

# Cumberland County Tax Bureau

21 Waterford Drive  
Suite 201  
Mechanicsburg, PA 17050  
Tele (717) 590-7997  
Fax (717) 590-7998  
[www.cumberlandtax.org](http://www.cumberlandtax.org)

## 2015

Employer's EIT and LST  
Report Form Booklet



# Employer Packet Instructions

Act 32 of 2008 changes the way Earned Income Tax (EIT) is collected and administered in the Commonwealth of Pennsylvania. Beginning January 1, 2012, the Cumberland County Tax Bureau (formerly the West Shore Tax Bureau) became the EIT collector for all of Cumberland County, two municipalities in Franklin County (Orrstown Borough and Southampton Township in the Shippensburg Area School District) and four municipalities in northern York County (Fairview Township, Goldsboro Borough, Newberry Township and Lewisberry Borough, in the West Shore School District). Our office address is 21 Waterford Drive, Suite 201, Mechanicsburg, PA 17050 and is located off the Carlisle Pike shortly after the Cumberland Valley High School Football Field.

Act 32 impacted employers and self-employed individuals who are located or reside in the jurisdictions listed above.

- **Self-employed** individuals began filing their estimated quarterly tax payments with us on 1/2/2012.

- **Employers** with twenty (20) employees or more are required to file electronically through our online reporting system.

Access to the system is available by registering at [www.cumberlandtax.org](http://www.cumberlandtax.org). Please allow 24-48 hours for full access to the online system.

- Employers need to have all employees fill out a Certificate of Residency form that indicates the physical address of their home and work locations. This needs to be updated every time an employee moves and for all employees at the beginning of each year. The employer is to retain this form for their files. The PSD codes for the resident and work location are used to determine the amount of tax to be withheld. Those can be researched at [www.newpa.com/node/6710](http://www.newpa.com/node/6710). Certificate of Residency forms are not to be sent to CCTB.

- Employers are required to withhold at the higher of either the employee resident tax rate or the non-resident tax rate of the work location.

- Employers located in the Cumberland County Tax Bureau's jurisdiction, must file EIT with the Cumberland County Tax Bureau.

- Local Services Tax (LST) is not part of Act 32. **Employers still need to remit the LST to the tax collector for the work location where the LST applies.**

- Additional employer information may be obtained by calling (717) 590-7997 or emailing [employerservices@cumberlandtax.org](mailto:employerservices@cumberlandtax.org).

- Our Earned Income and Net Profits Tax Regulations and other governing documents may be found on our website for your review.

## ***This packet contains:***

### ~ Earned Income Tax Reports for **Employers:**

(1) Mailing labels for the quarterly employer returns;

(2) Quarterly returns for each quarter in 2015 are due:

1st quarter due April 30 / 2nd quarter due July 31 / 3rd quarter due October 31 / 4th quarter due January 31, 2016

a. The back page of the quarterly return may be photocopied for listing additional employees. Please remember, employers with twenty (20) or more employees are required to file online through RBA. Information on RBA is available by calling (717) 590-7997 or emailing [itservices@cumberlandtax.org](mailto:itservices@cumberlandtax.org)

b. Please remember to include the work location PSD as well as the resident PSD in the sections noted on the quarterly return.

c. Checks should be made payable to Cumberland County Tax Bureau EIT.

### ~ Local Services Tax for **Employers:**

(1) Mailing labels for the quarterly employer returns;

(2) Quarterly returns for each quarter in 2015 are due:

1st quarter due April 30 / 2nd quarter due July 31 / 3rd quarter due October 31 / 4th quarter due January 31, 2016

a. The detail listing page for quarterly filings may be photocopied for additional employees. Please remember, employers with twenty (20) or more employees are required to file online through RBA. Information on RBA is available by calling (717) 590-7997 or emailing [itservices@cumberlandtax.org](mailto:itservices@cumberlandtax.org)

b. Checks should be made payable to Cumberland County Tax Bureau LST.

### ~ W2-R Annual Reconciliation for **Employers:**

Instructions for this form are printed on the bottom of the page with a due date of the last day in February 2016.

### ~ Business Information Correction Form for **Employers:**

For any changes to your business information.

### ~ LST Annual Reconciliation for **Employers**

**Payment received without detail/detail received without payment DOES NOT constitute a complete filing per Act 32 of 2008.**



**EARNED INCOME TAX QUARTERLY COUPON**

**1st Quarter 2015 - Due April 30, 2015**

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2015 / 1	

1. Total Earned Income Tax (EIT) withheld. ....	\$	
2. Penalty - add 1% per month tax remains unpaid. ....	\$	
3. Interest - .000082 x # of days tax remains unpaid. ....	\$	
<b>4. Total amount to be remitted with this return. (add lines 1, 2, 3) .....</b>	\$	

I DECLARE UNDER PENALTIES PROVIDED BY LAW THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE IS A TRUE, CORRECT AND COMPLETE RETURN.

Mail to:  
**CCTB Employer Accounts-EIT**  
 21 Waterford Drive, Suite 201  
 Mechanicsburg, PA 17050  
 (717) 590-7997

Make checks or money orders  
 payable to:  
**"CCTB EIT"**

X \_\_\_\_\_  
 Signature Contact Phone

**EARNED INCOME TAX QUARTERLY COUPON**

**2nd Quarter 2015 - Due July 31, 2015**

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2015 / 2	

1. Total Earned Income Tax (EIT) withheld. ....	\$	
2. Penalty - add 1% per month tax remains unpaid. ....	\$	
3. Interest - .000082 x # of days tax remains unpaid. ....	\$	
<b>4. Total amount to be remitted with this return. (add lines 1, 2, 3) .....</b>	\$	

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X \_\_\_\_\_  
 Signature Contact Phone

**EARNED INCOME TAX QUARTERLY COUPON**

**3rd Quarter 2015 - Due October 31, 2015**

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2015/ 3	

1. Total Earned Income Tax (EIT) withheld. ....	\$	
2. Penalty - add 1% per month tax remains unpaid. ....	\$	
3. Interest - .000082 x # of days tax remains unpaid. ....	\$	
<b>4. Total amount to be remitted with this return. (add lines 1, 2, 3) .....</b>	\$	

I DECLARE UNDER PENALTIES PROVIDED BY LAW THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE IS A TRUE, CORRECT AND COMPLETE RETURN.

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X \_\_\_\_\_  
 Signature Contact Phone

**EARNED INCOME TAX QUARTERLY COUPON**

**4th Quarter 2015 - Due January 31, 2016**

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2015 / 4	

1. Total Earned Income Tax (EIT) withheld. ....	\$	
2. Penalty - add 1% per month tax remains unpaid. ....	\$	
3. Interest - .000082 x # of days tax remains unpaid. ....	\$	
<b>4. Total amount to be remitted with this return. (add lines 1, 2, 3) .....</b>	\$	

I DECLARE UNDER PENALTIES PROVIDED BY LAW THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE IS A TRUE, CORRECT AND COMPLETE RETURN.

Mail to:  
**CCTB Employer Accounts-EIT**  
 21 Waterford Drive, Suite 201  
 Mechanicsburg, PA 17050  
 (717) 590-7997

Make checks or money orders  
 payable to:  
**"CCTB EIT"**

X \_\_\_\_\_  
 Signature Contact Phone



# Cumberland County Tax Bureau

## EMPLOYER QUARTERLY RETURN

### Local Earned Income Tax Withholding

*You are entitled to receive a written explanation of your rights with regard to the audit, appeal, enforcement, refund and collection of local taxes by contacting your Tax Officer.*

EMPLOYER BUSINESS NAME (Use Federal ID Name)																							
EMPLOYER PHYSICAL LOCATION IN CUMBERLAND COUNTY - FULL STREET ADDRESS (PO Box, RD or RR ARE <u>NOT ACCEPTABLE</u> )																							
SECOND LINE OF ADDRESS (MAILING)																							
CITY OR POST OFFICE		STATE	ZIP																				
MUNICIPAL TAXING AUTHORITY (City, Borough, Township) IN WHICH FACILITY OR BUSINESS IS LOCATED		<i>(Attach listing of multiple locations within PA, if applicable)</i> <i>(This list must contain full physical address locations)</i>																					
COUNTY	BUSINESS PHONE NUMBER	BUSINESS FAX NUMBER																					
EMPLOYER PSD CODE	FEDERAL EIN OR SOCIAL SECURITY #	EMPLOYER ACCOUNT NUMBER	YEAR AND QUARTER																				
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td> </tr> </table>											<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td><td style="width: 25px;"> </td> </tr> </table>												

