FORM: CLGS-32 (8/12)

Danville Area Earned Income Tax Office
6 E. Mahoning St., PO Box 52
Danville, PA 17821
570.275.4720 fax: 570.275.4755
danveito@ptd.net www.danveito.com

TAXPAYER ANNUAL LOCAL EARNED INCOME TAX RETURN

EXTENSION ☐ AMENDED RETURN ☐ **Tax Year 20** ☐☐

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

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

See Instructions

RESIDENT PSD CODE	TAXPAYER'S PHONE #	TAXPAYER'S SOCIAL SECURITY #	SPOUSE'S SOCIAL SECURITY #
TAXPAYER'S EMAIL		If you had NO EARNED INCOME, check the reason why:	If you had NO EARNED INCOME, check the reason why:
		☐ DISABLED DATE ☐ DECEASED DATE ☐ RETIRED DATE	☐ DISABLED DATE ☐ DECEASED DATE ☐ RETIRED DATE

The amounts reported must correspond to the individuals social security number printed in each column. **Combining income is NOT permited.**

1. Gross Compensation as Reported on W-2(s). (Enclose W-2s) **DO NOT USE BOX 1 FEDERAL WAGES.**	1.	.00	.00
2. Unreimbursed Employee Business Expenses. (Enclose PA Schedule UE)	2.	– .00	.00
3. Other Taxable Earned Income *	3.	.00	.00
4. **Total Taxable Earned Income** (Subtract Line 2 from Line 1 and add Line 3)	4.	.00	.00
5. Net Profit (Enclose PA Schedules*) NON-TAXABLE S-Corp earnings check this box: ☐	5.	.00	.00
6. Net Loss (Enclose PA Schedules*)	6.	– .00	.00
7. Total Taxable Net Profit (Subtract Line 6 from Line 5. If less than zero, enter zero)	7.	.00	.00
8. Total Taxable Earned Income and Net Profit (Add Lines 4 and 7)	8.	.00	.00
9. **Total Tax Liability** (Line 8 multiplied by EIT rate of 1.65%)	9.	.00	.00
10. Total Local Earned Income Tax Withheld as Reported on W-2(s)	10.	.00	.00
11. Quarterly Estimated Payments/Credit From Previous Tax Year	11.	.00	.00
12. Miscellaneous Tax Credits	12.	.00	.00
13. **TOTAL PAYMENTS and CREDITS** (Add Lines 10 through 12)	13.	.00	.00
14. **Refund** IF MORE THAN $1.00, enter amount, or select option in 15 (line 13 minus line 9)	14.	.00	.00
15. **Credit Taxpayer/Spouse** (Amount of Line 14 you want to transfer to your account) ☐ **Credit to next year** ☐ **Credit to spouse**	15.	.00	.00
16. **EARNED INCOME TAX BALANCE DUE** (Line 9 minus Line 13)	16.	.00	.00
17. **Penalty after April 15*** (multiply Line 16 by % rate per instructions)	17.	.00	.00
18. **Interest after April 15*** (multiply Line 16 by % rate per instructions)	18.	.00	.00
19. **TOTAL PAYMENT DUE** (Add Lines 16, 17, and 18) Payable to: DAEITO	19.	.00	.00

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.

TAYPAYER'S SIGNATURE	OCCUPATION		DATE (MM/DD/YYYY)
SPOUSE'S SIGNATURE	OCCUPATION		DATE (MM/DD/YYYY)
PREPARER'S PRINTED NAME & SIGNATURE			PREPARER'S PHONE NUMBER