



# TAXPAYER ANNUAL LOCAL EARNED INCOME TAX RETURN



**Keystone Central Tax Office**  
www.kcsd.us/tax  
Phone: 570-893-4900 Option 8

You are entitled to receive a written explanation of your rights with regard to the audit, appeal, enforcement, refund and collection of local taxes. Contact your Tax Officer.

\*If you have relocated during the tax year, please supply additional information.

Tax Year

DATES LIVING AT EACH ADDRESS	STREET ADDRESS (No PO Box, RD or RR)	CITY OR POST OFFICE	STATE	ZIP
/ / TO / /				
/ / TO / /				

\*\*If you need additional space - please see back of form.

LAST NAME, FIRST NAME, MIDDLE INITIAL	SPOUSE'S LAST NAME, FIRST NAME, MIDDLE INITIAL	
STREET ADDRESS (No PO Box, RD or RR)		
SECOND LINE OF ADDRESS		
CITY	STATE	ZIP CODE

DAYTIME PHONE NUMBER	RESIDENT PSD CODE <div style="border: 1px solid black; width: 40px; height: 20px; margin: 2px;"></div>	EXTENSION <input type="checkbox"/>	AMENDED RETURN <input type="checkbox"/>	NON-RESIDENT <input type="checkbox"/>
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<p>The calculations reported in the first column MUST pertain to the name printed in the column, regardless of whether the husband or wife appears first. <b>Combining income is NOT permitted.</b></p> <p><b>ONLY USE BLACK OR BLUE INK TO COMPLETE THIS FORM</b></p> <p><input type="checkbox"/> Single <input type="checkbox"/> Married, Filing Jointly <input type="checkbox"/> Married, Filing Separately <input type="checkbox"/> Final Return*</p>	<p style="text-align: center;">Social Security #</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 2px;"></div> <p>If you had NO EARNED INCOME, check the reason why:</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> disabled  <input type="checkbox"/> deceased  <input type="checkbox"/> homemaker  <input type="checkbox"/> unemployed         </div> <div> <input type="checkbox"/> student  <input type="checkbox"/> military  <input type="checkbox"/> retired         </div> </div>	<p style="text-align: center;">Spouse's Social Security #</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 2px;"></div> <p>If you had NO EARNED INCOME, check the reason why:</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> disabled  <input type="checkbox"/> deceased  <input type="checkbox"/> homemaker  <input type="checkbox"/> unemployed         </div> <div> <input type="checkbox"/> student  <input type="checkbox"/> military  <input type="checkbox"/> retired         </div> </div>
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1. Gross Compensation as Reported on W-2(s). (Enclose W-2s) . . . . .	.00	.00
2. Unreimbursed Employee Business Expenses. (Enclose PA Schedule UE) . . . .	.00	.00
3. Other Taxable Earned Income * . . . . .	.00	.00
4. <b>Total Taxable Earned Income</b> (Subtract Line 2 from Line 1 and add Line 3) . . . .	.00	.00
5. Net Profit (Enclose PA Schedules*) . . . . . NON-TAXABLE S-Corp earnings check this box: <input type="checkbox"/>	.00	.00
6. Net Loss (Enclose PA Schedules*) . . . . .	.00	.00
7. Total Taxable Net Profit (Subtract Line 6 from Line 5. If less than zero, enter zero) . .	.00	.00
8. Total Taxable Earned Income and Net Profit (Add Lines 4 and 7) . . . . .	.00	.00
9. <b>Total Tax Liability</b> (Line 8 multiplied by ) . See Attached Page	.00	.00
10. Total Local Earned Income Tax Withheld (May not equal W-2 - See Instructions)	.00	.00
11. Quarterly Estimated Payments/Credit From Previous Tax Year . . . . .	.00	.00
12. Out-of-State or Philadelphia Credits (include supporting documentation) . . . . .	.00	.00
13. <b>TOTAL PAYMENTS and CREDITS</b> (Add Lines 10 through 12) . . . . .	.00	.00
14. <b>Refund</b> IF MORE THAN \$1.00, enter amount (or select option in 15) . . . . .	.00	.00
15. <b>Credit Taxpayer/Spouse</b> (Amount of Line 13 you want as a credit to your account) . . . <input type="checkbox"/> Credit to next year <input type="checkbox"/> Credit to spouse	.00	.00
16. <b>EARNED INCOME TAX BALANCE DUE</b> (Line 9 minus Line 13) . . . . .	.00	.00
17. <b>Penalty after April 15*</b> (multiply Line 16 by <b>1%/month</b> ) . . . . .	.00	.00
18. <b>Interest after April 15*</b> (multiply Line 16 by <b>0.25%/month</b> ) . . . . .	.00	.00
19. <b>TOTAL PAYMENT DUE</b> (Add Lines 16, 17, and 18) . . . . .	.00	.00

