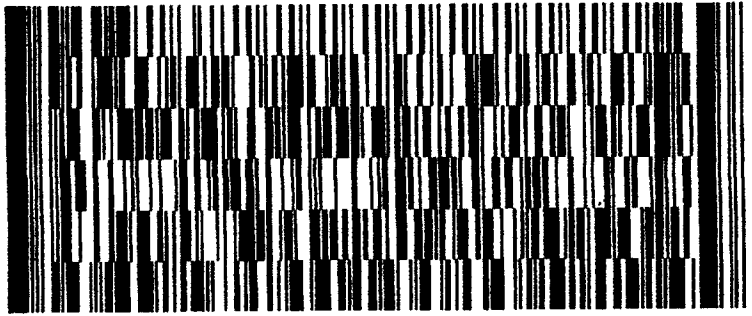




1700404017



Georgia Form 500 (Rev. 08/02/16) Individual Income Tax Return Georgia Department of Revenue 2016 (Approved web version)

Page 1

Fiscal Year Beginning

Fiscal Year Ending

Please check this box if you have attached more than three pages of Form 500 Schedule 2.

DRIVER'S LICENSE/STATE ID

STATE ISSUED

YOUR FIRST NAME

MI

YOUR SOCIAL SECURITY NUMBER

1. B R I A N

E

LAST NAME

SUFFIX

H A R R I S S

Special Program Code See IT-511 Tax Booklet

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. 1 9 9 1 9 T A R I K A A V E N U E

500 UET Exception Attached

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

STATE ZIP CODE

3. C H U G I A K

A K 9 9 5 6 7

(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

Part-Year Residents and Nonresidents must omit Lines 9 thru 14 and use Form 500 Schedule 3.

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

Filing Status

5. C

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

ALL PAGES (1-5) ARE REQUIRED FOR PROCESSING



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YOUR SOCIAL SECURITY NUMBER XXXXXXXXXX

- 7a. Number of Dependents (Enter details on Line 7c., and DO NOT include yourself or your spouse).....▶ 7a. **0**
- 7b. Add Lines 6c and 7a. Enter total.....▶ 7b. **1**
- 7c. Dependents (If you have more than 5 dependents, attach a list of additional dependents)

First Name, MI. _____ Social Security Number _____	Last Name _____ Relationship to You _____
First Name, MI. _____ Social Security Number _____	Last Name _____ Relationship to You _____
First Name, MI. _____ Social Security Number _____	Last Name _____ Relationship to You _____
First Name, MI. _____ Social Security Number _____	Last Name _____ Relationship to You _____
First Name, MI. _____ Social Security Number _____	Last Name _____ Relationship to You _____

**INCOME COMPUTATIONS**

If amount on line 8, 9, 10, 13 or 15 is negative, use the minus sign (-). Example -3,456.

8. Federal adjusted gross income (From Federal Form 1040, 1040A or 1040 EZ). ▶ 8. **2 1 4 6**
- (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 enclose a copy of your Federal Form 1040 Pages 1 and 2.
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.

**ALL PAGES (1-5) ARE REQUIRED FOR PROCESSING**



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YOUR SOCIAL SECURITY NUMBER XXXXXXXXXX