1. Total Earned Income Tax Withheld.....	\$	
2. Credit or Adjustment (attach explanation) .....	\$	
3. Adjusted Total of Earned Income Tax.....	\$	
4. Penalty: 1% per month after due date.....	\$	
5. Interest: .000082 x # days tax remains unpaid...	\$	
6. Total Amount of Tax Due.....	\$	
7. Total Payments Made this Quarter (Schedule B)	\$	
<b>8. Balance Due with Return (item 6 minus 7).....</b>	<b>\$</b>	

9. Date Period Ended (MM/DD/YYYY).....	
10. Total Pages of This Return .....	
11. Total Number of Employees Listed .....	
If there has been a change of ownership or other transfer of business during the quarter, attach explanation and give name of present owner and date the change took place. <input type="checkbox"/> CHANGE <input type="checkbox"/> NO CHANGE	
Do you expect to pay taxable wages next quarter? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Under penalties of perjury, I (we) declare that I (we) have examined this information, including all accompanying schedules and statements and to the best of my (our) belief, they are true, correct and complete.

PRIMARY CONTACT INDIVIDUAL (First Name, Last Name)	
TITLE	
PRIMARY CONTACT PHONE NUMBER	PRIMARY CONTACT EMAIL ADDRESS
SIGNATURE OF PRIMARY CONTACT INDIVIDUAL	DATE (MM/DD/YYYY)

(11) EMPLOYEE'S SOCIAL SECURITY NUMBER	(12) EMPLOYEE'S NAME/ADDRESS (PO Box, RD or RR ARE <u>NOT ACCEPTABLE</u> )	(13) GROSS COMPENSATION PAID THIS QUARTER	(14) AMOUNT OF EIT WITHHELD THIS QUARTER	(15) RESIDENT PSD CODE																				
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<b>(16) FIRST PAGE TOTAL.....</b>		<b>\$</b>	<b>\$</b>																					

Make Checks payable to: **C.C.T.B. EIT**  
 There will be a **\$20.00** fee for returned payments & checks.

TOTAL Amount Remitted..... \$

# EMPLOYER QUARTERLY RETURN for Local Earned Income Tax Withholding

Employer Business Location: \_\_\_\_\_ Year and Quarter: \_\_\_\_\_

(11) EMPLOYEE'S SOCIAL SECURITY NUMBER	(12) EMPLOYEE'S NAME/ADDRESS (PO Box, RD or RR ARE <b>NOT ACCEPTABLE</b> )	(13) GROSS COMPENSATION PAID THIS QUARTER	(14) AMOUNT OF EIT WITHHELD THIS QUARTER	(15) RESIDENT PSD CODE
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<input type="text"/>		\$	\$	<input type="text"/>
<b>(16) THIS PAGE TOTAL .....</b>		\$	\$	



## Local Services Tax (LST) Information

Local Services Tax (LST) is assessed on each employed individual by the political subdivision of the individual's place of employment. The maximum amount of tax is \$52.00 annually.

**Employers** are required to remit the Local Services Tax withheld from their employees thirty (30) days after the end of each quarter of a calendar year. The Local Services Tax shall be no more than \$52.00 on each person for each calendar year, irrespective of the number of political subdivisions within which a person may be employed.

**Employers** with twenty (20) employees or more are required to file online through RBA. Access to the system is available by calling (717) 590-7997 or emailing [itservices@cumberlandtax.org](mailto:itservices@cumberlandtax.org).

Please see detailed instructions at [www.cumberlandtax.org](http://www.cumberlandtax.org) on the Local Services Tax including employee exemptions and refunds, if applicable.

