



# Keystone Collections Group

546 Wendel Road  
Irwin, PA 15642  
(724) 978-0300



## 2010 Earned Income Tax Return

RESIDENT OF MUNICIPALITY: \_\_\_\_\_

- \* RETURN MUST BE FILED ON THIS FORM. No substitutions accepted.
- \* THIS IS NOT A JOINT RETURN. You must enter information for each individual in correct column.

***e-file at [www.keystonecollects.com](http://www.keystonecollects.com)***

Name  
Address  
City  
State &  
Zip

Check here if PART-YEAR RESIDENT  
Complete ITR-1 Schedule on reverse side  
of this form and enclose copies of other  
municipal returns.

**DUE DATE: 04/18/2011**

INDIVIDUAL Tax Return. DO NOT combine spousal incomes.

**DO NOT STAPLE ANY ITEMS TO THIS RETURN  
DO NOT USE RED INK.**

Provide Home Phone  -  -

Note all corrections/additions to SSN, name or address  
and check box here.

FILER NAME:		SPOUSE NAME:		
(Last, First)		(Last, First)		
Social Security # - Filer		Social Security # - Spouse		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
1. Gross State Earnings as Reported on W-2/1099. Enclose copies with this form ....	<input type="text"/>	00	<input type="text"/>	00
2. Allowable Employee Business Expenses. (Submit Pennsylvania Forms UE-1 or UE-2 .....	<input type="text"/>	00	<input type="text"/>	00
3. Taxable W-2/1099 Earnings (Line 1 minus line 2) .....	<input type="text"/>	00	<input type="text"/>	00
4. Net Profits from Business, Profession or Farm (Submit PA Schedule C, F, RK-1 or 20-S) .....	<input type="text"/>	00	<input type="text"/>	00
Non Taxable S-Corp Earnings (check box) <input type="checkbox"/>	<input type="text"/>	00	<input type="text"/>	00
5. Net Loss from Business, Profession or Farm (Submit PA Schedule C, F, RK-1 or 20-S) .....	<input type="text"/>	00	<input type="text"/>	00
Non Deductible S-Corp Losses (check box) <input type="checkbox"/>	<input type="text"/>	00	<input type="text"/>	00
6. Subtotal (Line 4 minus line 5) IF LESS THAN ZERO, ENTER ZERO .....	<input type="text"/>	00	<input type="text"/>	00
7. Total Earned Income and Net Profits (Line 3 plus line 6) .....	<input type="text"/>	00	<input type="text"/>	00
8. Tax Liability: Line 7 multiplied by tax rate of (Tax Rate) .....	<input type="text"/>	00	<input type="text"/>	00
9. Earned Income Tax Withheld by Employer (Per W-2) .....	<input type="text"/>	00	<input type="text"/>	00
10. Estimated Payments or Credits Applied (Direct payment made by you and/or credits from prior year) .....	<input type="text"/>	00	<input type="text"/>	00
11. Miscellaneous Credits Philadelphia Credit (check box) <input type="checkbox"/> (see instructions) Out of State Credit (check box) <input type="checkbox"/>	<input type="text"/>	00	<input type="text"/>	00
12. Total of 9 + 10 + 11 .....	<input type="text"/>	00	<input type="text"/>	00
13. REFUND/CREDIT (Line 12 minus line 8) IF \$1.00 OR MORE, enter amount & check box below. INCLUDE PA-40 INFO...SEE INSTRUCTIONS <input type="checkbox"/> Apply to spouse <input type="checkbox"/> Apply to next year <input type="checkbox"/> Refund	<input type="text"/>	00	<input type="text"/>	00
14. TAX DUE (Line 8 minus line 12) OMIT IF LESS THAN \$1.00 .....	<input type="text"/>	00	<input type="text"/>	00
15. Interest & Penalty .....	<input type="text"/>	00	<input type="text"/>	00
16. TOTAL AMOUNT DUE (Line 14 + 15) Enter on line 16 and 17 .....	<input type="text"/>	00	<input type="text"/>	00

YOUR SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SPOUSE'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

▲ WRITE EACH ACCOUNT TOTAL ON LINES 16 & 17 ▲

For Office Use ONLY:  NPA  NW<sub>2</sub>  ND  CK \_\_\_\_\_





Part-Year Resident Schedule

Use this schedule if you moved into a new taxing jurisdiction during the tax year.

Report on Line 1 of the return all earned income and net profits reportable to the taxing jurisdiction for which you are preparing the return.

Current Residence (street address) (Municipality, State, ZIP) # months at this residence

Employer

Local Income \$ / 12 months X (months at this residence) =

Withholding \$ / 12 months X (months at this residence) =

Employer

Local Income \$ / 12 months X (months at this residence) =

Withholding \$ / 12 months X (months at this residence) =

Current Residence Total Income Total Withholding

Previous Residence (street address) (Municipality, State, ZIP) # months at this residence

Employer

Local Income \$ / 12 months X (months at this residence) =

Withholding \$ / 12 months X (months at this residence) =

Employer

Local Income \$ / 12 months X (months at this residence) =

Withholding \$ / 12 months X (months at this residence) =

Previous Residence Total Income Total Withholding