PGH-40 2004

CFD

CITY AND SCHOOL DISTRICT OF PITTSBURGH

Individual Earned Income for Calendar

Year and/or Fiscal Year Ended ____

Rev 09/04 For Offical Use Only YOU MUST ENTER YOUR SOCIAL SECURITY NUMBER(S)

() Check if Amended Return () Check if form is no lon	ger needed YOU MUST ENTER YOU	R SOCIAL S	SECURITY NUMBER(S)		
ACCT #	Social Security #	Spouse'	Spouse's Social Security #		
	Last Name	First Nar	First Name Spouse's First Name		
	Spouse's Last Name	Spouse's			
	Address	City	State Zip Code		
Occupation Spouse's Occupation SIGNATURE & PHONE OF PREPARER-Other than taxpayer, based on all information of which PREPARER has knowledge.					
FILING () Single () Married filing Jointly – Both must sign () Married filing Separately () Deceased – Date of Death STATUS CHECK ONE - Date of Death - Date of Death					
RESIDENCY () 1-Resident () 2-Mt. Oliver Resident () 3-Non-Resident of PA () 4-Part Year Resident of PGH () 5-Non-Resident of PGH STATUS Full Year Complete WTEX on back Include VISA or Out of Complete WTEX on back Complete WTEX on back See page -4- CHECK ONE State Return //to/ Municipality					
 EARNINGS - Gross wages, tips, salaries, commissions, etc. Attach photocopy of W-2 forms, 1099 forms, etc. 	Enclose Photo Copy of W-2(s)	1	•		
2. LESS UNREIMBURSED EMPLOYEE BUSINESS EXPENSES Must include copies of PENNSYLVANIA SCHEDULE UE and specify occupation above.			•		
3. TAXABLE EARNINGS Line 1 minus Line 2			•		
4. NET PROFIT - From business, profession, rental business, partnerships, etc. Include copies of Schedules C, 1065, K-1. Instructions page -8-			•		
5. TOTAL GROSS COMPENSATION/NET PROFIT Line 3 plus Line 4	If a negative number, enter 0	5	•		
 TAX – Multiply Line 5 by the tax rate; DO NOT ROUND TO THE NEAREST DOLLAR City Resident 3.0% (0.03) – Mt. Oliver Resident 2.0% (0.02) – Non-Resident of PA 1% (0.01) 			•		
7. TOTAL LOCAL TAX WITHHELD PER W-2(s) Enclose Photo Copy of W-2(s)			•		
8. TOTAL ESTIMATED TAX PAYMENTS ON NP-5 UNDER S.S.#			•		
9. TOTAL PAYMENTS ON WT-4 UNDER S.S.#		9	•		
10. OTHER CREDITS Include Schedule – See page –9-			•		
11. TOTAL TAX CREDITS Add Lines 7, 8, 9 and 10			•		
12. IF LINE 11 IS MORE THAN LINE 6			•		
13. IF LINE 6 IS MORE THAN LINE 11			•		
14. PENALTY AND INTEREST If filed after APRIL 15, 2005, 1% per month of LINE 13 – see page –9-			•		
15. TOTAL Add Line 13 and Line 14			•		
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements. To the best of my knowledge and belief it is true, correct, and complete.

DATE

WTEX – COMF			_				
2-Mt. Oliver Resident 4-Part Year Resident (if THIS FORM IS NOT COMPLETE UN	· ·	,		•			
THIS FORM IS NOT COMPLETE ON	TIL SIGNED	DITOURL		AA COLLECTOR			
USE BLACK INK ONLY USE BLACK INK ONLY NON-RESIDENT EXEMPTION FROM CITY OF PITTSBURGH AND/OR SCHOOL DISTRICT EARNED INCOME TAX							
Taxpayer Name	Social Securi	ty #	Dayti	me Phone			
Current Address	City		State	Zip			
I was a resident of (Borough or Township)			fc	or all or part of year 2004.			
I lived in the above municipality from//	/	to	/	/			
As a resident of this municipality I earned \$	and I	owe/paid \$		in earned income tax.			
Therefore I was not liable for City of Pittsburgh and/or School District of Pittsburgh Earned Income Tax.							
MUST BE VERIFIED AND SIGNED BY YOUR LOCAL TAX COLLECTOR FROM A PENNSYLVANIA MUNICIPALITY I certify that the person above was registered as a taxpayer in my jurisdiction for the tax year 2004 and owes or has paid the Earned Income Tax to his/her place of residence for the amount stated above.							
Tax Collector's Signature	Date	Phone	S	EAL			
GUIDELINES FOR COMPLETING LINE 2 – Include Pennsylvania Schedule UE							

The guidelines under Act 166 of 2002 which took effect in 2003 follows the State of PA for allowable employee expenses. Pittsburgh therefore allows a deduction of "allowable employee business expenses" for which the taxpayer was not reimbursed. In order to be claimed as an expense, the items must be ordinary, necessary, reasonable and actually incurred in performing the duties of the job and directly related to present employment. The PA Schedule UE covers these expenses; one must be attached to claim allowable employee business expenses.

LINE 2 – DEDUCTIONS FOR UNREIMBURSED EMPLOYEE BUSINESS EXPENSES ARE PERMITTED AS FOLLOWS: business related auto expenses; union dues; professional license fees; small tools required for employment; and uniforms or work clothing <u>not suitable</u> for everyday use. Employee business expenses will not be processed as a deduction without documentation. Attach PA Schedule UE or Federal Form 2106. Contributions to deferred income plans such as IRA's, 401K's, and Keoghs cannot be deducted from taxable income. PERSONAL EXPENSES ARE NOT DEDUCTIBLE.

Unreimbursed transportation and employee business expenses, while away from home overnight (lodging, food, etc.), incurred as a condition of employment **and required by the employer** are allowed as a deduction from gross income when computing the tax.

Non-Residents of Pennsylvania, who work in the City of Pittsburgh, may deduct only those expenses directly related to the performance of their job in Pittsburgh.

Specify your occupation and briefly describe the circumstances in which expenses were incurred: _

REFUND REQUESTED CREDIT REQUESTED NO TAX DUE – NO REFUND TREASURER CITY OF PITTSBURGH TREASURER CITY OF PITTSBURGH TREASURER CITY OF PITTSBURGH 414 GRANT ST 414 GRANT ST PO BOX 2701 **PITTSBURGH PA 15219-2476 PITTSBURGH PA 15219-2476 PITTSBURGH PA 15230-2701** TAX DUE WITH PARTIAL OR NO PAYMENT TAX DUE WITH FULL PAYMENT TREASURER CITY OF PITTSBURGH TREASURER CITY OF PITTSBURGH PO BOX 642583 414 GRANT ST **PITTSBURGH PA 15264-2583 PITTSBURGH PA 15219-2476**

IF ALL APPLICABLE INFORMATION IS NOT PROVIDED, YOUR PGH-40 WILL BE RETURNED SEND COMPLETED TAX RETURN TO