### MEMBER TAX RATES 2015

SCHOOL DISTRICT	MUNICIPALITY	EARNED INCOME TAX PSD CODES	RESIDENT TWP	RESIDENT SCH DIST	TOTALS	NON-RESIDENT MUNICIPAL RATE	LOCAL SERVICES TAX	SCHOOL DISTRICT	TOTAL
Cumberland Valley SD	HAMPDEN TOWNSHIP	210401	0.50%	1.10%	1.60%	1.00%	\$47.00	\$5.00	\$52.00
	MIDDLESEX TOWNSHIP	210402	0.50%	1.10%	1.60%	1.00%	\$47.00	\$5.00	\$52.00
	MONROE TOWNSHIP	210403	0.50%	1.10%	1.60%	1.00%	\$47.00	\$5.00	\$52.00
	SILVER SPRING TOWNSHIP	210404	0.60%	1.10%	1.70%	1.00%	\$47.00	\$5.00	\$52.00
East Pennsboro SD	EAST PENNSBORO TOWNSHIP	210501	0.50%	1.10%	1.60%	1.00%	\$47.00	\$5.00	\$52.00
Mechanicsburg SD	MECHANICSBURG BOROUGH	210601	0.50%	1.20%	1.70%	1.00%	\$47.00	\$5.00	\$52.00
	SHIREMANSTOWN BOROUGH	210602	0.50%	1.20%	1.70%	1.00%	\$47.00	\$5.00	\$52.00
	UPPER ALLEN TOWNSHIP	210603	0.50%	1.20%	1.70%	1.00%	\$47.00	\$5.00	\$52.00
	SHIREMANSTOWN ANNEX	210699	0.60%	1.20%	1.80%	1.00%	\$52.00	\$0.00	\$52.00
South Middleton SD	SOUTH MIDDLETON TOWNSHIP	210801	0.50%	1.10%	1.60%	0.50%	\$0.00	\$10.00	\$10.00
Carlisle Area SD	CARLISLE BOROUGH	210301	0.50%	1.10%	1.60%	1.00%	\$52.00	\$0.00	\$52.00
	DICKINSON TOWNSHIP	210302	0.50%	1.10%	1.60%	1.00%	\$0.00	\$0.00	\$0.00
	MT HOLLY SPRINGS BOROUGH	210303	0.50%	1.10%	1.60%	1.00%	\$52.00	\$0.00	\$52.00
	NORTH MIDDLETON TOWNSHIP	210304	0.50%	1.10%	1.60%	1.00%	\$52.00	\$0.00	\$52.00
Camp Hill SD	CAMP HILL BOROUGH	210201	0.50%	1.50%	2.00%	1.00%	\$42.00	\$10.00	\$52.00
Big Springs SD	COOKE TOWNSHIP	210101	0.50%	1.15%	1.65%	1.00%	\$0.00	\$10.00	\$10.00
	LOWER FRANKFORD TOWNSHIP	210102	0.50%	1.15%	1.65%	1.00%	\$0.00	\$10.00	\$10.00
	LOWER MIFFLIN TOWNSHIP	210103	0.50%	1.15%	1.65%	1.00%	\$0.00	\$10.00	\$10.00
	NEWVILLE BOROUGH	210104	0.50%	1.15%	1.65%	0.00%	\$47.00	\$5.00	\$52.00
	NORTH NEWTON TOWNSHIP	210105	0.50%	1.15%	1.65%	0.00%	\$0.00	\$10.00	\$10.00
	PENN TOWNSHIP	210106	0.50%	1.15%	1.65%	0.50%	\$47.00	\$5.00	\$52.00
	SOUTH NEWTON TOWNSHIP	210107	0.50%	1.15%	1.65%	1.00%	\$30.00	\$5.00	\$35.00
	UPPER FRANKFORD TOWNSHIP	210108	0.50%	1.15%	1.65%	0.00%	\$0.00	\$10.00	\$10.00
	UPPER MIFFLIN TOWNSHIP	210109	0.50%	1.15%	1.65%	1.00%	\$0.00	\$10.00	\$10.00
	WEST PENNSBORO TOWNSHIP	210110	0.50%	1.15%	1.65%	1.00%	\$0.00	\$10.00	\$10.00
West Shore SD	LEMOYNE BOROUGH	210901	0.50%	0.95%	1.45%	1.00%	\$52.00	\$0.00	\$52.00
	LOWER ALLEN TOWNSHIP	210902	0.60%	0.95%	1.55%	1.00%	\$52.00	\$0.00	\$52.00
	NEW CUMBERLAND BOROUGH	210903	0.50%	0.95%	1.45%	1.00%	\$0.00	\$0.00	\$0.00
	WORMLEYSBURG BOROUGH	210904	0.50%	0.95%	1.45%	1.00%	\$52.00	\$0.00	\$52.00
	FAIRVIEW TOWNSHIP (YORK)	210905	0.50%	0.95%	1.45%	1.00%	\$52.00	\$0.00	\$52.00
	GOLDSBORO BOROUGH (YORK)	210906	0.50%	0.95%	1.45%	1.00%	\$0.00	\$0.00	\$0.00
	LEWISBERRY BOROUGH (YORK)	210907	0.50%	0.95%	1.45%	0.50%	\$0.00	\$0.00	\$0.00
	NEWBERRY TOWNSHIP (YORK)	210908	0.50%	0.95%	1.45%	1.00%	\$52.00	\$0.00	\$52.00
Shippensburg Area SD	HOPEWELL TOWNSHIP	210701	0.50%	0.90%	1.40%	0.00%	\$5.00	\$5.00	\$10.00
	NEWBURG BOROUGH	210702	0.50%	0.90%	1.40%	0.50%	\$0.00	\$10.00	\$10.00
	SHIPPENSBURG BOROUGH	210703	0.50%	0.90%	1.40%	1.00%	\$47.00	\$5.00	\$52.00
	SHIPPENSBURG TOWNSHIP	210704	0.50%	0.90%	1.40%	1.00%	\$47.00	\$5.00	\$52.00
	SOUTHAMPTON TOWNSHIP	210705	0.50%	0.90%	1.40%	0.00%	\$5.00	\$5.00	\$10.00
	ORRSTOWN BOROUGH (FRANKLIN)	210706	0.50%	0.90%	1.40%	0.50%	\$0.00	\$10.00	\$10.00
	SOUTHAMPTON TOWNSHIP (FRANKLIN)	210707	0.50%	0.90%	1.40%	1.00%	\$0.00	\$10.00	\$10.00



