DEDUCTION)..... 11a.
(See IT-511 Tax Booklet)
- b. Self: 65 or over? Blind? Total x 1,300=..... 11b.
Spouse: 65 or over? Blind?
- c. Total Standard Deduction (Line 11a + Line 11b)..... 11c.
Use EITHER Line 11c OR Line 12c (Do not write on both lines)
12. Total Itemized Deductions used in computing Federal Taxable Income. If you use itemized deductions, you must include Federal Schedule A.
- a. Federal Itemized Deductions (Schedule A- Form 1040)..... 12a.
- b. Less adjustments: (See IT-511 Tax Booklet) 12b.
- c. Georgia Total Itemized Deductions..... 12c.
13. Subtract either Line 11c or Line 12c from Line 10; enter balance..... 13.



YOUR SOCIAL SECURITY NUMBER
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Page 3

- 14a. Enter the number from Line 6c. Multiply by \$2,700 for filing status A or D 14a.
or multiply by \$3,700 for filing status B or C
- 14b. Enter the number from Line 7a. Multiply by \$3,000..... 14b.
- 14c. Add Lines 14a. and 14b. Enter total 14c.
- 15a. Income before GA NOL (Line 13 less Line 14c or Schedule 3, Line 14)..... 15a. 3339
- 15b. Georgia NOL utilized (Cannot exceed Line 15a or the amount after
applying the 80% limitation, see IT-511 Tax Booklet for more information)....15b.
- 15c. Georgia Taxable Income (Line 15a less Line 15b)..... 15c. 3339
16. Tax (Use Tax Table or Tax Rate Schedule in the IT-511 Tax Booklet) 16. 71
17. Low Income Credit 17a. 17b. 17c.
18. Other State(s) Tax Credit (Include a copy of the other state(s) return) 18.
19. Credits used from IND-CR Summary Worksheet 19.
20. **Total Credits Used from Schedule 2 Georgia Tax Credits (must be filed electronically)** 20.
21. Total Credits Used (sum of Lines 17-20) cannot exceed Line 16 21.
22. Balance (Line 16 less Line 21) if zero or less than zero, enter zero 22. 71

INCOME STATEMENT DETAILS Only enter income on which Georgia tax was withheld. Enter income from W-2s, 1099s, and G2-As on Line 4 GA Wages/Income. For other income statements complete Line 4 using the income reported from **Form G2-RP Line 12 or 13; Form G2-LP Line 11**, or for **Form G2-FL enter zero**.

(INCOME STATEMENT A)				(INCOME STATEMENT B)				(INCOME STATEMENT C)			
1. WITHHOLDING TYPE:				1. WITHHOLDING TYPE:				1. WITHHOLDING TYPE:			
<input checked="" type="checkbox"/> W-2	G2-A	G2-LP		W-2	G2-A	G2-LP		W-2	G2-A	G2-LP	
1099	G2-FL	G2-RP		1099	G2-FL	G2-RP		1099	G2-FL	G2-RP	
2. EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN) <input checked="" type="checkbox"/> SSN				2. EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN) SSN				2. EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN) SSN			
58-6002023											
3. EMPLOYER/PAYER STATE WITHHOLDING ID				3. EMPLOYER/PAYER STATE WITHHOLDING ID				3. EMPLOYER/PAYER STATE WITHHOLDING ID			
4369488-YS											
4. GA WAGES / INCOME				4. GA WAGES / INCOME				4. GA WAGES / INCOME			
6250											
5. GA TAX WITHHELD				5. GA TAX WITHHELD				5. GA TAX WITHHELD			
211											

PLEASE COMPLETE INCOME STATEMENT DETAILS ON PAGE 4.

