



Tax Collector
100 The Mall at Steamtown, Unit 216
Scranton, PA 18503

SCRANTON EARNED INCOME TAX RETURN
CITY OF SCRANTON & SCRANTON SCHOOL DISTRICT

Customer #:

FOR
TAX YEAR: _____

EARNED INCOME RETURN

SINGLE TAX OFFICE
(570) 963-6756, Ext. 3
Office Hours: 8:30 – 5:00

REMIT TO:
COLLECTOR OF TAXES
INCOME TAX DIVISION
100 THE MALL AT STEAMTOWN
UNIT 216
SCRANTON, PA 18503

Joint Filing (i.e. combining income, etc.) is NOT PERMITTED.

Name or Address Changes

NAME: _____

ADDRESS: _____

RESIDENCY STATUS: *Check only one box.*

R ☐ Resident NR ☐ Non-Resident P ☐ Part Year Resident
(must attach legal proof)

FROM: ____/____/____ TO: ____/____/____

Social Security #

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1. Gross Earning reported on attached W-2(s) – Box 18 (No Rounding of Numbers)
2. Allowable Non-reimbursed Employee Business expenses (Attach forms)
3. Taxable W-2 earnings **(line 1 less line 2)**
4. Other Income Attach 1099-MISC (if not reported elsewhere), 1099-R Excluding codes 3, 4 and 7
5. Sub Total **(add lines 3 and 4)**
6. Net Profits Attach Federal Schedule C, F, E non-passive or K-1
7. Total Earned Income subject to this tax **(add lines 5 and 6)**
8. Tax Liability **3.4%**
9. Payments to date (On Declaration or Quarterly Payment)
10. Earned Income Tax Withheld **(Per W-2 - Box 19) copy must be attached**
11. Credit from last year
12. Other Credits ☐ Miscellaneous ☐ KOZ ☐ Employed In Other State (see back)
13. Total of Lines 9 + 10 + 11 + 12
14. If credits (line 13) are larger than Tax (line 8) **OVERPAYMENT**
NO REFUND OR CREDITS UNDER \$1.00 ☐ credit to next year ☐ refund
15. If Tax (line 8) is larger than credits (line 13) **TAX DUE** ☐ check attached ☐ paid on-line w/ credit card
16. Interest and penalty at 1% per month if filed after April 16
17. **Total amount due** Check Payable to: **Collector of Taxes**, or
On-Line at our website: **www.scrantontaxoffice.org**
(if paying on-line, you are still required to submit this form with attachments)

Refunds cannot be used against a balance due.

DATE: _____

DATE: _____

TAXPAYER SIGNATURE, I DECLARE UNDER PENALTIES PROVIDED
FOR BY LAW THAT I HAVE EXAMINED THIS COMPLETE RETURN
AND IT IS TRUE AND CORRECT. **TAX RETURN MUST BE SIGNED.**

SIGNATURE OF PREPARER, IF OTHER THAN TAXPAYER.

Personal audit may be required if all W-2's and Federal/State Schedules are not enclosed.