



Georgia Form 500 (Rev. 06/22/22) Individual Income Tax Return Georgia Department of Revenue

2022 (Approved software version)

#### Page 1

Fiscal Year Beginning	STATE ISSUED				
Fiscal Year Ending	YOUR DRIVER'S LICENSE/STATE ID				
YOUR FIRST NAME  1. HARIKA		MI	YOUR SOCIAL SE	ECURITY NUMBER	
LAST NAME (For Name Change See IT-5	11 Tax Booklet)		su	JFFIX	
SPOUSE'S FIRST NAME		MI	SPOUSE'S SOCI	AL SECURITY NUMBER	DEPARTMENT USE ONLY
LAST NAME			SU	IFFIX	
ADDRESS (NUMBER AND STREET or P.O. BOX 2. 1633 HOMESTEAD TRL	X) (Use 2nd address lir	ne for Apt,	Suite or Building N	Number) CHECK IF ADDRESS HAS CHANGE	:D
CITY (Please insert a space if the city has mult 3. ALPHARETTA	tiple names)		state GA	<b>ZIP CODE</b> 30004	
(COUNTRY IF FOREIGN)					Residency Status
4. Enter your Residency Status with the ap	propriate number	· <del></del>			
1. FULL- YEAR RESIDENT 2. PART- YEAR RESI	DENT		то		3. NONRESIDENT
Omit Lines 9 thru 14 and use Fo	orm 500 Schedu	ıle 3 if y	ou are a par	t-year or nonresident filer	r. Filing Status
5. Enter Filing Status with appropriate le	etter (See IT-511	Tax Book	let)		•
A. Single B. Married filing joint C. Married filing s     6. Number of exemptions (Check appro	eparate (Spouse's soci	al security ı	number must be en		

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

7a.

First Name, MI.



**Last Name** 

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

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	Social Security Number		Relationship t	o You	
Fire	st Name, MI.		Last Name		
	Social Security Number		Relationship to	o You	
Fir	st Name, MI.		Last Name		
	Social Security Number		Relationship to	o You	
Firs	st Name, MI.		Last Name		
	Social Security Number		Relationship to	o You	
	COME COMPUTATIONS ount on line 8, 9, 10, 13 or 15 is n	egative, use the	minus sign (-). E	xample -3456.	
(1	ederal adjusted gross income (From Do not use FEDERAL TAXABLE INC V-2s you must include a copy of yo	COME) If the amou	ınt on Line 8 is \$4	0,000 or more, or your gr	1750 ross income is less than your
	djustments from Form 500 Schedul		• • •		
10. G	eorgia adjusted gross income (Net	total of Line 8 and	Line 9)	10.	1750
	andard Deduction (Do not use FED (See IT-511 Tax Booklet)	ERAL STANDAR	D DEDUCTION)	11a.	5400
I	b. Self: 65 or over? Blind?	Total	x 1,300=	11b.	
	Spouse: 65 or over? Blind? c. Total Standard Deduction (Line 11 Use EITHER Line 11c OR Line 12c (	a + Line 11b) Do not write on bot	h lines)	11c.	5400
12. To	otal Itemized Deductions used in com	puting Federal Tax	able Income. If you	use itemized deductions,	you must include Federal Schedule A
a	a. Federal Itemized Deductions (Sch	nedule A- Form 10	40)	12a.	
b	o. Less adjustments: (See IT-511 Ta	x Booklet)		12b.	
C.	. Georgia Total Itemized Deductions.			12c.	
13. S	ubtract either Line 11c or Line 12c t	from Line 10; ente	r balance	13.	-3650



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2700

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14a. Enter the number from Line 6c.  $\,1\,$  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 fro	m Line	7a. Mult	iply b	y \$3,000		14b.				
14c.	Add Lines 14a. and	14b. En	ter total				14c.				2700
	Income before GA N Georgia NOL utilized applying the 80% lin	d (Cann	ot exceed Lir	ne 15a	a or the amoun	t after	15a. ···15b.				-6350
15c.	Georgia Taxable Inc	ome (Li	ne 15a less L	ine 1	5b)		15c.				-6350
16.	Tax (Use Tax Rate S	Schedul	e in the IT-51	1 Tax	x Booklet)		16.				0
17.	Low Income Credit	17a	a. 1	17b.	26		17c.				0
18.	Other State(s) Tax (	Credit (I	nclude a cop	y of th	ne other state(s	) return)	18.				
19.	Credits used from IN	ND-CR S	Summary Wo	rkshe	et		19.				
20.	Total Credits Used electronically)	from S	chedule 2 G	eorgi	a Tax Credits	(must be file	<b>d</b> 20.				
21.	Total Credits Used (sur	m of Line	es 17-20) canno	ot exce	eed Line 16		21.				0
22.	Balance (Line 16 les	ss Line 2	21) if zero or I	ess th	nan zero, enter :	zero	22.				0
GΑ	COME STATEMENT D Wages/Income. For o or for Form G2-FL en (INCOME STATEMENT)	other ind nter zer	come stateme			using the inco			·	e 12 or 13; Fo	
4	WITHHOLDING TYPE:	~,		1.	WITHHOLDING	•		1.	WITHHOLDING 1	•	
١.	X W-2 G2-A		G2-LP		W-2	G2-A	G2-LP	١.	W-2	G2-A	G2-LP
	1099 G2-F		G2-RP		1099	G2-FL	G2-RP		1099	G2-FL	G2-RP
2.	EMPLOYER/PAYER FEID NUMBER (FEIN)			2.	EMPLOYER/PA			2.	EMPLOYER/PAY		
	586011208										
3.	EMPLOYER/PAYER ST. 2827968FW	ATE WIT	HHOLDING ID	3.	EMPLOYER/PA	YER STATE WI	THHOLDING ID	3.	EMPLOYER/PAY	ER STATE WIT	THHOLDING ID
4.	GA WAGES / INCOME	50		4.	GA WAGES / IN	COME		4.	GA WAGES / INC	OME	

PLEASE COMPLETE INCOME STATEMENT DETAILS ON PAGE 4.