<p>11. Standard Deduction (Do not use FEDERAL STANDARD DEDUCTION) .....          (See IT-511 Tax Booklet)</p> <p>b. Self: 65 or over? <input type="checkbox"/> Blind? <input type="checkbox"/> Total <input type="text"/> x 1,300=.....</p> <p>Spouse: 65 or over? <input type="checkbox"/> Blind? <input type="checkbox"/></p> <p>c. Total Standard Deduction (Line 11a + Line 11b).....          Use EITHER Line 11c OR Line 12c (Do not write on both lines)</p>	<p>▶ 11a.</p> <p>▶ 11b.</p> <p>▶ 11c.</p>	<p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p>
<p>12. Total Itemized Deductions used in computing Federal Taxable Income. If you use itemized deductions, you must enclose Federal Schedule A</p> <p>a. Federal Itemized Deductions (Schedule A-Form 1040).....</p> <p>b. Less adjustments: (See IT-511 Tax Booklet).....</p> <p>c. Georgia Total Itemized Deductions.....</p>	<p>▶ 12a.</p> <p>▶ 12b.</p> <p>▶ 12c.</p>	<p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p>
<p>13. Subtract either Line 11c or Line 12c from Line 10; enter balance.....</p>	<p>▶ 13.</p>	<p><input type="text"/></p>
<p>14a. Number on Line 6c. <b>1</b> multiply by \$2,700 for filing status A or D          OR multiply by \$3,700 for filing status B or C</p>	<p>▶ 14a.</p>	<p><input type="text"/> 3 7 0 0</p>
<p>14b. Number on Line 7a. <b>0</b> multiply by \$3,000.....</p>	<p>▶ 14b.</p>	<p><input type="text"/> 0</p>
<p>14c. Add Lines 14a. and 14b. Enter total.....</p>	<p>▶ 14c.</p>	<p><input type="text"/> 3 7 0 0</p>
<p>15. Georgia taxable income (Line 13 less Line 14c or Schedule 3, Line 14)</p>	<p>▶ 15.</p>	<p><input type="text"/> 0</p>
<p>16. Tax (Use Tax Table in the IT-511 Tax Booklet).....</p>	<p>▶ 16.</p>	<p><input type="text"/> 0</p>
<p>17. Low Income Credit 17a. <input type="text"/> 17b. <input type="text"/></p>	<p>▶ 17c.</p>	<p><input type="text"/> 0</p>
<p>18. Other State(s) Tax Credit.....</p>	<p>▶ 18.</p>	<p><input type="text"/> 0</p>
<p>19. Credits used from IND-CR Summary Schedule.....</p>	<p>▶ 19.</p>	<p><input type="text"/> 0</p>
<p>20. Total Credits used from all non IND-CR credits (Sum of all Schedule 2s).....</p>	<p>▶ 20.</p>	<p><input type="text"/> 0</p>
<p>21. Total Credits Used (sum of Lines 17-20) cannot exceed Line 16.....</p>	<p>▶ 21.</p>	<p><input type="text"/> 0</p>
<p>22. Balance (Line 16 less Line 21) if zero or less than zero, enter zero.....</p>	<p>▶ 22.</p>	<p><input type="text"/> 0</p>
<p>23. Georgia Income Tax Withheld on Wages and 1099s.....          (Enter Tax Withheld Only and enclose W-2s and/or 1099s)</p>	<p>▶ 23.</p>	<p><input type="text"/> 4 2 4 6</p>
<p>24. Other Georgia Income Tax Withheld.....          (Must enclose G2-A, G2-FL, G2-LP and/or G2-RP)</p>	<p>▶ 24.</p>	<p><input type="text"/> 0</p>

PLEASE COMPLETE INCOME STATEMENT DETAILS ON PAGE 4.

**ALL PAGES (1-5) ARE REQUIRED FOR PROCESSING**



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YOUR SOCIAL SECURITY NUMBER **[REDACTED]**

INCOME STATEMENT DETAILS Enter income reported 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: <input checked="" type="checkbox"/> W-2s    G2-A    G2-LP 1099s    G2-FL    G2-RP	1. WITHHOLDING TYPE: W-2s    G2-A    G2-LP 1099s    G2-FL    G2-RP	1. WITHHOLDING TYPE: W-2s    G2-A    G2-LP 1099s    G2-FL    G2-RP	2. EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN) X    SSN	2. EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN)    SSN	2. EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN)    SSN
3. EMPLOYER/PAYER STATE WITHHOLDING ID	3. EMPLOYER/PAYER STATE WITHHOLDING ID	3. EMPLOYER/PAYER STATE WITHHOLDING ID	4. GA WAGES / INCOME 0	4. GA WAGES / INCOME	4. GA WAGES / INCOME
5. GA TAX WITHHELD 4   2   4   6	5. GA TAX WITHHELD	5. GA TAX WITHHELD	(INCOME STATEMENT D)	(INCOME STATEMENT E)	(INCOME STATEMENT F)
1. WITHHOLDING TYPE: W-2s    G2-A    G2-LP 1099s    G2-FL    G2-RP	1. WITHHOLDING TYPE: W-2s    G2-A    G2-LP 1099s    G2-FL    G2-RP	1. WITHHOLDING TYPE: W-2s    G2-A    G2-LP 1099s    G2-FL    G2-RP	2. EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN)    SSN	2. EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN)    SSN	2. EMPLOYER/PAYER FEDERAL ID NUMBER (FEIN)    SSN
3. EMPLOYER/PAYER STATE WITHHOLDING ID	3. EMPLOYER/PAYER STATE WITHHOLDING ID	3. EMPLOYER/PAYER STATE WITHHOLDING ID	4. GA WAGES / INCOME	4. GA WAGES / INCOME	4. GA WAGES / INCOME
5. GA TAX WITHHELD	5. GA TAX WITHHELD	5. GA TAX WITHHELD			

Please complete the Supplemental W-2 Income Statement if additional space is needed.

