



2017 TAXPAYER ANNUAL LOCAL EARNED INCOME TAX RETURN Allegheny County Central Tax Collection District (70)

JORDAN TAX SERVICE, INC. 437 GRANT ST STE 900 FRICK BLDG PITTSBURGH PA 15219-6101 (412) 345-7966



You are entitled to receive a written explanation of your rights with regard to the audit, appeal, enforcement, refund and collection of local taxes. Contact your Tax Officer. If you have relocated during this year, please complete the section below and the Part-Year Resident Schedule included with the Instructions. A final return is required to be filed for each resident PSD Code lived in. Please include a copy of each return when filing.

Tax Year 2017

Table with 5 columns: DATES LIVING AT EACH ADDRESS, STREET ADDRESS (No PO Box, RD or RR), CITY OR POST OFFICE, STATE, ZIP

Form fields for taxpayer and spouse information: LAST NAME, FIRST NAME, MIDDLE INITIAL; STREET ADDRESS; SECOND LINE OF ADDRESS; CITY; STATE; ZIP CODE

EXTENSION [ ] AMENDED RETURN [ ] NON-RESIDENT [ ]

THIS ANNUAL RETURN MUST BE FILED even if tax was fully withheld by your employer and/or if no additional tax is due.

ONLINE FILING www.jordantax.com/eitfinal

Form section for income and liability details: DAYTIME PHONE NUMBER AND/OR EMAIL ADDRESS; RESIDENT PSD CODE; ACCT. NO.; PIN; Social Security #; Spouse's Social Security #; Combining income is NOT permitted; ONLY USE BLACK OR BLUE INK TO COMPLETE THIS FORM

Main table for tax calculations with 3 columns and 19 rows: 1. Gross Compensation as Reported on W-2(s); 2. Unreimbursed Employee Business Expenses; 3. Other Taxable Earned Income; 4. Total Taxable Earned Income; 5. Net Profit; 6. Net Loss; 7. Total Taxable Net Profit; 8. Total Taxable Earned Income and Net Profit; 9. Total Tax Liability; 10. Total Local Earned Income Tax Withheld; 11. Quarterly Estimated Payments; 12. Miscellaneous Tax Credits; 13. TOTAL PAYMENTS and CREDITS; 14. Refund IF MORE THAN \$1.00; 15. Credit Taxpayer/Spouse; 16. EARNED INCOME TAX BALANCE DUE; 17. Penalty after April 15; 18. Interest after April 15; 19. TOTAL PAYMENT DUE

Declaration and signature section: 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. YOUR SIGNATURE; SPOUSE'S SIGNATURE (If Filing Jointly); DATE (MM/DD/YYYY); PREPARER'S PRINTED NAME & SIGNATURE; PHONE NUMBER