

Our records indicate that you have NOT filed a Local Earned Income Tax Return for the tax year printed above. If you think you have received this form in error, send a copy of your return. YOU ARE REQUIRED TO FILE WHETHER TAX IS DUE, REFUND/CREDIT DUE, TAX IS WITHHELD, PAYMENTS MADE OR YOU HAVE NO EARNED INCOME.

RETURN TO TAX OFFICE BY: CHECK HERE if you have any corrections to NAME, ADDRESS, SSN, or RESIDENT JURISDICTION OR If you moved within the tax year. DO NOT USE RED INK OR PENCIL.

If you had NO EARNED INCOME, please check the reason why: homemaker, disabled, unemployed, student, retired, deceased, military, other

CHECK HERE IF EXTENSION FILED

Please provide spouse's information for our records. This is an individual return. Joint filing is not permitted on this form.

SPOUSE'S NAME SPOUSE'S SOCIAL SECURITY NO.



Home Phone (please provide)

SOCIAL SECURITY NO.

- 1. Gross Earnings as Reported on W-2. Enclose W-2(s) with this form
2. Allowable Non-reimbursed Employee Business Expenses. Include detailed statement of expenses.
3. Taxable W-2 Earnings (Line 1 minus line 2) Audit may be required if all W-2s & supporting schedules are not enclosed
4. Net Loss (Use line 6 for any Net profits)
5. Subtotal (Line 3 minus line 4) IF LESS THAN ZERO, ENTER ZERO
6. Net Profits (Use line 4 for any Net losses)
7. Total Earned Income subject to this tax (Add lines 5 and 6)
8. Tax Liability- Line 7 multiplied by tax rate of
9. Quarterly Estimated Payments.
10. Earned Income Tax Withheld as per W-2
11. Credit from Last Year (If Credit Due)
12. Miscellaneous Credits (i.e. Philadelphia Tax or Out-of-State Tax Credit)
13. Total of 9 + 10 + 11 + 12
14. REFUND / CREDIT: (Line 13 minus line 8) if \$1.00 or more, enter amount and check box below:
15. TAX DUE (Line 8 minus line 13) OMIT IF LESS THAN \$1.00
16. Interest and Penalties
17. COSTS
18. TOTAL AMOUNT DUE (line 15 + 16 + 17) Enter on line 18 and 20

Table with 18 rows and 9 columns for entering tax data.

Signature of Taxpayer Date I declare under penalty of law that the information herein is correct. Prepared by

WRITE TOTAL ON LINES 18 & 20

DO NOT DETACH RETURN ENTIRE NOTICE TO TAX OFFICE

- Please write the last four digits of your social security number on your check.
Remit entire notice to appropriate address, using return envelope provided. If you pay in person, you MUST present the entire notice.
Include all required documentation with this form. Photocopies of W-2(s) and schedules ARE accepted. DO NOT STAPLE DOCUMENTATION TO FORM. DO NOT USE RED INK OR PENCIL.
There will be a \$20.00 cost for returned checks for insufficient funds.
There may be a \$12.50 cost if no check is enclosed for the tax due at time of filing.

19 \$ TOTAL FROM LINE 7

20 \$ TOTAL FROM LINE 18

BERKHEIMER TAX ADMINISTRATOR P. O. BOX 957 BANGOR, PA 18013-0957

AMOUNT OF ENCLOSED CHECK

MAKE CHECK PAYABLE TO: HAB-EIT

Table for office use only with columns T, PI, C