\*See Instructions

**Please add a \$20 late fee for all returns filed after the deadline.**

Under penalties of perjury, I (we) declare that I (we) have examined this information, including all accompanying schedules and statements and to the best of my (our) belief, they are true, correct and complete.		
YOUR SIGNATURE	SPOUSE'S SIGNATURE (If Filing Jointly)	DATE (MM/DD/YYYY)
PREPARER'S PRINTED NAME & SIGNATURE		PHONE NUMBER

**Payments Made Payable to:** KCSD Tax Office  
86 Administration Drive, Suite 2  
Mill Hall, PA 17751

S-CORPORATION PROFIT/LOSS REPORT

To avoid future correspondence, please report any S Corporation Pass-Through profits (losses) that were reported on your PA 40 Return.

LOCAL WORKSHEET (Moved During the Year)

PART YEAR RESIDENT

Residence #1 \_\_\_\_\_ Dates \_\_\_\_\_ to \_\_\_\_\_ Length of Time \_\_\_\_\_

Residence #2 \_\_\_\_\_ Dates \_\_\_\_\_ to \_\_\_\_\_ Length of Time \_\_\_\_\_

INCOME PRORATION ( \_\_\_\_\_ )

Employer # 1 \_\_\_\_\_ Residence # 1 COMPLETE ADDRESS \_\_\_\_\_

Local Income \$ \_\_\_\_\_ / 12 X \_\_\_\_\_ = \_\_\_\_\_

Withholding \$ \_\_\_\_\_ / 12 X # of months at this residence \_\_\_\_\_ = \_\_\_\_\_

Employer # 2 \_\_\_\_\_ # of months at this residence \_\_\_\_\_

Local Income \$ \_\_\_\_\_ / 12 X \_\_\_\_\_ = \_\_\_\_\_

Withholding \$ \_\_\_\_\_ / 12 X # of months at this residence \_\_\_\_\_ = \_\_\_\_\_

# of months at this residence \_\_\_\_\_

Residence #1 Total Income \_\_\_\_\_ Total Withholding \_\_\_\_\_

INCOME PRORATION ( \_\_\_\_\_ )

Employer # 1 \_\_\_\_\_ Residence # 2 COMPLETE ADDRESS \_\_\_\_\_

Local Income \$ \_\_\_\_\_ / 12 X \_\_\_\_\_ = \_\_\_\_\_

Withholding \$ \_\_\_\_\_ / 12 X # of months at this residence \_\_\_\_\_ = \_\_\_\_\_

Employer # 2 \_\_\_\_\_ # of months at this residence \_\_\_\_\_

Local Income \$ \_\_\_\_\_ / 12 X \_\_\_\_\_ = \_\_\_\_\_

Withholding \$ \_\_\_\_\_ / 12 X # of months at this residence \_\_\_\_\_ = \_\_\_\_\_

# of months at this residence \_\_\_\_\_

Residence #2 Total Income \_\_\_\_\_ Total Withholding \_\_\_\_\_

LINE 10: LOCAL EARNED INCOME TAX WITHHELD WORKSHEET

(Complete worksheet if you work in an area where the non-resident tax rate exceeds your home resident rate)

