Please staple W-2 Forms and

State College Area School District and Patton Township

checks to the BACK of return in this corner. T S T S T S	NAL EARNED INCOME A Tax Year 2010	AND NET PROFITS TAX RETURN Return Due Date, 04/15/2011	*
☐ Unemployed ☐ Non-Resident ☐ ☐ ☐ Retired ☐ ☐ Deceased T=Taxp		If you are filing as a Non-Resident or Part-Year Resident or Part-Year Resident or Part-Year Resident of Part-Year Resident of Part-Year Resident of Part-Year Resident or Part-Year Resident of Part-Year Resident or Part-	
If you moved during the tax year, please provide each address where you lived for the tax year and complete the part-year resident worksheet.	/ to/// to/// to//	(Complete addre	ess)
urrent Name and Address		Social Security Number (Taxpayer)	Social Security Number (Spouse)

Return form, supporting Patton Township - Tax Office documentation & payment to: 100 Patton Plaza

State College, PA 16803 www.patton.pa.us Phone: (814) 237-1283

Office Hours: 8 a.m. - 4:30 p.m. M-F

Closed 12 - 1 p.m. W

Website:

Two-income couples may each file separately on this form. However tax calculations must be entered in separate columns. Taxpayers must provide verification of earned income/expense items as indicated below with this return.

		TAXPAYER	SPOUSE
1. Earned Income/Compensation (Box 18) (Attach W-2) (See Reverse Side)	1		
2. Less Allowable Business Expenses (Attach PA UE Forms)	2		
3. TOTAL Earned Income & Compensation (Line 1 minus Line 2)	3		
4. Net Effect of Profits From Business, Profession, Farm (Attach Documentation) Loss = 0	4		
5. TOTAL Taxable Earned Income/Compensation & Net Profits (Line 3 plus Line 4.)	5		
6. Calculation of Tax - Multiply Line 5 by 1.45% (Resident) or .5% (Non-Resdient, see instructions)	6		
7. Tax Credits:			
a. Tax Withheld by Employer (Box 19 from W-2 form)	7a		
b. Quarterly Tax Payments	7b		
c. Prior Year Overpayment	7c		
d. Credit for tax paid to other states (complete & attach Sch G & copy of non-PA return)	7d		
e. TOTAL (Add Lines a, b c & d.)	7e		
8. Overpayment (If Line 7 e. is greater than Line 6-Amounts less than \$2 will not be refunded or credited.)			
a. Refund (No refund will be processed without complete documentation.)	8a		
b. Credit to Next Year (No credit will be processed without complete documentation.)	8b		
9. Unpaid Tax Balance (If Line 7 e. is less than Line 6 enter amount due.)	9		
10. Penalty & Interest (1% per month of Line 9 if taxes are paid after April 15. Additional charges will be	10		
assessed for failure to make proper quarterly tax payments.)			
11. TOTAL Payment Due (Line 9 plus Line 10.) NO PAYMENTS UNDER \$2.00 ARE REQUIRED	11		
12. If paying jointly, enter amount enclosed. (A payment due & a credit balance may be combined.)	12		
SIGN YOUR RETURN. Under penalties of periury I (we) have examined this return, and to the best of my (our) belief it is	s true.	correct and complete.	

Has your state or federal income been changed as a result of an audit in the past 3 years? YES NO or

			Are you a student?	Please circle:	Full-time	Part-Time	None
axpayer Signature	Date	Phone Number	·				
			Are you a student?	Please circle:	Full-Time	Part-Time	None
Spouse's Signature	Date	Phone Number					

Preparer's Name Phone Number Signature of Preparer Date

	TA	XP	AYER	SPOUSE		
EMPLOYER'S NAME	GROSS EARNE INCOME	GROSS EARNED INCOME		GROSS EARNED INCOME	TAX WITHHELD	
1						
2						
3						
4						
5						
6						
TOTAL (ENTER ON LINE 1)						

ENCLOSE A W-2 FORM FOR EACH EMPLOYER

OTHER TAXABLE INCOME

NET EFFECT OF PROFITS (LOSSES) FROM BUSINESS, PROFESSION, FARM

DESCRIPTION	TAXPAYER	SPOUSE
FORM 1099		
SCHEDULE C		
SCHEDULE C		
SCHEDULE C		
SCHEDULE F		
SCHEDULE F		
SCHEDULE F		
MISC EARNED INCOME (FORM 1065 PARTNERSHIP (K-1))		
MISC EARNED INCOME (PATENTS, FEES, HONORARIA, ETC)		
Two-income couples may each file separately on this form. However tax calculations must be entered		
in separate columns.		
Taxpayers must provide verification of earned income/expense items as indicated with this return.		
TOTAL (ENTER ON LINE 4, ENCLOSE ALL SCHEDULES & DOCUMENTATION)		

Totals cannot be combined

Total Taxpayer

Total Spouse

Taxpayer's Total Schedule Income cannot be netted against Spouse's Total Schedule Income.

If Total Schedule Income is equal to or greater than zero, enter that amount on line 4 on the front of the return.

If Total Schedule Income is negative, enter zero on line 4 on the front of the return.

The State College Area School District Taxpayers Bill of Rights Notice

You are entitled to receive a written explanation of your rights with regard to the assessment, audit, appeal, enforcement, refund, and collection of certain municipal/school taxes. The written explanation is entitled *Taxpayers Bill of Rights Disclosure Statement*. Upon receiving a request from you, the tax office will give you a copy of the Disclosure Statement at no charge. You may request a copy in person, or by mailing a request to the address indicated on the front of the return.