

# EARNED INCOME TAX RETURN

<b>Richland Township Earned Income Tax Office</b> <b>1328 California Road, Suite C</b> <b>Quakertown, PA 18951</b> <b>215-536-4256      Fax: 215-536-1674</b> <b>Website: www.richlandtownship.org</b>	Year: _____  File this return on or before April 15th. Make checks payable to: <b>Richland Township EIT</b>
	Township: _____  Phone Number: _____

If you moved into or out of a Pennsylvania taxing district, you must file a pro-rated return with each district for the time spent in each, and include a copy with this return.

Present address: \_\_\_\_\_ From \_\_\_/\_\_\_/\_\_\_  
 \_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_  
 \_\_\_\_\_

Former address: \_\_\_\_\_ From \_\_\_/\_\_\_/\_\_\_  
 \_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_  
 \_\_\_\_\_

IF FILING "0", CHECK BOX:  
 HOUSEWIFE       OTHER (Explain) \_\_\_\_\_  
 RETIRED  
 DISABLED

Social Security # \_\_\_\_\_

1. Gross Earned Income <b>(Attach W-2 &amp; 1099)</b> (See back of form)	1		
2. Unreimbursed Business Expenses <b>(Attach copy of PA UE Form for each employer)</b>	2		
3. Net Profit from Business <b>(Attach copies of all applicable Federal Schedules)</b>	3	DO NOT WRITE IN THIS SPACE	
4. Net Loss from Business <b>(Attach copies of all applicable Federal Schedules)</b> <b>Deduct from Net Profit ONLY</b> (See back of form)	4		
5. Subtract Line 4 from Line 3 (If less than zero, enter zero)	5		
6. Income Subject to Tax <b>(Line 1 less Line 2 plus Line 5)</b>	6		
7. Local Tax <b>(.016 x line 6)</b>	7		
8. Local Tax Withheld by Employer(s)	8		
9. Estimated Tax Payments and Carryover Credit	9		
10. Credit for Tax Paid to Other States <b>(Must Attach PA and Other State Return)</b> and Philadelphia (on Phila. earnings only - Phila. tax <u>NOT</u> refundable)	10		
11. Total <b>(Lines 8, 9 &amp; 10)</b>	11		
12. If Line 7 is larger than Line 11, enter balance due	12		
13. Penalty & interest of 1% per month on balance due <b>(If not paid by April 15th)</b>	13		
14. Penalty for <u>NOT</u> making quarterly estimates <b>(8% of Line 12)</b>	14		
15. Delinquent Late Fee: \$10.00 per taxpayer <b>(If filed after April 15th)*</b>	15		
16. TOTAL DUE (Make check payable to: <b>Richland Township EIT</b> )	16		
17. Overpayment <b>(Line 11 less Line 7) (If under \$10, credit ONLY - see back)</b>	17	Refund <input type="checkbox"/> \$ _____ Credit <input type="checkbox"/> \$ _____	

Disregard Overpayments or Underpayments less than \$1.00

**\*NOTE: Extension must be filed by April 15th to avoid delinquent late fee.**

I declare under the penalties provided by law that I have examined this return. To the best of my knowledge and belief, it is a true and complete return.

Taxpayer Signature: \_\_\_\_\_ Date: \_\_\_\_\_