

READ INSTRUCTIONS:

FOR FILING EARNED INCOME TAX FINAL RETURN

1. WHO MUST FILE **Every resident of Newton township who had taxable income during any part of the year. This return must be filed even though you tax was fully withheld with no tax due.** If you received a final return but had no taxable income for the tax year, please indicate the reason (unemployed, retired, disabled, etc.) on the occupation line.
2. TIME TO FILE On or before April 15th.
3. PLACE TO FILE **Mail completed returns to the Collector of Taxes, 1528 Newton Ransom Blvd., Clarks Summit, PA 18411**
4. TAXABLE INCOME Salaries, wages, commissions, bonuses, incentive payments, fees, tips, fellowships, patent and royalty income, jury duty, inactive military pay, vacation pay received from Union Health and Welfare Benefit Funds (I.L.G.W.U. payments), withholding taxes assumed by employer, sick pay received as regular salary per employee contract, payments for annual leave, vacations, holiday, separation pay, net profits from the operation or ownership of a business, profession or other activity.
5. NON-TAXABLE INCOME Social Security payments, pensions, Insurance proceeds, gifts, bequests and inheritances, wages paid to persons on active military service (excluding reserve duty pay), workmen's compensation, interest, dividends, capital gains, lottery winnings, incidental rental income, income from investment partnerships and Sub-chapter S Corporations.
6. PAYMENTS OR REFUNDS **Payments of less than \$2.00 are not required. Refunds of \$2.00 or less will not be made. All checks should be made payable to Collector of Taxes.**
7. LATE PAYMENTS Add interest to the amount of the unpaid tax at the rate of 6% per year, and an additional penalty of 1/2% of the amount of the unpaid tax for each month or fraction of a month thereof during which the tax remains unpaid, shall be added and collected.
8. FAILURE TO FILE Failure to receive a tax return does not relieve you of the responsibility to file a return. Failure to file may result in imposition of fine.
9. INFORMATION AND ASSISTANCE If you have any questions, need assistance in filing this return or need additional returns, Please call the tax office at (570) 587-1520

ENTER ADDITIONAL INFORMATION HERE:

NEWTON TOWNSHIP - CODE 226
2009 ANNUAL WAGE AND NET PROFITS TAX RETURN

This return to be filed on or before April 15, 2010

Social Security Number _____

Occupation _____

If you have moved within the above year, please complete this section.

"TO" Address _____

"FROM" Address _____

Date Moved _____

ATTACH W-2 HERE

1. GROSS EARNED INCOME:

A. Total gross wages, salaries, fees, commissions, bonuses and other compensation.
A copy of Form W2 or 1099 must be attached to this return for each employer filed with U.S. Internal Revenue Service. TOTAL _____

B. Net Profit from business, profession or occupation (Self-employed persons must file & attach Schedule "C", "E", "F", "K1" if applicable, to this return). **ANY BUSINESS LOSS MAY NOT BE DEDUCTED FROM WAGES on line 1.A** TOTAL _____

C. Enter any business expenses as filed w/federal or state return.
Schedule UE must be attached to this return. TOTAL _____

D. Total (1A + 1B) - 1C TOTAL TAXABLE INCOME _____

2. ENTER 1/2% OF TOTAL TAXABLE INCOME FROM LINE D TOTAL TAX DUE _____

A. Amount, if any, withheld and paid by employer, or already paid by taxpayer: TOTAL TAX PAID _____

B. Balance due: **2 total - 2A** TOTAL TAX DUE _____

C. Refund due: (If line 2A is greater than line 2) TOTAL REFUND DUE _____

3. PENALTY AND INTEREST: If tax is not paid by April 15, 2010, add a penalty of 1/2% per month thereafter PENALTY / INTEREST DUE _____

4. TOTAL TAX DUE: Including penalty and Interest (2B + 3) TAX DUE BY TAXPAYER _____

5. AMOUNT ENCLOSED (Make check payable as below) CHECK AMOUNT _____

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete. If prepared by a person other than a taxpayer, his declaration is based on all information of which he has knowledge.

Signature _____ Date _____ Signature of preparer other than taxpayer _____ Date _____

\$500.00 fine-for making any incomplete, false or fraudulent return on net profits or earned income, or for failing, neglecting or refusing to make any such return

**MAIL THIS RETURN WITH YOUR REMITTANCE TO:
 EIT COLLECTOR - NEWTON TOWNSHIP, 1528 NEWTON RANSOM BLVD, CLARKS SUMMIT PA 18411**