25. Estimated tax for 2016 and Form IT-560 .....	▶ 25.					0
26. Total prepayment credits (Add Lines 23, 24 and 25).....	▶ 26.	4	2	4	6	
27. If Line 22 exceeds Line 26 enter BALANCE DUE STATE .....	▶ 27.					
28. If Line 26 exceeds Line 22 enter OVERPAYMENT amount .....	▶ 28.	4	2	4	6	
29. Amount to be credited to 2017 ESTIMATED TAX .....	▶ 29.					0





1707404017

YOUR SOCIAL SECURITY NUMBER [REDACTED]

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 0	1. WAGES, SALARIES, TIPS, etc 0	1. WAGES, SALARIES, TIPS, etc 0
2. INTERESTS AND DIVIDENDS 7 4	2. INTERESTS AND DIVIDENDS 7 4	2. INTERESTS AND DIVIDENDS 0
3. BUSINESS INCOME OR (LOSS) 0	3. BUSINESS INCOME OR (LOSS) 0	3. BUSINESS INCOME OR (LOSS) 0
4. OTHER INCOME OR (LOSS) 2 0 7 2	4. OTHER INCOME OR (LOSS) 2 0 7 2	4. OTHER INCOME OR (LOSS) 0
5. TOTAL INCOME: TOTAL LINES 1 THRU 4 2 1 4 6	5. TOTAL INCOME: TOTAL LINES 1 THRU 4 2 1 4 6	5. TOTAL INCOME: TOTAL LINES 1 THRU 4 0
6. TOTAL ADJUSTMENTS FROM FORM 1040 0	6. TOTAL ADJUSTMENTS FROM FORM 1040 0	6. TOTAL ADJUSTMENTS FROM FORM 1040 0
7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1 0	7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1 0	7. TOTAL ADJUSTMENTS FROM FORM 500, SCHEDULE 1 0
8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7 2 1 4 6	8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7 2 1 4 6	8. ADJUSTED GROSS INCOME: LINE 5 PLUS OR MINUS LINES 6 AND 7 0

9. RATIO: Divide Line 8, Column C by Line 8, Column A. Enter percentage.....▶ 9. 0 % Not to exceed 100%

10a. Itemized  or Standard Deduction  (See IT-511 Tax Booklet).....▶ 10a. 1 5 0 0

10b. Additional Standard Deduction  
 Self: 65 or over?  Blind?  Spouse: 65 or over?  Blind?  Total  x 1,300= 10b. 0

11. Personal Exemption from Form 500 (See IT-511 Tax Booklet)

11a. Number on Line 6c. 1 multiply by \$2,700 for filing status A or D OR .....▶ 11a. 3 7 0 0  
 from Form 500 or 500X multiply by \$3,700 for filing status B or C

11b. Number on Line 7a. 0 multiply by \$3,000.....▶ 11b. 0  
 from Form 500 or 500X

11c. Add Lines 11a. and 11b. Enter total.....▶ 11c. 3 7 0 0

12. Total Deductions and Exemptions: Add Lines 10a, 10b, and 11c.....▶ 12. 5 2 0 0

13. Multiply Line 12 by Ratio on Line 9 and enter result .....▶ 13. 0

14. Georgia Taxable Income: Subtract Line 13 from Line 8, Column C  
 Enter here and on Line 15, Page 3 of Form 500 or Form 500X.....▶ 14. 0

List the state(s) in which the income in Column B was earned and/or to which it was reported.

1. AK 2. 3. 4.

Form **4852**

(Rev. September 2017)

Department of the Treasury  
Internal Revenue Service

**Substitute for Form W-2, Wage and Tax Statement, or  
Form 1099-R, Distributions From Pensions, Annuities, Retirement  
or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.**

▶ Attach to Form 1040, 1040A, 1040-EZ, or 1040X.  
▶ Go to [www.irs.gov/Form4852](http://www.irs.gov/Form4852) for the latest information.

