

EMPLOYER'S NAME	TAXPAYER		SPOUSE	
	GROSS EARNED INCOME	TAX WITHHELD	GROSS EARNED INCOME	TAX WITHHELD
1				
2				
3				
4				
5				
6				
TOTAL (ENTER ON LINE 1)				

ENCLOSE A W-2 FORM FOR EACH EMPLOYER

**OTHER TAXABLE INCOME
NET EFFECT OF PROFITS (LOSSES) FROM BUSINESS, PROFESSION, FARM**

DESCRIPTION	TAXPAYER	SPOUSE
SCHEDULE C		
SCHEDULE C		
SCHEDULE C		
SCHEDULE F		
SCHEDULE F		
SCHEDULE F		
MISC EARNED INCOME (FORM 1065 PARTNERSHIP (K-1))		
MISC EARNED INCOME (PATENTS, FEES, HONORARIA, ETC)		
Two-income couples may each file separately on this form. However tax calculations must be entered in separate columns.		
Taxpayers must provide verification of earned income/expense items as indicated below with this return.		
TOTAL (ENTER ON LINE 4, ENCLOSE ALL SCHEDULES & DOCUMENTATION)		

Totals cannot be combined

Total Taxpayer

Total Spouse

Taxpayer's Total Schedule Income cannot be netted against Spouse's Total Schedule Income.

If Total Schedule Income is equal to or greater than zero, enter that amount on line 4 on the front of the return.

If Total Schedule Income is negative, enter zero on line 4 on the front of the return.

**College Township and The State College Area School District
Taxpayers Bill of Rights Notice**

You are entitled to receive a written explanation of your rights with regard to the assessment, audit, appeal, enforcement, refund, and collection of certain municipal/school taxes. The written explanation is entitled *Taxpayers Bill of Rights Disclosure Statement*. Upon receiving a request from you, the tax office will give you a copy of the Disclosure Statement at no charge. You may request a copy in person, or by mailing a request to the address indicated on the front of the return.