



0806304011

Georgia Form IT-QEE-TP1 (Last Rev. 8/08)

Qualified Education Expense Credit Preapproval Form
Georgia Department of Revenue Version 6

Please print your numbers like this in black or blue ink:

9 8 7 6 5 4 3 2 1 0

This form is the first step in applying for the income tax credit for qualified education expenses. The form is filed by the taxpayer and is used to request preapproval of an intended contribution to a student scholarship organization.

Enter for Contributor:

INDIVIDUAL FILING SINGLE OR HEAD OF HOUSEHOLD

INDIVIDUAL FILING A MARRIED JOINT RETURN

INDIVIDUAL FILING MARRIED SEPARATE RETURN

C CORPORATION

SUBCHAPTER S CORPORATION FOR GEORGIA PURPOSES, PARTNERSHIP, OR LIMITED LIABILITY COMPANY

FIRST NAME OR NAME OF ENTITY

John

LAST NAME IF INDIVIDUAL

Public

IF INDIVIDUAL FILING JOINT, FIRST NAME OF JOINT FILER

Jane

LAST NAME OF JOINT FILER

Public

ADDRESS (NUMBER AND STREET or P.O. BOX)

123 Main St

CITY

Anytown

MI

TAXPAYER IDENTIFICATION NUMBER

Q 1 2 3 4 5 6 7 8 9

SUFFIX

MI

IF INDIVIDUAL FILING JOINT, I.D # OF JOINT FILER

Q 9 8 7 6 5 4 3 2 1

SUFFIX

DEPARTMENT USE ONLY

STATE

ZIP CODE

GA 3 3 3 3 3 3 3 3 3

TAX YEAR END OF CONTRIBUTOR

1 2 3 1 2 0 0 8

CALENDAR YEAR IN WHICH CONTRIBUTION WILL BE MADE

2 0 0 8

CONTACT PERSON (FOR CONTRIBUTIONS BY ENTITIES)

TELEPHONE NUMBER

- Form IT-QEE-TP1 should be postmarked by November 1 to allow enough time for the amount to be preapproved and the contribution to be made by the end of the calendar year.
The taxpayer must add back to Georgia taxable income the amount of any federal charitable contribution deduction taken on a federal return for which a Georgia qualified education expense credit is allowed.
The tax credit shall not be allowed if the taxpayer designates the taxpayer's qualified education expense for the direct benefit of any dependent of the taxpayer.
The student scholarship organization must be on the Department of Education's website before this form is filed.

A. CONTRIBUTION AMOUNT

- 1. The amount of the contribution the taxpayer intends to make... 2,500.00
2. [For corporate contributors only] Enter 75% of the corporation's estimated income tax liability...
3. Name of student scholarship organization listed on the Department of Education's website. GRACE Scholars, Inc
4. Taxpayer I.D.# of student scholarship organization... 26 3237980



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Taxpayer Identification Number

1 2 3 4 5 6 7 8 9

**B. ADDITIONAL INFORMATION FOR CONTRIBUTORS WHICH ARE SUBCHAPTER S CORPORATIONS FOR GEORGIA PURPOSES, PARTNERSHIPS, OR LIMITED LIABILITY COMPANIES**

The contribution limits for these entities are calculated separately for each shareholder, partner, or member. As such on a separate schedule, the contributor must provide the following information for each shareholder, partner, or member.

1. Name, address and taxpayer identification number
2. Type of taxpayer (i.e. corporation, individual, etc.)
3. If individual, filing status (joint, married filing separate, single, or head of household)
4. If individual filing a joint return, the name and identification number of the joint filer
5. If corporation, 75% of estimated GA income tax liability
6. Tax Year end
7. Profit/loss percentage
8. Amount of intended contribution allocated to each shareholder, partner, or member based on the profit/loss percentage.

**C. CERTIFICATION BY APPLICANT**

Applicant certifies that all information contained above is true to his/her best knowledge and belief and is submitted for the purpose of obtaining preapproval from the Commissioner.

Date: 12 15 2008

Applicant: Printed Name of Contributor (individual or entity)

John Q. Public

*John Q. Public*

Signature of Contributor (if an entity, an authorized officer or tax matters person)

If Contributor is an entity: Printed Name and Title of Person Signing for Entity:

Name:

Title:

Phone Number:

Submit page 1 and page 2 to:  
Georgia Department of Revenue  
Qualified Education Expense Credit  
1800 Century Blvd NE  
Suite 8301  
Atlanta, GA 30345

**D. FOR DEPARTMENT USE ONLY**

DATE RECEIVED

Based on the fifty million dollar cap and your intended contribution amount, you have been preapproved and

allocated \_\_\_\_\_ of qualified education expense credit for calendar

year

Approved by \_\_\_\_\_

Date