OMB No. 1545-0074

**1** Name(s) shown on return  
**Brian E. Harriss**

**2** Your social security number  
[REDACTED]

**3** Address  
**19919 Tarika Avenue, Chuqiak, AK 99567**

**4** Enter year in space provided and check one box. For the tax year ending December 31, 2016,  
I have been unable to obtain (or have received an incorrect)  Form W-2 OR  Form 1099-R.  
I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

**5** Employer's or payer's name, address, and ZIP code  
[REDACTED] **CRANBERY TOWNSHIP, PA 16066**

**6** Employer's or payer's identification number (if known)  
[REDACTED]

**7 Form W-2.** Enter wages, tips, other compensation, and taxes withheld.

<b>a</b> Wages, tips, and other compensation . . . . .	<u>0.00</u>	<b>f</b> State income tax withheld . . . . .	<u>4,245.68</u>
<b>b</b> Social security wages . . . . .	<u>0.00</u>	(Name of state) . . . . .	<u>GA</u>
<b>c</b> Medicare wages and tips . . . . .	<u>0.00</u>	<b>g</b> Local income tax withheld . . . . .	<u>0.00</u>
<b>d</b> Social security tips . . . . .	<u>0.00</u>	(Name of locality) . . . . .	<u>N/A</u>
<b>e</b> Federal income tax withheld . . . . .	<u>0.00</u>	<b>h</b> Social security tax withheld . . . . .	<u>7,347.00</u>
		<b>i</b> Medicare tax withheld . . . . .	<u>2,119.00</u>

**8 Form 1099-R.** Enter distributions from pensions, annuities, retirement or profit-sharing plans, IRAs, insurance contracts, etc.

<b>a</b> Gross distribution . . . . .	_____	<b>f</b> Federal income tax withheld . . . . .	_____
<b>b</b> Taxable amount . . . . .	_____	<b>g</b> State income tax withheld . . . . .	_____
<b>c</b> Taxable amount not determined . . . . .	<input type="checkbox"/>	<b>h</b> Local income tax withheld . . . . .	_____
<b>d</b> Total distribution . . . . .	<input type="checkbox"/>	<b>i</b> Employee contributions . . . . .	_____
<b>e</b> Capital gain (included in line 8b) . . . . .	_____	<b>j</b> Distribution codes . . . . .	_____

**9** How did you determine the amounts on lines 7 and 8 above?

**Personal knowledge and information supplied by line 5 payer.**

**10** Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.

**Correspondence.**

**General Instructions**

Section references are to the Internal Revenue Code.

**Future developments.** Information about any future developments affecting Form 4852 (such as legislation enacted after we release it) will be available at [www.irs.gov/Form4852](http://www.irs.gov/Form4852).

**Purpose of form.** Form 4852 serves as a substitute for Forms W-2, W-2c, and 1099-R and is completed by you or your representatives when (a) your employer or payer doesn't issue you a Form W-2 or Form 1099-R or (b) an employer or payer has issued an incorrect Form W-2 or Form 1099-R. Attach this form to the back of your income tax return, before any supporting forms or schedules.

You should always attempt to get your Form W-2, Form W-2c, or Form 1099-R from your employer or payer before contacting the IRS or filing Form 4852. If you do not receive the missing or corrected form from your employer or payer by the end of February, you may call the IRS at 1-800-829-1040 for assistance. You must provide your name, address (including ZIP code), phone number, social security number, and dates of employment. You must also provide your employer's or payer's name, address (including ZIP code), and phone number. The IRS will contact your employer or payer and request the missing form. The IRS will also send you a Form 4852. If you don't receive the missing form in sufficient time to file your income tax return timely, you may use the Form 4852 that the IRS sent you.

If you received an incorrect Form W-2 or Form 1099-R, you should always attempt to have your employer or payer issue a corrected form before filing Form 4852.

**Note:** Retain a copy of Form 4852 for your records. To help protect your social security benefits, keep a copy of Form 4852 until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year. After September 30 following the date shown on line 4, you may use your Social Security online account to verify wages reported by your employers. Please visit [www.SSA.gov/myaccount](http://www.SSA.gov/myaccount). Or, you may contact your local SSA office to verify wages reported by your employer.

**Will I need to amend my return?** If you receive a Form W-2, Form W-2c, or Form 1099-R after your return is filed with Form 4852, and the information you receive differs from the information reported on your return, you must amend your return by filing Form 1040X, Amended U.S. Individual Income Tax Return. You are responsible for filing your income tax return with accurate information regardless of whether you receive a Form W-2, Form W-2c, or Form 1099-R and regardless of whether the information on any forms received is correct.

**Penalties.** The IRS will challenge the claims of individuals who attempt to avoid or evade their federal tax liability by using Form 4852 in a manner other than as prescribed. Potential penalties for the improper use of Form 4852 include: