

## **2018 GOAL Tax Credit Form**

Complete this Form to authorize GOAL to submit your application to DOR for a 2018 Tax Credit

Send to GOAL by emailing to: <a href="mailto:goal@goalscholarship.org">goal@goalscholarship.org</a> or faxing to: 1-877-478-4625

## **Complete the following fields:**

	Select Tax Filing Status	Tax Credit Limit	
	☐ Individual Filer	up to \$1,000	
	☐ Married Filing Jointly	up to \$2,500	
	☐ Married Filing Separately	up to \$1,250	
	Individual Owner of S-Corp, LLC, or Partnership (Pass-Through Entity)	up to \$10,000	
	C Corporation or Trust	up to 75% of GA Tax Liability	
Taxpayer's Name:		SSN:	<del></del>
Spouse's Name: _		SSN:	
Address:		Phone:	
City:	State: Zip:	E-mail:	
Contribution Amount: 75% of estimated GA income tax liability: (for C Corps & Trusts only)  Designated School:			
Owner of Pass-Through Entity Only:			
1) Who listed above is the pass-through entity owner?			
2) Are you a Single, Married Joint or Married Separate Tax Filer?			
3) Please list owner's estimated 2018 net income from pass-through ownership:			
4) If a Married Joint Filer, do both spouses have pass-through ownership? Yes No			
5) If Yes, please list spouse's estimated 2018 net income from pass-through ownership:			
Please keep me informed about legislative developments.  Please keep me informed so that I have the opportunity to reach out to legislators if there is a chance of increasing the cap on these tax credits in 2018.			
<b>Authorization:</b>			
☐ I authorize GOAL to submit my 2018 GOAL Form to the GA DOR, I commit to making payment in 2018, and to funding my full approved contribution amount within 60 days of DOR approval.			