

MOVE INFORMATION: The earned income tax is based on your residence or domicile. If you and/or your spouse have moved during the tax year, please complete the move information below. If you need additional space, please use a copy or attach a separate page. Prorate income and tax withheld by the number of months in each municipality using the employer/source of income information below.

If you and/or your spouse have moved from one CCTB member municipality to another CCTB member municipality during the tax year, you do not need to file a second earned income tax return as long as the move information is provided below. Prorate earned income and tax withheld by the number of months in each municipality using the work sheet below.

PLEASE NOTE: If you have moved from a non-member municipality/school district or moved to a non-member municipality/school district during the year, **you are required to file earned income tax returns with the Cumberland County Tax Bureau and with the tax collector for the non-member municipality/school district. Please provide a copy of the non-member municipality/school district earned income tax return along with the CCTB earned income tax return.**

TAXPAYER A

Street Address (NO P.O. Boxes)	City/State/Zip	Municipality	Resided From (MMDDYYYY)	Resided To (MMDDYYYY)	# Of Months Resided

EMPLOYER/SOURCE OF INCOME INFORMATION

Employer Name and Address	State/Local Wages (W2 Box 16/18)	Local Tax Withheld (W2 Box 19)	Employed From (MMDDYYYY)	Employed To (MMDDYYYY)	# Of Months Employed	Prorated Earnings	Prorated Tax

TAXPAYER B

Street Address (NO P.O. Boxes)	City/State/Zip	Municipality	Resided From (MMDDYYYY)	Resided To (MMDDYYYY)	# Of Months Resided

EMPLOYER/SOURCE OF INCOME INFORMATION

Employer Name and Address	State/Local Wages (W2 Box 16/18)	Local Tax Withheld (W2 Box 19)	Employed From (MMDDYYYY)	Employed To (MMDDYYYY)	# Of Months Employed	Prorated Earnings	Prorated Tax

NON RECIPROCAL STATE/PHILADELPHIA CREDIT WORKSHEET: Actual income taxed by other state (income for which liability was calculated) as shown on other state's return or for Philadelphia credit as shown on W2 or as reported to the City of Philadelphia. Do not use business privilege tax. Please note this credit cannot exceed your earned income tax liability on the income taxed by the other state. **REQUIRED:** You must attach copies of other state's non-resident tax return along with a PA 40 and PA Schedule G or your out of state credit will be denied.

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| (1) Actual earned Income | _____ |
| (2) Local Tax Rate as specified on front of tax return | X _____ % |
| (3) Local Tax Liability | _____ |
| (4) Tax liability paid to other state Or Philadelphia (Philadelphia Credit: Lesser amount should be entered on line 12) | _____ |
| (5) PA Income Tax (Line 1 X PA Income Tax Rate 3.07%) | _____ |
| (6) Local Tax Credit (Line 4 minus Line 5) If Line 5 is more than Line 4 enter ZERO (0) | _____ |
| (7) Enter lesser amount from Line 3 or 6 | _____ |
| (8) Enter amount on Line 12 of tax return | _____ |