5. GA TAX WITHHELD

This Page (3) is required for processing

REV 01/03/23 PRO

1555 115 2022 GA 004 T1 22

5. GA TAX WITHHELD

5. GA TAX WITHHELD

4



2300411544

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ID

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	(INCOME STATE	MENT D)			(INCOME STAT	EMENT E)			(INCOME STAT	TEMENT F)	
1.	WITHHOLDING	TYPE:		1.	WITHHOLDING	TYPE:		1.	WITHHOLDING	TYPE:	
	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/PAY ID NUMBER (FEI			2.	EMPLOYER/PA		RAL SSN	2.	EMPLOYER/PA		
3.	EMPLOYER/PAY	YER STATE W	/ITHHOLDING ID	3.	EMPLOYER/PA	YER STAT	E WITHHOLDIN	GID 3.	EMPLOYER/P	AYER STATE	WITHHOLDING I
4.	GA WAGES / INC	COME		4.	GA WAGES / IN	COME		4.	GA WAGES / I	NCOME	
5.	GA TAX WITHHE	ELD		5.	GA TAX WITHH	ELD		5.	GA TAX WITH	HELD	
23.	Georgia Incor (Enter Tax Wit		nheld on Wage and include W-2s				23.				4
24.	Other Georgi (Must include		ax Withheld ., G2-LP and/or				24.				
25.	Estimated Ta	x paid for 20	022 and Form I	T-560	)		25.				
26.	Schedule 2B F (Cannot be cl		Tax Credits ss filed electror				26.				
27.	Total prepaym	ent credits	(Add Lines 23,	24, 2	5 and 26)		27.				4
28.	If Line 22 exc		7, subtract Line				28.				
29.	If Line 27 exc		2, subtract Line								4
30.	Amount to be	e credited t	o 2023 ESTIM	ATED	TAX		30.				0
31.	Georgia Wildl	life Conserv	ation Fund ( <b>No</b>	gift	of less than \$1	.00)	31.				
32.	Georgia Fund	d for Childre	en and Elderly (	No gi	ft of less than	\$1.00)	32.				
33.	Georgia Can	cer Researd	ch Fund (No gif	t of le	ss than \$1.00	)	33.				
34.	Georgia Land	l Conservati	on Program (N	o gift	of less than \$	1.00)	34.				
35.	Georgia Natio	onal Guard F	oundation ( <b>No</b>	gift o	of less than \$1	.00)	35.				
36.	Dog & Cat Sto	erilization F	und (No gift of	less	than \$1.00)		36.				
37.	Saving the Cu	ure Fund (N	o gift of less t	han \$	1.00)		37.				
38.	Realizing Educ		evement Can Ha	ppen (	REACH) Progra	am	38.				



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GLOBAL TAXES LLC

39.	Public Safety Memorial G	rant (No gift of less than \$1.00)	39	).		
40.	Form 500 UET (Estimate	d tax penalty) 500 UET excep	otion attached 40	O.		
41.	Penalty: Late Payment ar	nd/or Late Filing	41	1.		
42.	Interest		42	2.		
43.	MAKE CHECK PAYABLE	28, 31 thru 42 TO GEORGIA DEPARTMENT OF RTMENT OF REVENUE PROCES A, GA 30374-0399	REVENUE,	3.		
44.	(If you are due a refund)	Subtract the sum of Lines 30 thru 42	2 from Line 29			
		RGIA DEPARTMENT OF REVENUI , GA 30374-0380				4
		t Deposit information or if you	ı are a first time f	iler you will	be issued a paper check.	
44a	. Direct Deposit (U.S. Accounts On			•		
	Routing	•	Account			
	Number 061000227		Number	2710906	674	
T	axpayer's Signature	(Check box if deceased)	Spouse's Si	gnature	(Check box if deceased)	
Т	axpayer's Date of Death			•	,	
Т			Spouse's Da	ate of Death	,	
	axpayer's Signature Date	Taxpayer's Pho 445-231-	one Number	ate of Death	Spouse's Signature Date	
			one Number 0570			ny updates to
-	By providing my e-mail address I	445-231-	one Number 0570			ny updates to
-	By providing my e-mail address I my account(s).	445-231-	one Number 0570			scuss this return
-	By providing my e-mail address I my account(s).	445-231-	one Number 0570	ically notify me a	t the below e-mail address regarding at I authorize DOR to dis	scuss this return
-	By providing my e-mail address I my account(s).	$445-231-$ am authorizing the Georgia Department $\alpha$	one Number 0570	ically notify me a Preparer's	the below e-mail address regarding and the below e-mail address regarding and lateral for the below e-mail a	scuss this return
	By providing my e-mail address I my account(s). Taxpayer's E-mail Address SYAM PRIYA RAM SA Signature of Preparer	445-231- am authorizing the Georgia Department of	one Number 0570	ically notify me a Preparer's 678-	I authorize DOR to diswith the named prepares Phone Number	scuss this return
	By providing my e-mail address I my account(s). Taxpayer's E-mail Address	445-231- am authorizing the Georgia Department of the Georgia Departme	one Number 0570	Preparer's 678 – Preparer'	I authorize DOR to diswith the named prepares Phone Number	scuss this return

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