PAGES (1-5) ARE REQUIRED FOR PROCESSING



YOUR SOCIAL SECURITY NUMBER
843-62-1522

Page 4

(INCOME STATEMENT D)

1. **WITHHOLDING TYPE:**
W-2 G2-A G2-LP
1099 G2-FL G2-RP
2. **EMPLOYER/PAYER FEDERAL**
ID NUMBER (FEIN) SSN
3. **EMPLOYER/PAYER STATE WITHHOLDING ID**
4. **GA WAGES / INCOME**
5. **GA TAX WITHHELD**

(INCOME STATEMENT E)

1. **WITHHOLDING TYPE:**
W-2 G2-A G2-LP
1099 G2-FL G2-RP
2. **EMPLOYER/PAYER FEDERAL**
ID NUMBER (FEIN) SSN
3. **EMPLOYER/PAYER STATE WITHHOLDING ID**
4. **GA WAGES / INCOME**
5. **GA TAX WITHHELD**

(INCOME STATEMENT F)

1. **WITHHOLDING TYPE:**
W-2 G2-A G2-LP
1099 G2-FL G2-RP
2. **EMPLOYER/PAYER FEDERAL**
ID NUMBER (FEIN) SSN
3. **EMPLOYER/PAYER STATE WITHHOLDING ID**
4. **GA WAGES / INCOME**
5. **GA TAX WITHHELD**

- | | | |
|--|-----|-----|
| 23. Georgia Income Tax Withheld on Wages and 1099s | 23. | 211 |
| (Enter Tax Withheld Only and include W-2s and/or 1099s) | | |
| 24. Other Georgia Income Tax Withheld | 24. | |
| (Must include G2-A, G2-FL, G2-LP and/or G2-RP) | | |
| 25. Estimated Tax paid for 2021 and Form IT-560 | 25. | |
| 26. Schedule 2B Refundable Tax Credits | 26. | |
| (Cannot be claimed unless filed electronically) | | |
| 27. Total prepayment credits (Add Lines 23, 24, 25 and 26) | 27. | 211 |
| 28. If Line 22 exceeds Line 27, subtract Line 27 from Line 22 and enter balance due | 28. | |
| 29. If Line 27 exceeds Line 22, subtract Line 22 from Line 27 and enter overpayment | 29. | 140 |
| 30. Amount to be credited to 2022 ESTIMATED TAX | 30. | |
| 31. Georgia Wildlife Conservation Fund (No gift of less than \$1.00) | 31. | |
| 32. Georgia Fund for Children and Elderly (No gift of less than \$1.00) | 32. | |
| 33. Georgia Cancer Research Fund (No gift of less than \$1.00) | 33. | |
| 34. Georgia Land Conservation Program (No gift of less than \$1.00) | 34. | |
| 35. Georgia National Guard Foundation (No gift of less than \$1.00) | 35. | |
| 36. Dog & Cat Sterilization Fund (No gift of less than \$1.00) | 36. | |
| 37. Saving the Cure Fund (No gift of less than \$1.00) | 37. | |
| 38. Realizing Educational Achievement Can Happen (REACH) Program | 38. | |
| (No gift of less than \$1.00) | | |



YOUR SOCIAL SECURITY NUMBER
843-62-1522

Page 5

39. Public Safety Memorial Grant (No gift of less than \$1.00)..... 39.

40. Form 500 UET (Estimated tax penalty) 500 UET exception attached 40.

41. (If you owe) Add Lines 28, 31 thru 40 41.
MAKE CHECK PAYABLE TO GEORGIA DEPARTMENT OF REVENUE..

Amount Due Mail To:
GEORGIA DEPARTMENT OF REVENUE
PROCESSING CENTER, PO BOX 740399
ATLANTA, GA 30374-0399

42. (If you are due a refund) Subtract the sum of Lines 30 thru 40 from Line 29 42. 140
THIS IS YOUR REFUND.....
If you do not enter Direct Deposit information or if you are a first time filer you will be issued a paper check.

42a. Direct Deposit (U.S. Accounts Only)

Type: Checking Routing Number 061000052
Savings ☒ Account Number 334069199271

Refund Due Mail To:
GEORGIA DEPARTMENT OF REVENUE
PROCESSING CENTER, PO BOX 740380
ATLANTA, GA 30374-0380

INCLUDE ALL ITEMS IN 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.

Taxpayer's Signature (Check box if deceased)

Spouse's Signature (Check box if deceased)

Taxpayer's Date of Death

Spouse's Date of Death

Taxpayer's Signature Date
03/16/2022

Taxpayer's Phone Number

Spouse's Signature Date

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).

Taxpayer's E-mail Address

I authorize DOR to discuss this return
with the named preparer.

Preparer's Phone Number

Signature of Preparer
Name of Preparer Other Than Taxpayer

Preparer's FEIN

Preparer's Firm Name

Preparer's SSN/PTIN/SIDN



2207423213

YOUR SOCIAL SECURITY NUMBER

843-62-1522

DO NOT USE LINES 9 THRU 14 OF PAGES 2 AND 3 FORM 500 or 500X**SCHEDULE 3 COMPUTATION OF GEORGIA TAXABLE INCOME FOR ONLY PART-YEAR RESIDENTS AND NONRESIDENTS.**

Income earned in another state as a Georgia resident is taxable but other state(s) tax credit may apply. See IT-511 Tax Booklet.

FEDERAL INCOME AFTER GEORGIA ADJUSTMENT (COLUMN A)		INCOME NOT TAXABLE TO GEORGIA (COLUMN B)		GEORGIA INCOME (COLUMN C)	
1. WAGES, SALARIES, TIPS, etc	6250	1. WAGES, SALARIES, TIPS, etc		1. WAGES, SALARIES, TIPS, etc	6250
2. INTEREST AND DIVIDENDS		2. INTEREST AND DIVIDENDS		2. INTEREST AND DIVIDENDS	
3. BUSINESS INCOME OR (LOSS)		3. BUSINESS INCOME OR (LOSS)		3. BUSINESS INCOME OR (LOSS)	
4. OTHER INCOME OR (LOSS)		4. OTHER INCOME OR (LOSS)		4. OTHER INCOME OR (LOSS)	
5. TOTAL INCOME: TOTAL LINES 1 THRU 4	6250	5. TOTAL INCOME: TOTAL LINES 1 THRU 4		5. TOTAL INCOME: TOTAL LINES 1 THRU 4	6250
6. TOTAL ADJUSTMENTS FROM FORM 1040		6. TOTAL ADJUSTMENTS FROM FORM 1040		6. TOTAL ADJUSTMENTS FROM FORM 1040	
7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1		7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1		7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1	
8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7	6250	8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7		8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7	6250
9. RATIO: Divide Line 8, Column C by Line 8, Column A enter percentage or check the box for Time Ratio. Enter percentage.....		9. 100.00		% Not to exceed 100%	
10a. Itemized <input checked="" type="checkbox"/> or Standard Deduction or Georgia Itemized (See IT-511 Tax Booklet)		10a.		211	
10b. Additional Standard Deduction Self: 65 or over? Blind? Spouse: 65 or over? Blind? Total X 1,300=		10b.			
11. Personal Exemptions from Form 500 or Form 500X (See IT-511 Tax Booklet)					
11a. Enter the number on Line 6c from Form 500 or Form 500X <u>1</u> multiply by \$2,700 for filing status A or D or multiply by \$3,700 for filing status B or C.....		11a.		2700	
11b. Enter the number on Line 7a from Form 500 or Form 500X multiply by \$3,000 ..		11b.			
12. Total Deductions and Exemptions: Add Lines 10a, 10b, 11a, and 11b		12.		2911	
13. Multiply Line 12 by Ratio on Line 9 and enter result.....		13.		2911	
14. Income before GA NOL: Subtract Line 13 from Line 8, Column C Enter here and on Line 15a, Page 3 of Form 500 or Form 500X.....		14.		3339	

STATE TAX TREATY INCOME STATEMENT

Tax year: **2021**

Taxpayer's Name: ZIXIN YIN

Social Security Number / ITIN: 843-62-1522

Country of Residence: CHINA

Tax treaty items claimed:							
1	2	3	4	5	6	7	8
Type of income	Federal Tax Treaty Article	Gross compensation	Gross GA compensation	TT exempt	GA portion	Net compensation	Net GA compensation
Compensation during study or training	20(c)	11250	11250	5000	5000	6250	6250



GEORGIA STATE TAX RETURN FOR

ZIXIN YIN

2021

DO NOT MAIL
WITH YOUR
RETURN

YOUR COPY

RETAIN FOR YOUR RECORDS





2200423213

**Georgia Form 500** (Rev. 08/02/21)

Individual Income Tax Return

Georgia Department of Revenue

2021 (Approved software version)**Page 1**Fiscal Year
BeginningSTATE
ISSUEDFiscal Year
EndingYOUR DRIVER'S
LICENSE/STATE ID

YOUR FIRST NAME

1. ZIXIN

MI

YOUR SOCIAL SECURITY NUMBER

843-62-1522

LAST NAME (For Name Change See IT-511 Tax Booklet)

YIN

SUFFIX

SPOUSE'S FIRST NAME

MI

SPOUSE'S SOCIAL SECURITY NUMBER

LAST NAME

SUFFIX

DEPARTMENT USE ONLY

ADDRESS (NUMBER AND STREET or P.O. BOX) (Use 2nd address line for Apt, Suite or Building Number)

CHECK IF ADDRESS HAS CHANGED

2. 935 MARIETTA ST. NW

UNIT 734

CITY (Please insert a space if the city has multiple names)

3. ATLANTA

STATE
GAZIP CODE
30318

(COUNTRY IF FOREIGN)

4. Enter your Residency Status with the appropriate number

Residency Status

4. 3

1. FULL- YEAR RESIDENT 2. PART- YEAR RESIDENT

TO

3. NONRESIDENT

Omit Lines 9 thru 14 and use Form 500 Schedule 3 if you are a part-year or nonresident filer.

Filing Status

5. Enter Filing Status with appropriate letter (See IT-511 Tax Booklet)

5. A

A. Single B. Married filing joint C. Married filing separate (Spouse's social security number must be entered above) D. Head of Household or Qualifying Widow(er)

6. Number of exemptions (Check appropriate box(es) and enter total in 6c.)

6a. Yourself ☒

6b. Spouse

6c. 1

7a. Number of Dependents (Enter details on Line 7b., and DO NOT include yourself or your spouse)

7a.

PAGES (1-5) ARE REQUIRED FOR PROCESSING



YOUR SOCIAL SECURITY NUMBER
843-62-1522

7b. Dependents (If you have more than 4 dependents, attach a list of additional dependents)

First Name, MI.

Last Name

Social Security Number

Relationship to You

First Name, MI.

Last Name

Social Security Number

Relationship to You

First Name, MI.

Last Name

Social Security Number

Relationship to You

First Name, MI.

Last Name

Social Security Number

Relationship to You

INCOME COMPUTATIONS

If amount on line 8, 9, 10, 13 or 15 is negative, use the minus sign (-). Example -3456.

8. Federal adjusted gross income (From Federal Form 1040)..... 8. 6250
(Do not use FEDERAL TAXABLE INCOME) If the amount on Line 8 is \$40,000 or more, or your gross income is less than your W-2s you must include a copy of your Federal Form 1040 Pages 1, 2, and Schedule 1.
9. Adjustments from Form 500 Schedule 1 (See IT-511 Tax Booklet) 9.
10. Georgia adjusted gross income (Net total of Line 8 and Line 9)..... 10.
11. Standard Deduction (Do not use FEDERAL STANDARD DEDUCTION)..... 11a.
(See IT-511 Tax Booklet)
- b. Self: 65 or over? Blind? Total x 1,300=..... 11b.
Spouse: 65 or over? Blind?
- c. Total Standard Deduction (Line 11a + Line 11b)..... 11c.
Use EITHER Line 11c OR Line 12c (Do not write on both lines)
12. Total Itemized Deductions used in computing Federal Taxable Income. If you use itemized deductions, you must include Federal Schedule A.
- a. Federal Itemized Deductions (Schedule A- Form 1040)..... 12a.
- b. Less adjustments: (See IT-511 Tax Booklet) 12b.
- c. Georgia Total Itemized Deductions..... 12c.
13. Subtract either Line 11c or Line 12c from Line 10; enter balance..... 13.



YOUR SOCIAL SECURITY NUMBER
843-62-1522

Page 3

- 14a. Enter the number from Line 6c. Multiply by \$2,700 for filing status A or D 14a.
or multiply by \$3,700 for filing status B or C
- 14b. Enter the number from Line 7a. Multiply by \$3,000..... 14b.
- 14c. Add Lines 14a. and 14b. Enter total 14c.
- 15a. Income before GA NOL (Line 13 less Line 14c or Schedule 3, Line 14)..... 15a. 3339
- 15b. Georgia NOL utilized (Cannot exceed Line 15a or the amount after
applying the 80% limitation, see IT-511 Tax Booklet for more information)....15b.
- 15c. Georgia Taxable Income (Line 15a less Line 15b)..... 15c. 3339
16. Tax (Use Tax Table or Tax Rate Schedule in the IT-511 Tax Booklet) 16. 71
17. Low Income Credit 17a. 17b. 17c.
18. Other State(s) Tax Credit (Include a copy of the other state(s) return) 18.
19. Credits used from IND-CR Summary Worksheet 19.
20. **Total Credits Used from Schedule 2 Georgia Tax Credits (must be filed electronically)** 20.
21. Total Credits Used (sum of Lines 17-20) cannot exceed Line 16 21.
22. Balance (Line 16 less Line 21) if zero or less than zero, enter zero 22. 71

INCOME STATEMENT DETAILS Only enter income on which Georgia tax was withheld. Enter income from W-2s, 1099s, and G2-As on Line 4 GA Wages/Income. For other income statements complete Line 4 using the income reported from **Form G2-RP Line 12 or 13; Form G2-LP Line 11, or for Form G2-FL enter zero.**

(INCOME STATEMENT A)

1. WITHHOLDING TYPE:
☒ W-2 G2-A G2-LP
1099 G2-FL G2-RP
2. EMPLOYER/PAYER FEDERAL
ID NUMBER (FEIN) ☒ SSN
58-6002023
3. EMPLOYER/PAYER STATE WITHHOLDING ID
4369488-YS
4. GA WAGES / INCOME
6250
5. GA TAX WITHHELD
211

(INCOME STATEMENT B)

1. WITHHOLDING TYPE:
W-2 G2-A G2-LP
1099 G2-FL G2-RP
2. EMPLOYER/PAYER FEDERAL
ID NUMBER (FEIN) SSN
3. EMPLOYER/PAYER STATE WITHHOLDING ID
4. GA WAGES / INCOME
5. GA TAX WITHHELD

(INCOME STATEMENT C)

1. WITHHOLDING TYPE:
W-2 G2-A G2-LP
1099 G2-FL G2-RP
2. EMPLOYER/PAYER FEDERAL
ID NUMBER (FEIN) SSN
3. EMPLOYER/PAYER STATE WITHHOLDING ID
4. GA WAGES / INCOME
5. GA TAX WITHHELD

PLEASE COMPLETE INCOME STATEMENT DETAILS ON PAGE 4.

PAGES (1-5) ARE REQUIRED FOR PROCESSING



YOUR SOCIAL SECURITY NUMBER
843-62-1522

Page 4

(INCOME STATEMENT D)

1. WITHHOLDING TYPE:
W-2 G2-A G2-LP
1099 G2-FL G2-RP
2. EMPLOYER/PAYER FEDERAL
ID NUMBER (FEIN) SSN
3. EMPLOYER/PAYER STATE WITHHOLDING ID
4. GA WAGES / INCOME
5. GA TAX WITHHELD

(INCOME STATEMENT E)

1. WITHHOLDING TYPE:
W-2 G2-A G2-LP
1099 G2-FL G2-RP
2. EMPLOYER/PAYER FEDERAL
ID NUMBER (FEIN) SSN
3. EMPLOYER/PAYER STATE WITHHOLDING ID
4. GA WAGES / INCOME
5. GA TAX WITHHELD

(INCOME STATEMENT F)

1. WITHHOLDING TYPE:
W-2 G2-A G2-LP
1099 G2-FL G2-RP
2. EMPLOYER/PAYER FEDERAL
ID NUMBER (FEIN) SSN
3. EMPLOYER/PAYER STATE WITHHOLDING ID
4. GA WAGES / INCOME
5. GA TAX WITHHELD

23. Georgia Income Tax Withheld on Wages and 1099s 23. 211
(Enter Tax Withheld Only and include W-2s and/or 1099s)
24. Other Georgia Income Tax Withheld 24.
(Must include G2-A, G2-FL, G2-LP and/or G2-RP)
25. Estimated Tax paid for 2021 and Form IT-560 25.
26. Schedule 2B Refundable Tax Credits 26.
(Cannot be claimed unless filed electronically)
27. Total prepayment credits (Add Lines 23, 24, 25 and 26) 27. 211
28. If Line 22 exceeds Line 27, subtract Line 27 from Line 22 and enter
balance due 28.
29. If Line 27 exceeds Line 22, subtract Line 22 from Line 27 and enter
overpayment 29. 140
30. Amount to be credited to 2022 ESTIMATED TAX 30.
31. Georgia Wildlife Conservation Fund (No gift of less than \$1.00) 31.
32. Georgia Fund for Children and Elderly (No gift of less than \$1.00) 32.
33. Georgia Cancer Research Fund (No gift of less than \$1.00) 33.
34. Georgia Land Conservation Program (No gift of less than \$1.00) 34.
35. Georgia National Guard Foundation (No gift of less than \$1.00) 35.
36. Dog & Cat Sterilization Fund (No gift of less than \$1.00) 36.
37. Saving the Cure Fund (No gift of less than \$1.00) 37.
38. Realizing Educational Achievement Can Happen (REACH) Program 38.
(No gift of less than \$1.00)



YOUR SOCIAL SECURITY NUMBER
843-62-1522

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39. Public Safety Memorial Grant (No gift of less than \$1.00)..... 39.

40. Form 500 UET (Estimated tax penalty) 500 UET exception attached 40.

41. (If you owe) Add Lines 28, 31 thru 40 41.
MAKE CHECK PAYABLE TO GEORGIA DEPARTMENT OF REVENUE..

Amount Due Mail To:
GEORGIA DEPARTMENT OF REVENUE
PROCESSING CENTER, PO BOX 740399
ATLANTA, GA 30374-0399

42. (If you are due a refund) Subtract the sum of Lines 30 thru 40 from Line 29
THIS IS YOUR REFUND..... 42. 140
If you do not enter Direct Deposit information or if you are a first time filer you will be issued a paper check.

42a. Direct Deposit (U.S. Accounts Only)

Type: Checking Routing Number 061000052
Savings ☒ Account Number 334069199271

Refund Due Mail To:
GEORGIA DEPARTMENT OF REVENUE
PROCESSING CENTER, PO BOX 740380
ATLANTA, GA 30374-0380

INCLUDE ALL ITEMS IN 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.

Taxpayer's Signature (Check box if deceased)

Spouse's Signature (Check box if deceased)

Taxpayer's Date of Death

Spouse's Date of Death

Taxpayer's Signature Date
03/16/2022

Taxpayer's Phone Number

Spouse's Signature Date

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).

Taxpayer's E-mail Address

I authorize DOR to discuss this return
with the named preparer.

Preparer's Phone Number

Signature of Preparer
Name of Preparer Other Than Taxpayer

Preparer's FEIN

Preparer's Firm Name

Preparer's SSN/PTIN/SIDN



2207423213

YOUR SOCIAL SECURITY NUMBER

843-62-1522

DO NOT USE LINES 9 THRU 14 OF PAGES 2 AND 3 FORM 500 or 500X**SCHEDULE 3 COMPUTATION OF GEORGIA TAXABLE INCOME FOR ONLY PART-YEAR RESIDENTS AND NONRESIDENTS.**

Income earned in another state as a Georgia resident is taxable but other state(s) tax credit may apply. See IT-511 Tax Booklet.

FEDERAL INCOME AFTER GEORGIA ADJUSTMENT (COLUMN A)		INCOME NOT TAXABLE TO GEORGIA (COLUMN B)		GEORGIA INCOME (COLUMN C)	
1. WAGES, SALARIES, TIPS, etc	6250	1. WAGES, SALARIES, TIPS, etc		1. WAGES, SALARIES, TIPS, etc	6250
2. INTEREST AND DIVIDENDS		2. INTEREST AND DIVIDENDS		2. INTEREST AND DIVIDENDS	
3. BUSINESS INCOME OR (LOSS)		3. BUSINESS INCOME OR (LOSS)		3. BUSINESS INCOME OR (LOSS)	
4. OTHER INCOME OR (LOSS)		4. OTHER INCOME OR (LOSS)		4. OTHER INCOME OR (LOSS)	
5. TOTAL INCOME: TOTAL LINES 1 THRU 4	6250	5. TOTAL INCOME: TOTAL LINES 1 THRU 4		5. TOTAL INCOME: TOTAL LINES 1 THRU 4	6250
6. TOTAL ADJUSTMENTS FROM FORM 1040		6. TOTAL ADJUSTMENTS FROM FORM 1040		6. TOTAL ADJUSTMENTS FROM FORM 1040	
7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1		7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1		7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1	
8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7	6250	8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7		8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7	6250
9. RATIO: Divide Line 8, Column C by Line 8, Column A enter percentage or check the box for Time Ratio. Enter percentage.....		9. 100.00		% Not to exceed 100%	
10a. Itemized <input checked="" type="checkbox"/> or Standard Deduction or Georgia Itemized (See IT-511 Tax Booklet)		10a.		211	
10b. Additional Standard Deduction Self: 65 or over? Blind? Spouse: 65 or over? Blind? Total X 1,300=		10b.			
11. Personal Exemptions from Form 500 or Form 500X (See IT-511 Tax Booklet)					
11a. Enter the number on Line 6c from Form 500 or Form 500X <u>1</u> multiply by \$2,700 for filing status A or D or multiply by \$3,700 for filing status B or C.....		11a.		2700	
11b. Enter the number on Line 7a from Form 500 or Form 500X multiply by \$3,000 ..		11b.			
12. Total Deductions and Exemptions: Add Lines 10a, 10b, 11a, and 11b		12.		2911	
13. Multiply Line 12 by Ratio on Line 9 and enter result.....		13.		2911	
14. Income before GA NOL: Subtract Line 13 from Line 8, Column C Enter here and on Line 15a, Page 3 of Form 500 or Form 500X.....		14.		3339	

STATE TAX TREATY INCOME STATEMENT

Tax year: **2021**

Taxpayer's Name: ZIXIN YIN

Social Security Number / ITIN: 843-62-1522

Country of Residence: CHINA

Tax treaty items claimed:							
1	2	3	4	5	6	7	8
Type of income	Federal Tax Treaty Article	Gross compensation	Gross GA compensation	TT exempt	GA portion	Net compensation	Net GA compensation
Compensation during study or training	20(c)	11250	11250	5000	5000	6250	6250