	(1)	(2)	(3) Home Location	(4) Work Location	(5)	(6) Disallowed	(7) Credit Allowed
	Local Wages	Tax Withheld	Resident Rate	Non-Resident Rate	Col 4 minus Col 3	Withholding Credit	For Tax Withheld
	(W2 box 16 or 18)	(W2 box 19)	(See page 1, line 9)	(See Instructions)	(if less than 0 enter 0)	(Col 1 x Col 5)	(Col 2 - Col 6)
Example:	10,000	130	1.25%	1.30%	0.05%	5.00	125.00
1.							
2.							
3.							
TOTAL - Enter this amount on Line 10							

(See Instructions line 12)

NON-RECIPROCAL STATE WORKSHEET

EARNED INCOME: Taxed in other state as shown on the state tax return.

Enclose a copy of state return or credit will be disallowed (1) \_\_\_\_\_

Local tax 1% or as specified on the front of this form X \_\_\_\_\_

(2) \_\_\_\_\_

Tax Liability Paid to other state(s) (3) \_\_\_\_\_

PA Income Tax (line 1 x PA Income Tax rate for year being reported) (4) \_\_\_\_\_

CREDIT to be used against Local Tax  
(Line 3 minus line 4) On line 12 enter this amount  
or the amount on line 2 of worksheet, whichever is less. (If less than zero, enter zero) (5) \_\_\_\_\_

\*\*Additional Addresses:

DATES LIVING AT EACH ADDRESS	ADDRESS	TWP OR BORO	COUNTY
/ / TO / /			
/ / TO / /			
/ / TO / /			

A NOTE FOR RETIRED AND/OR SENIOR CITIZENS

IF YOU ARE RETIRED AND ARE NO LONGER RECEIVING A SALARY, WAGES OR INCOME FROM A BUSINESS, YOU MAY NOT OWE AN EARNED INCOME TAX.

SOCIAL SECURITY PAYMENTS, PAYMENTS FROM A QUALIFIED PENSION PLAN AND INTEREST AND/OR DIVIDENDS ACCRUED FROM BANK ACCOUNTS AND/OR INVESTMENTS ARE NOT SUBJECT TO THE LOCAL EARNED INCOME TAX.

IF YOU RECEIVED A LOCAL EARNED INCOME TAX FORM AND ARE RETIRED WITH NO EARNED INCOME, PLEASE CHECK THE APPROPRIATE BOX ON THE FORM AND RETURN.

IF YOU STILL RECEIVE WAGES FROM A PART-TIME EMPLOYER OR BUSINESS, YOU WILL NEED TO FILE AND PAY THE EARNED INCOME TAX.



