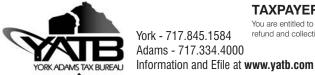
YATB-TO-32



York - 717.845.1584 Adams - 717.334.4000

You are entitled to receive a written explanation of your rights with regard to the audit, appeal, enforcement, refund and collection of local taxes by contacting your Tax Officer.

•	EXTENSION	AMENI	DED RETURN TAX	YEAR	
DATES LIVING AT EACH ADDRESS	STREET ADDRESS (NO PO BOX, RD OR RR)		CITY OR POST OFFICE	STATE	ZIP
to					
to					
to					

Name / Address

*SEE INSTRUCTIONS RESIDENT PSD CODE DAYTIME PHONE NUMBER ONLY USE BLACK OR BLUE INK TO COMPLETE THIS FORM The amounts reported must correspond to the individuals social security number printed in each column. Combining income is NOT permitted. TAXPAYER'S EMAIL ADDRESS DO NOT USE BOX 1 FOR WAGES 1. Gross Compensation as Reported on W-2(s). (Enclose W-2's)		TAXPAYER'S SOCIAL SECURIT If you had NO EARNED INCOME, fill in the box as to the reason why: Disabled Deceased Date above occured:	Petired O O O O O O O O O O	If you had fill in the b	USE'S SOC NO EARNE ox as to the ed	ED INCOM	E, hy: Retir	
ONLY USE BLACK OR BLUE INK TO COMPLETE THIS FORM The amounts reported must correspond to the individuals social security number printed in each column. Combining income is NOT permitted. TAXPAYER'S EMAIL ADDRESS DO NOT USE BOX 1 FOR WAGES		If you had NO EARNED INCOME, fill in the box as to the reason why: Disabled Deceased	Retired O O O O	If you had fill in the b	NO EARNE ox as to the	D INCOM	E, hy: Retir	
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DO NOT USE BOX 1 FOR WAGES		Date above occured: M M D D Y Y Y Y	0 0	Date abov	ve occured:	/ Y Y		_
			0 0	MM		/ Y Y		_
			0 0					\exists
1. Gross Compensation as Reported on W-2(s). (Enclose W-2 s)			0 0					4
	[,				=
2. Unreimbursed Employee Business Expenses. (Enclose PA Schedule UE)			0 0				0 0)
Other Taxable Earned Income*.							0 0)
	L		0 0					_
4. Total Taxable Earned Income(Subtract Line 2 from Line 1 and add Line 3)	_ I		0 0				0 0	_
5. Net Profit (Enclose PA Schedules*)NON-TAXABLE S-Corp earnings enter below			0 0				0 0)
Taxpayer A \$ 00 Taxpayer B \$	00	,						
			0 0				0 0	$\overline{}$
6. Net Loss (Enclose PA Schedules*)	·· <u> </u>							=
7. Total Taxable Net Profit (Subtract Line 6 from Line 5. If less than zero, enter zero)	L		0 0				0 0)
8. Total Taxable Earned Income and Net Profit (Add Lines 4 and 7)			0 0				0 0)
			0 0				0 0	ī
9. Total Tax Liability (Line 8 multiplied by rate from local EIT tax chart)	∟							_
10. Total Local Earned Income Tax Withheld as Reported on W-2(s)	L		0 0				0 0)
11. Quarterly Estimated Payments/Credits From Previous Tax Year			0 0				0 0)
			0 0				0 0	ī
12. Miscellaneous Tax Credits (Enclose documentation)*	··							_
13. TOTAL PAYMENTS AND CREDITS (Add lines 10 through 12)	L		0 0	L ,			0 0	
14. REFUND If \$2.00 or more, enter amount (Or select option in 15)			0 0				0 0)
	٦Ē		0 0				0 0	ī
15. Credit Taxpayer/Spouse (Amount of line 14 you want to transfer)			UU		<u> </u>		[0]0	
Credit to next year Credit to spouse 16. EARNED INCOME TAX BALANCE DUE (Line 9 minus line 13)			0 0				0 0	ı
If \$2.00 or more, enter amount MAKE CHECK PAYABLE TO YATB								ī
17. Penalty after April 15* (Multiply line 16 by % rate per instructions)	<u> </u>							_
18. Interest after April 15* (Multiply line 16 by % rate per instructions)	L							
19. TOTAL PAYMENT DUE (Add lines 16, 17 and 18)	[٦

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.