## LOCAL SERVICES TAX QUARTERLY COUPON

**1st Quarter 2015 - Due April 30, 2015**

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2015 / 1	

1. Total Local Services Tax (LST) withheld.....	\$	
2. Penalty - add 10% of tax due for each quarter tax remains unpaid.....	\$	
3. Interest - add 6% per annum of tax due for each day tax remains unpaid (.00017 x # of days).....	\$	
<b>4. Total amount to be remitted with this return. (add lines 1, 2, 3).....</b>	<b>\$</b>	

<small>I DECLARE UNDER PENALTIES PROVIDED BY LAW THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE IS A TRUE, CORRECT AND COMPLETE RETURN.</small>  <b>X</b> _____ <small>Signature</small>	<small>Contact Phone</small> _____	Mail to: <b>CCTB Employer Accounts-LST</b> 21 Waterford Drive, Suite 201 Mechanicsburg, PA 17050 (717) 590-7997	Make checks or money orders payable to:  <b>"CCTB LST"</b>
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## LOCAL SERVICES TAX QUARTERLY COUPON

**2nd Quarter 2015 - Due July 31, 2015**

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2015 / 2	

1. Total Local Services Tax (LST) withheld.....	\$	
2. Penalty - add 10% of tax due for each quarter tax remains unpaid.....	\$	
3. Interest - add 6% per annum of tax due for each day tax remains unpaid (.00017 x # of days).....	\$	
<b>4. Total amount to be remitted with this return. (add lines 1, 2, 3).....</b>	<b>\$</b>	

<small>I DECLARE UNDER PENALTIES PROVIDED BY LAW THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE IS A TRUE, CORRECT AND COMPLETE RETURN.</small>  <b>X</b> _____ <small>Signature</small>	<small>Contact Phone</small> _____	Mail to: <b>CCTB Employer Accounts-LST</b> 21 Waterford Drive, Suite 201 Mechanicsburg, PA 17050 (717) 590-7997	Make checks or money orders payable to:  <b>"CCTB LST"</b>
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## LOCAL SERVICES TAX QUARTERLY COUPON

**3rd Quarter 2015 - Due October 31, 2015**

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2015 / 3	

1. Total Local Services Tax (LST) withheld.....	\$	
2. Penalty - add 10% of tax due for each quarter tax remains unpaid.....	\$	
3. Interest - add 6% per annum of tax due for each day tax remains unpaid (.00017 x # of days).....	\$	
<b>4. Total amount to be remitted with this return. (add lines 1, 2, 3).....</b>	<b>\$</b>	