## KEYSTONE CENTRAL SCHOOL DISTRICT TAX OFFICE

P: (570)893-4900 (option 8)  
F: (570)893-4635

86 Administration Dr, Suite 2  
Mill Hall, PA 17751  
[go.kcsd.us/taxoffice](http://go.kcsd.us/taxoffice)

County	Municipality	PSD Code	EIT Rate	Non-Resident Rate	LST
Centre	Curtin Twp	180101	1.5%	0.5%	\$ 10
Centre	Liberty Twp	180102	1.5%	0.0%	\$ 52
Clinton	Allison Twp	180103	1.5%	0.5%	\$ 10
Clinton	Bald Eagle Twp	180104	1.5%	0.5%	\$ 52
Clinton	Beech Creek Boro	180105	1.5%	0.5%	\$ 10
Clinton	Beech Creek Twp	180106	1.5%	0.5%	\$ 10
Clinton	Castanea Twp	180107	1.5%	0.5%	\$ 52
Clinton	Chapman Twp	180108	1.5%	0.5%	\$ 52
Clinton	Colebrook Twp	180109	1.5%	0.5%	\$ 10
Clinton	Dunnstable Twp	180110	1.5%	0.5%	\$ 30
Clinton	East Keating Twp	180111	1.0%	0.0%	\$ 10
Clinton	Flemington Boro	180112	1.5%	1.0%	\$ 52
Clinton	Gallagher Twp	180113	1.5%	0.5%	\$ 10
Clinton	Green Twp	180114	1.5%	0.0%	\$ 10
Clinton	Grugan Twp	180115	1.5%	0.5%	\$ 10
Clinton	Lamar Twp	180116	1.5%	0.5%	\$ 52
Clinton	Leidy Twp	180117	1.5%	1.0%	\$ 52
Clinton	Lock Haven City	180118	1.5%	0.5%	\$ 52
Clinton	Logan Twp	180119	1.5%	0.5%	\$ 10
Clinton	Loganton Boro	180120	1.5%	0.5%	\$ 10
Clinton	Mill Hall Boro	180121	1.5%	0.5%	\$ 30
Clinton	Noyes Twp	180122	1.5%	0.5%	\$ 52
Clinton	Pine Creek Twp (#2)	180123	1.5%	0.5%	\$ 40
Clinton	Porter Twp	180124	1.5%	0.5%	\$ 10
Clinton	Renovo Boro	180125	1.5%	1.0%	\$ 52
Clinton	South Renovo Boro	180126	1.5%	1.0%	\$ 52
Clinton	Wayne Twp	180127	1.5%	0.5%	\$ 52
Clinton	Woodward Twp	180128	1.5%	0.0%	\$ 10
Potter	Stewardson Twp	180129	1.5%	0.0%	\$ 10
	Out of State	880000	Use Non-Resident Rate		



**TAXPAYER ANNUAL  
 LOCAL EARNED INCOME TAX RETURN**

**A. General Instructions****INSTRUCTIONS**

1. **WHEN TO FILE:** This return must be completed and filed by all persons subject to the tax on or before April 15 (unless the 15th is a Saturday or Sunday then file the next business day), regardless of whether or not tax is due. If you file a Federal or State Application for Extension, check the extension box on the front of the form and send this form along with your estimated payment by April 15, unless the 15th is a Saturday or Sunday, then by the next business day. If you use a professional tax preparer, confirm that they will submit your final return for you.
2. **WHERE TO FILE:** Remit to the local earned income tax collector for every tax collection district in which you lived during the year.
3. **EFFECTIVE DATES:** January 1 through December 31, unless otherwise noted on your local earned income tax return.
4. **AMENDED RETURN:** If a taxpayer amends his federal/state income tax return, an amended local earned income tax return must also be filed with the local earned income tax collector.
5. **RECEIPT / COPY:** Your canceled check is sufficient proof of payment.
6. **PENALTY AND INTEREST:** If for any reason the tax is not paid when due, penalty and interest will be charged. Any late, incorrect filing or payment may result in additional costs of collection.
7. **ROUND OFF CENTS** to the nearest whole dollar. Do not include amounts under 50 cents. Increase amounts from 50 to 99 cents to the next dollar amount.
8. **USE BLACK OR BLUE INK ONLY WHEN COMPLETING THIS FORM.**

**B. Regulations/Line by Line Instructions****LINE 1: GROSS EARNINGS FOR SERVICES RENDERED**

**Documentation Required:** W-2(S) must be enclosed (legible photocopies are accepted).

**TAXABLE INCOME INCLUDES:** Salaries, Wages, Commissions, Bonuses, Tips, Stipends, Fees, Incentive Payments, Employee Contributions to Retirement Accounts, Compensation Drawing Accounts (If amounts received as a drawing account exceed the salaries or commission earned, the tax is payable on the amounts received. If the employee subsequently repays to the employer any amounts not in fact earned, the tax shall be adjusted accordingly.). Benefits Accruing from Employment, such as: Annual Leave, Vacation, Holiday, Separation, Sabbatical Leave, Compensation Received in the Form of Property shall be taxed at its fair market value at the time of receipt, Jury Duty Pay, Military Pay for Services Other than Active Duty (Military Reservist: W-2's, Orders, LES required), Sick Pay (if employee received a regular salary during period of sickness or disability by virtue of his agreement of employment), and Taxes Assumed by the Employer. Taxpayer should refer to the PA Department of Revenue regulations regarding taxable compensation. This list is not exhaustive; contact your local earned income tax collector if you have any questions.

**NON-TAXABLE INCOME INCLUDES:** Social Security Benefits, Unemployment Compensation, Pensions, Public Assistance, Death Benefits, Gifts, Interest, Dividends, Boarding and Lodging to Employees for Convenience of Employer, Lottery Winnings, Supplementary Unemployment Benefits (sub pay), Capital Gains (Capital losses may not be used as a deduction against other taxable income.), Disability Benefits (periodical payments received by an individual under a disability insurance plan), Active Military Service and Summer Encampment (Military Reservist: W-2's, Orders, LES required), Personal Use of Company Cars, Cafeteria Plans, and Clergy Housing Allowance. Some forms of payments from Individual Retirement Programs, such as Keogh, Tax Shelter Annuity, IRA, and 401K are not taxable. Taxpayer should refer to the PA Department of Revenue regulations regarding taxable compensation. This list is not exhaustive; contact your local earned income tax collector if you have any questions.

**LINE 2: ALLOWABLE EMPLOYEE BUSINESS EXPENSES**

**Documentation Required:** Pennsylvania form PA-UE must be enclosed (legible photocopies are accepted).

**LINE 3: OTHER TAXABLE EARNED INCOME:** Include income, from work or services performed, which has not been included on line 1 or line 5. Do not include interest, dividends or capital gains.

**Documentation Required:** All 1099's

**LINE 4: TOTAL TAXABLE EARNED INCOME:** Subtract line 2 from line 1 and add line 3.**LINES 5 & 6: NET PROFITS/NET LOSSES FROM BUSINESS:** Use line 5 for profit and line 6 for loss.

**Documentation Required:** 1099(s), PA schedules C, E, F, or K-1 must be enclosed (legible photocopies are accepted) 1099's for all Subcontractors.

**Rule:** A taxpayer may NOT offset a business loss against wages and other compensation (W-2 earnings -- line 1). "Pass-through" income from an S-Corporation is NOT taxable and loss is not deductible. A taxpayer may offset a loss from one business entity against a net profit from another business entity.

**LINE 7: TOTAL TAXABLE NET PROFIT:** Subtract line 6 from line 5; if less than zero, enter zero.

**LINE 8: TOTAL TAXABLE EARNED INCOME AND NET PROFIT:** Add lines 4 & 7.

**LINE 9: TAX LIABILITY:** Multiply line 8 by your local earned income tax rate. If you don't know your rate, contact your local earned income tax collector where you live or visit [www.newPA.com](http://www.newPA.com) to find your rate or see the rate sheet attached.

**LINE 10: EARNED INCOME TAX WITHHELD:** If you work in an area that taxes non-residents at a higher rate than the resident rate where you live, **you may not be able to claim the entire amount of tax withheld on your W-2's.** If this is the case complete the worksheet on the back of the Final Return Form to calculate the amount of income tax withheld to enter on Line 10 of the Final Return. *If this is not the case*, then combine the amount of tax withheld as reported in box 19 of your W-2's and report that amount on Line 10 of the Final Return. To determine if you work in an area that has a Non-Resident Tax Rate that exceeds the resident rate where you live, contact your employer or visit: <http://munstatspa.dced.state.pa.us/FindLocalTax.aspx>

**LINE 11: QUARTERLY ESTIMATED PAYMENTS/ CREDIT FROM PREVIOUS YEAR/ PAYMENTS MADE WITH EXTENSION OR ADDITIONAL PAYMENTS:** List any quarterly estimated tax payments made to date for the appropriate filing year (do not include any penalty or interest amounts that may have been paid with the quarterly payments.) Also include the tax credit from the prior year AND any additional payments made for the filing year, including any amount paid with when requesting an extension.

NOTE: Taxpayers who expect to have net profits or wages not subject to withholding must report and timely pay quarterly estimated tax payments. Form CLGS-32 is used to report the income and pay the tax each quarter and credit may be claimed on this line for any such advance payments of tax.

**LINE 12: OUT-OF-STATE OR PHILADELPHIA CREDITS (include supporting documentation)**

**General Rules Applicable to All Line 12 Credits:**

- (1) Credits for income taxes paid to other states must first be used against your Pennsylvania state income tax liability; any credit remaining thereafter may be used against your local earned income tax liability.
- (2) Credits for income taxes paid to political subdivisions located outside of Pennsylvania or for wage taxes paid to Philadelphia may be taken directly against your local earned income tax liability.
- (3) In calculating your credit for income taxes paid to another state or to a political subdivision, note that the same items of income must be subject to both your local earned income tax and the out-of state tax.
- (4) **No credit for income taxes paid to another state or political subdivision may exceed your total local earned income tax liability.**

**Credit for Taxes Paid to Other States:** You may take a credit based upon the gross earnings taxed both in another state and in Pennsylvania that is in excess of the Pennsylvania state personal income tax rate. THIS CREDIT WILL BE DISALLOWED IF THE NON-RESIDENT STATE RETURN AND THE DOCUMENT SHOWING STATE INCOME TAX WITHHELD ARE NOT PROVIDED (W-2, K-1, Etc.).

**No credits are given for state income tax withheld from an employee who works in a state that has a reciprocal agreement with the Commonwealth of Pennsylvania (Maryland, New Jersey, Ohio, Virginia, West Virginia, and Indiana).**

**Example:** Taxpayer earned wages of \$10,000.00 in Delaware and paid an income tax liability to that state of \$317.00. Assuming the current Pennsylvania state tax rate is 3.07% for the tax year in question, since the \$317.00 exceeds 3.07% (PA Tax) amount of \$307.00 by \$10.00, the \$10.00 may be credited against your local income tax.

Gross Income .....	(1)	\$10,000.00
Local Tax 1% x .01 .....		<u>x.01</u>
	(2)	100.00
Tax paid to Delaware .....	(3)	317.00
PA Income Tax (3.07% x \$10,000.00) .....	(4)	307.00
Credit to be used against Local Tax (Line 3 minus Line 4)		
On Line 12 of the tax return, enter this amount ...	(5)	10.00
or the amount on Line 2 of worksheet, whichever is less		

If all your wages or gross earnings are subject to Delaware State Income Tax (not PA), use the above example to calculate your tax obligation. If you had earned income NOT taxed by Delaware, this income would be subject to the earned income tax effective where you live and must be shown separately on the Local Earned Income Tax Return.

**Credit for Taxes Paid to Political Subdivisions Outside of Pennsylvania:** You may take a credit based upon the gross earnings taxed in both another political subdivision and where you live in Pennsylvania. THIS CREDIT WILL BE DISALLOWED IF THE FOREIGN CITY RETURN AND OR YOUR W-2 FORM SHOWING CITY INCOME TAX WITHHELD IS NOT PROVIDED.

**Credit for Taxes to Philadelphia:** You may use any wage tax paid to Philadelphia as a credit toward your local earned income tax liability. You must complete the Local Earned Income Tax Return. A COPY OF YOUR W-2 AND/OR VERIFICATION OF TAXES PAID MUST BE ENCLOSED WITH THE FORM OR CREDIT WILL BE DISALLOWED. No refunds or credits will be allowed for any overpayment made to Philadelphia. On line 12 of the tax return, enter the amount of Philadelphia wage tax paid.

**LINE 13: TOTAL PAYMENTS AND CREDITS:** Enter the sum of lines 10, 11 & 12.

**LINE 14: REFUND:** If tax (line 9) is less than your credits (line 13), enter amount of refund. If you have an overpayment of taxes in excess of \$1.00, you may elect to receive a refund or take same as credit against the next year's tax liability. A 1099 will be issued to the Federal Government for any credit or refund in excess of \$10.00.

### Failure to remit required W-2's, 1099's, schedules, orders, LES, etc will result in denial of refunds/credits

**LINE 15: CREDIT:** If tax (line 9) is less than your credits (line 13) enter amount of credit and check the applicable box for credit to spouse or credit to next year. A 1099 will be issued to the Federal Government for any credit or refund in excess of \$10.00.

**LINE 16: AMOUNT OF TAX DUE:** If tax (line 9) is larger than your credits (line 13), enter amount of tax due, if less than \$1.00, ENTER ZERO.

**LINE 17 & 18: INTEREST AND PENALTIES:** If for any reason the tax is not paid when due, interest and penalty of the unpaid tax for each month shall be added and collected. Rates: Interest - 0.25% per month. Penalty - 10%.

**LATE FEE:** An additional \$20.00 late fee will be charged per taxpayer for each filing made after the due date. Note: Federal extensions are honored for filing of the tax return (extensions do not apply to payment of tax).

**LINE 20: TOTAL AMOUNT DUE:** The sum of lines 16, 17, 18 (+ late fee if applicable). OMIT IF LESS THAN \$1.00.

**Note:** All accounts are subject to audit and review. Local or city copy of W-2 and/or supporting schedules must be enclosed with tax return.  
(Legible photocopies of W-2s and schedules are accepted).

#### PART-YEAR RESIDENT SCHEDULE

If you moved into a new taxing jurisdiction during the tax year, complete this schedule and transfer the information to your annual local EIT return. If you moved more than once, complete an additional Part-Year Resident Schedule. If part year resident status is attributable to out of state (Pennsylvania) residence, do not complete this schedule. Enter PA wages, PA address and period of residency on page 1.

RESIDENT PSD CODE		FROM		TO		
CURRENT RESIDENCE						
	(STREET ADDRESS ONLY, No PO Box, RD, RR)					
	(MUNICIPALITY, STATE, ZIP)					
EMPLOYER			START DATE			NO. OF MONTHS AT THIS RESIDENCE
PA STATE INCOME \$			/ 12 MONTHS X			(MONTHS AT THIS RESIDENCE) =
WITHHOLDING (Box 19 of W-2) \$			/ 12 MONTHS X			(MONTHS AT THIS RESIDENCE) =
EMPLOYER			START DATE			
PA STATE INCOME \$			/ 12 MONTHS X			(MONTHS AT THIS RESIDENCE) =
WITHHOLDING (Box 19 of W-2) \$			/ 12 MONTHS X			(MONTHS AT THIS RESIDENCE) =
<b>CURRENT RESIDENCE TOTAL INCOME*</b>						
<b>*Put these figures on your first return</b>						

RESIDENT PSD CODE		FROM		TO		
PREVIOUS RESIDENCE						
	(STREET ADDRESS ONLY, No PO Box, RD, RR)					
	(MUNICIPALITY, STATE, ZIP)					
EMPLOYER			START DATE			NO. OF MONTHS AT THIS RESIDENCE
PA STATE INCOME \$			/ 12 MONTHS X			(MONTHS AT THIS RESIDENCE) =
WITHHOLDING (Box 19 of W-2) \$			/ 12 MONTHS X			(MONTHS AT THIS RESIDENCE) =
EMPLOYER			START DATE			
PA STATE INCOME \$			/ 12 MONTHS X			(MONTHS AT THIS RESIDENCE) =
WITHHOLDING (Box 19 of W-2) \$			/ 12 MONTHS X			(MONTHS AT THIS RESIDENCE) =
<b>PREVIOUS RESIDENCE TOTAL INCOME*</b>						
<b>*Put these figures on your second return</b>						