

Cumberland County Tax Bureau

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

2014

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 seventy-five (75) 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. 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. 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.

- 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 2014 are due:

1st quarter due April 30 / 2nd quarter due July 31 / 3rd quarter due October 31 / 4th quarter due January 31, 2015

a. The back page of the quarterly return may be photocopied for listing additional employees. Please remember, employers with seventy five (75) 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

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 2014 are due:

1st quarter due April 30 / 2nd quarter due July 31 / 3rd quarter due October 31 / 4th quarter due January 31, 2015

a. The detail listing page for quarterly filings may be photocopied for additional employees.

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 2015.

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

For any changes to your business information.

~ LST Annual Reconciliation for **Employers**

EARNED INCOME TAX QUARTERLY COUPON

1st Quarter 2014 - Due April 30, 2014

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2014 / 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.	\$	
4. Total amount to be remitted with this return. (add lines 1, 2, 3)	\$	

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.

X _____
Signature Contact Phone

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"

EARNED INCOME TAX QUARTERLY COUPON

2nd Quarter 2014 - Due July 31, 2014

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2014 / 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.	\$	
4. Total amount to be remitted with this return. (add lines 1, 2, 3)	\$	

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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EARNED INCOME TAX QUARTERLY COUPON

3rd Quarter 2014 - Due October 31, 2014

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2014 / 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.	\$	
4. Total amount to be remitted with this return. (add lines 1, 2, 3)	\$	

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Signature Contact Phone

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EARNED INCOME TAX QUARTERLY COUPON

4th Quarter 2014 - Due January 31, 2015

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2014 / 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.	\$	
4. Total amount to be remitted with this return. (add lines 1, 2, 3)	\$	

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.

X _____
Signature Contact Phone

Mail to:
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21 Waterford Drive, Suite 201
Mechanicsburg, PA 17050
(717) 590-7997

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

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 NOT ACCEPTABLE)			
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) (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
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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

9. Date Period Ended (MM/DD/YYYY).....	<input type="text"/>
10. Total Pages of This Return	<input type="text"/>
11. Total Number of Employees Listed	<input type="text"/>
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 NOT ACCEPTABLE)	(13) GROSS COMPENSATION PAID THIS QUARTER	(14) AMOUNT OF EIT WITHHELD THIS QUARTER	(15) RESIDENT PSD CODE
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>
(16) FIRST PAGE TOTAL.....		\$ <input type="text"/>	\$ <input type="text"/>	<input type="text"/>

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

TOTAL Amount Remitted.....	\$ <input style="width: 150px;" type="text"/>
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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 <small>(PO Box, RD or RR ARE NOT ACCEPTABLE)</small>	(13) GROSS COMPENSATION PAID THIS QUARTER	(14) AMOUNT OF EIT WITHHELD THIS QUARTER	(15) RESIDENT PSD CODE
<input type="text"/>		\$	\$	<input type="text"/>
<input type="text"/>		\$	\$	<input type="text"/>
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<input type="text"/>		\$	\$	<input type="text"/>
<input type="text"/>		\$	\$	<input type="text"/>
(16) THIS PAGE TOTAL		\$	\$	

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 seventy five (75) 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.

Please see detailed instructions at www.cumberlandtax.org on the Local Services Tax including employee exemptions and refunds, if applicable.

MEMBER TAX RATES 2014

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 2014 - Due April 30, 2014

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2014 / 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)	\$	
4. Total amount to be remitted with this return. (add lines 1, 2, 3)	\$	

<p><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></p> <p>X _____</p> <p><small>Signature</small></p>	<p>Mail to: CCTB Employer Accounts-LST 21 Waterford Drive, Suite 201 Mechanicsburg, PA 17050 (717) 590-7997</p>	<p>Make checks or money orders payable to: "CCTB LST"</p>
<p>_____</p> <p><small>Contact Phone</small></p>		

LOCAL SERVICES TAX QUARTERLY COUPON

2nd Quarter 2014 - Due July 31, 2014

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2014 / 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)	\$	
4. Total amount to be remitted with this return. (add lines 1, 2, 3)	\$	

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<p>_____</p> <p><small>Contact Phone</small></p>		

LOCAL SERVICES TAX QUARTERLY COUPON

3rd Quarter 2014 - Due October 31, 2014

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2014 / 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)	\$	
4. Total amount to be remitted with this return. (add lines 1, 2, 3)	\$	

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<p>_____</p> <p><small>Contact Phone</small></p>		

LOCAL SERVICES TAX QUARTERLY COUPON

4th Quarter 2014 - Due January 31, 2015

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2014 / 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)	\$	
4. Total amount to be remitted with this return. (add lines 1, 2, 3)	\$	

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<p>_____</p> <p><small>Contact Phone</small></p>		

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

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

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

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

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.

Year	Due by the Last Day of February		
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)	\$
	EARNED INCOME TAX	TAX PAID
	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)	\$
TOTAL		\$
TOTAL AMOUNT OF ENCLOSED CHECK		\$
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
2014 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) \$ _____		
	Local Services Tax	Tax Paid
	Quarter ended March 31 \$	_____
	Quarter ended June 30 \$	_____
	Quarter ended September 30 \$	_____
	Quarter ended December 31 \$	_____
	Total Quarters (B) \$	_____
	Subtract Line (A) from Line (B) Total \$	_____
	Penalty - Add 10% for each quarter tax remains unpaid \$	_____
	Interest - Add 6% per annum for each day tax remains unpaid (.00017 x # of days) \$	_____
	TOTAL AMOUNT OF ENCLOSED CHECK \$	_____
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

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