<small>I DECLARE UNDER PENALTIES PROVIDED BY LAW THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE IS A TRUE, CORRECT AND COMPLETE RETURN.</small>  <b>X</b> _____ <small>Signature</small>	<small>Contact Phone</small> _____	Mail to: <b>CCTB Employer Accounts-LST</b> 21 Waterford Drive, Suite 201 Mechanicsburg, PA 17050 (717) 590-7997	Make checks or money orders payable to:  <b>"CCTB LST"</b>
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## LOCAL SERVICES TAX QUARTERLY COUPON

**4th Quarter 2015 - Due January 31, 2016**

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2015 / 4	

1. Total Local Services Tax (LST) withheld.....	\$	
2. Penalty - add 10% of tax due for each quarter tax remains unpaid.....	\$	
3. Interest - add 6% per annum of tax due for each day tax remains unpaid (.00017 x # of days).....	\$	
<b>4. Total amount to be remitted with this return. (add lines 1, 2, 3).....</b>	<b>\$</b>	

<small>I DECLARE UNDER PENALTIES PROVIDED BY LAW THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE IS A TRUE, CORRECT AND COMPLETE RETURN.</small>  <b>X</b> _____ <small>Signature</small>	<small>Contact Phone</small> _____	Mail to: <b>CCTB Employer Accounts-LST</b> 21 Waterford Drive, Suite 201 Mechanicsburg, PA 17050 (717) 590-7997	Make checks or money orders payable to:  <b>"CCTB LST"</b>
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EMPLOYER ACCOUNT #	EMPLOYER NAME		FEIN	YEAR / QTR	PSD
COMPLETE EMPLOYEE SS#	EMPLOYEE NAME	EMPLOYEE WORK LOCATION ADDRESS	LST WITHHELD	PAY PERIODS	
<b>TOTAL</b>					

EMPLOYER ACCOUNT #	EMPLOYER NAME		FEIN	YEAR / QTR	PSD
COMPLETE EMPLOYEE SS#	EMPLOYEE NAME	EMPLOYEE WORK LOCATION ADDRESS	LST WITHHELD	PAY PERIODS	
<b>TOTAL</b>					

EMPLOYER ACCOUNT #	EMPLOYER NAME		FEIN	YEAR / QTR	PSD
COMPLETE EMPLOYEE SS#	EMPLOYEE NAME	EMPLOYEE WORK LOCATION ADDRESS	LST WITHHELD	PAY PERIODS	
<b>TOTAL</b>					

EMPLOYER ACCOUNT #	EMPLOYER NAME		FEIN	YEAR / QTR	PSD
COMPLETE EMPLOYEE SS#	EMPLOYEE NAME	EMPLOYEE WORK LOCATION ADDRESS	LST WITHHELD	PAY PERIODS	
<b>TOTAL</b>					



**Cumberland County Tax Bureau**  
 717-590-7997 Fax: 717-590-7998  
 www.cumberlandtax.org

**BUSINESS INFORMATION  
 CORRECTION FORM or  
 FINAL REPORT IF BUSINESS IS  
 TERMINATED OR NO LONGER HAS  
 EMPLOYEES**

**Current Information**

Employer Name		
Employer Account Number		
Federal EIN or Social Security Number		
Address		
City	State	ZIP Code

**New / Corrected Information**

Employer Name		
Employer Account Number		
Federal EIN or Social Security Number		
Address		
City	State	ZIP Code

**Reason(s) for Report** (check all that apply)

<input type="checkbox"/> Changing Mailing Address Only <input type="checkbox"/> Changing Both Mailing Address and Physical Business Address <input type="checkbox"/> Business Closed <input type="checkbox"/> Business Sold <input type="checkbox"/> No Longer has Employees Subject to Local EIT <input type="checkbox"/> No Employees on Payroll <input type="checkbox"/> Other (Explain)
If Applicable, Date of Last Payroll _____

Name of Individual Filing Report		Title
Signature		Date
Phone Number (     )	E-Mail Address	





**Cumberland County Tax Bureau  
W2-R ANNUAL RECONCILIATION  
Earned Income Tax Withheld from Wages**

*As reported on Employer's quarterly Return (Form E-1); with income tax withheld as shown on Withholding Statements (W-2)*

You are entitled to receive a written explanation of your rights with regard to the audit, appeal, enforcement, refund and collection of local taxes by contacting your Tax Officer.

<b>Year</b>	<b>Due by the Last Day of February</b>		
EMPLOYER BUSINESS NAME (Use Federal ID Name)			
EMPLOYER BUSINESS STREET ADDRESS (PO Box, RD or RR ARE <u>NOT ACCEPTABLE</u> )			
SECOND LINE OF STREET ADDRESS			
CITY OR POST OFFICE		STATE	ZIP CODE
MUNICIPAL LOCATION OF BUSINESS			
EMPLOYER PSD CODE	EMPLOYER ACCOUNT NUMBER	FEDERAL ID NUMBER	

1. Total number of withholding statements (W-2's) accompanying this report .....		
2. Total income tax withheld from all wages during the year (as shown on W-2's) .....	(A)	\$
	<b>EARNED INCOME TAX</b>	<b>TAX PAID</b>
	Quarter ended March 31 .....	\$
	Quarter ended June 30 .....	\$
	Quarter ended September 30 .....	\$
	Quarter ended December 31 .....	\$
3. Total quarterly income tax from wages during the year as reported on Quarterly E-1 Reports .....	(B)	\$
<b>TOTAL</b>		\$
<b>TOTAL AMOUNT OF ENCLOSED CHECK</b>		\$
4. Any difference between A and B must be explained in an attached statement. Where A & B do not agree, please remit balance due or request a refund in writing.		

<small>Under penalties of perjury, I (we) declare that I (we) have examined this information, including all accompanying schedules and statements and to the best of my (our) knowledge, they are true, correct and complete.</small>		
PRIMARY CONTACT INDIVIDUAL (First Name, Last Name)		
TITLE		
PRIMARY CONTACT PHONE NUMBER	PRIMARY CONTACT EMAIL ADDRESS	
SIGNATURE OF PRIMARY CONTACT INDIVIDUAL	DATE (MM/DD/YYYY)	

**Instructions for W2-R Annual Reconciliation Form**

1. Include municipal location of business in PA, assigned account number and Federal ID number. Include employer's full business name and street address.
2. On or before the last day of February following the close of the calendar year, file online or return the reconciliation form to the appropriate Tax Officer. This form must be accompanied by a CITY INCOME TAX copy of the form W-2 for each employee from whom income tax has been withheld during the tax year.
3. The total of all income tax withheld, as reflected on W-2's, should be entered on line 2. The total of all earned income tax reported quarterly should be entered on line 3.
4. Please remit any additional monies owed when filing the reconciliation. Attach a statement of explanation and include the employee name, SSN, street address, resident PSD code and amount being paid with the reconciliation.



**Cumberland County Tax Bureau**  
**2015 LST ANNUAL RECONCILIATION**  
 As reported on Employer's Local Services Tax Quarterly Return  
 Due the LAST DAY OF FEBRUARY

Business Name (Use Federal ID Name)		
Business Mailing Address		
Employer PSD Code	Employer Account Number	Federal ID Number
Multilocation <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, list full physical locations and PSD Codes		
1. Total Local Services Tax Withheld from All Employees During the tax year. (A) . . . . \$ _____		
		<b>Tax Paid</b>
<b>Local Services Tax</b>		
	Quarter ended March 31 . . . . \$	_____
	Quarter ended June 30 . . . . \$	_____
	Quarter ended September 30 . . . . \$	_____
	Quarter ended December 31 . . . . \$	_____
2. Total Local Services Tax Paid		
	Total Quarters (B) . . . . \$	_____
	<b>Subtract Line (A) from Line (B) Total</b> . . . . \$	_____
	<b>Penalty</b> - Add 10% for each quarter tax remains unpaid . . . . \$	_____
	<b>Interest</b> - Add 6% per annum for each day tax remains unpaid (.00017 x # of days) . . . . \$	_____
	<b>TOTAL AMOUNT OF ENCLOSED CHECK</b> . . . . \$	_____
3. Any difference between A and B must be explained in an attached statement. Where A and B do not agree, please remit balance due including penalty and interest or request refund. Be sure to include an LST Detail Report with your payment.		
4. Attach Year End Local Services Tax Report, include Employee Name, SSN, work location/PSD, LST W/H		

Signature of Primary Contact Individual

Date

PRESORTED STANDARD  
U.S. POSTAGE  
**PAID**  
HARRISBURG PA  
PERMIT NO. 411