GREENSBURG CAMPUS ONLY (Hempfield Township)

Tax law requires that \$52 be withheld for the Local Services Tax (LST) in **equal amounts from each pay during the calendar year**. This affects University of Pittsburgh employees as follows:

Paid Monthly - - \$4.33/pay Paid BiWeekly - - \$2.00/pay

You may qualify for an exemption for any of the following reasons:

- 1. Multiple Employers
- 2. Expected total earned income and net profits from all sources within Hempfield Township will be less than \$12,000
- 3. Active Duty Military Exemption
- 4. Military Disability Exemption

To claim exemption from the LST for calendar year 2016, you must complete an exemption certificate. A link to the LST Exemption Form on the Keystone Collections Group website can be found by visiting the Payroll Forms page @ http://www.bc.pitt.edu/payroll/forms.html

Please be aware that these exemption certificates "expire" at the end of each year. Therefore, if you submitted an exemption certificate for 2015 and meet the criteria again for 2016, you must complete another form.

Submit one copy of the exemption certificate with the required supporting documentation to the Payroll Office. Submit a second copy to:

Keystone Collections Group 546 Wendel Road Irwin, PA 15642

Claims for exemption received after the 15th of the month for monthly employees or after the pay period ending date for biweekly employees, may not be applied until the following pay.

Additional information is available on the website: <u>http://www.keystonecollects.com/</u>

Updated 12/22/2014

LOCAL SERVICES TAX – EXEMPTION CERTIFICATE

Tax Year

APPLICATION FOR EXEMPTION FROM LOCAL SERVICES TAX

- A copy of this application for exemption from the Local Services Tax (LST), and all necessary supporting documents, must be completed and presented to your employer AND to the political subdivision levying the Local Services Tax where you are principally employed.
- > This application for exemption from the Local Services Tax must be signed and dated.
- > No exemption will be approved until proper documentation has been received.

Name:	Soc Sec #:
Address:	Phone #:
City/State:	Zip:

REASON FOR EXEMPTION

1	MULTIPLE EMPLOYERS: Attach a copy of a current pay statement from your principal employer that shows the name of the employer, the length of the payroll period and the amount of Local Services Tax withheld. List all employers on the reverse side of this form. You must notify your other employers of a change in principal place of employment within two weeks of the change.
2	EXPECTED TOTAL EARNED INCOME AND NET PROFITS FROM ALL SOURCES WITHIN (municipality or school district) WILL BE LESS THAN \$: Attach copies of your last pay statements or your W-2 for the year prior.
	If you are self-employed, please attach a copy of your PA Schedule C, F, or RK-1 for the prior year.
3	ACTIVE DUTY MILITARY EXEMPTION: Please attach a copy of your orders directing you to active duty status. Annual training is not eligible for exemption. You are required to advise the tax office when you are discharged from active duty status.
4	MILITARY DISABILITY EXEMPTION: Please attach copy of your discharge orders and a statement from the United States Veterans Administrator documenting your disability. Only 100% permanent disabilities are recognized for this exemption.

EMPLOYER: Once you receive this Exemption Certificate, you shall not withhold the Local Services Tax for the portion of the calendar year for which this certificate applies, unless you are otherwise notified or instructed by the tax collector to withhold the tax.

Tax Office:	
Address:	Phone #:
City/State:	Zip:

IMPORTANT NOTE TO EMPLOYERS

- 1. The municipality is required by law to exempt from the LST employees whose earned income from all sources (employers and self-employment) in their municipality is less than \$12,000 when the levied rate exceeds \$10.00.
- 2. The school district for the municipality in which your worksite(s) is located may or may not levy an LST. If it does, the income exemption provided <u>may differ</u> from the municipality and can be anywhere from \$0 to \$11,999.
- 3. Contact the tax office where your business worksites are located to obtain this information.

Employment Information: List all places of employment for the applicable tax year. Please list your PRIMARY EMPLOYER under #1 below and your secondary employers under the other columns. If self employed, write SELF under Employer Name column.

	1. PRIMARY EMPLOYER	2.	3.
Employer Name			
Address			
Address 2			
City, State Zip			
Municipality			
Phone			
Start Date			
End Date			
Status (FT or PT)			
Gross Earnings			

4.	5.	6.
Employer Name		
Address		
Address 2		
City, State Zip		
Municipality		
Phone		
Start Date		
End Date		
Status (FT or PT)		
Gross Earnings		

PLEASE NOTE:

All information received by the Tax Collector is considered to be CONFIDENTIAL and is only used for official purposes relating to the collection, administration and enforcement of the LOCAL SERVICES TAX.

I DECLARE UNDER PENALTY OF LAW THAT THE INFORMATION STATED ON AND **ATTACHED TO THIS FORM IS TRUE AND CORRECT:**

SIGNATURE: DATE:

LST Exemption 10-07