Cumberland County
Tax Bureau

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

2017
Employer's EIT and LST
Report Form Booklet

Employer Packet Instructions

EIT and LST Reminders

- 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 http://munstats.pa.gov/Public/FindLocalTax.aspx. 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 2017 are due:

    1st quarter due April 30 / 2nd quarter due July 30 / 3rd quarter due October 30 / 4th quarter due January 30, 2018

   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

   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 2017 are due:

    1st quarter due April 30 / 2nd quarter due July 30 / 3rd quarter due October 30 / 4th quarter due January 30, 2018

   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

   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 2018.

~ Business Information Correction Form for **Employers:**
   For any changes to your business information.

~ LST Annual Reconciliation for **Employers**

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

EARNED INCOME TAX QUARTERLY COUPON
1st Quarter 2017 - Due April 30, 2017

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2017 / 1	

1. Total Earned Income Tax (EIT) withheld. . . . . $

2. Penalty - add 1% per month tax remains unpaid. . . . . $

3. Interest - tax x .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 2017 - Due July 30, 2017

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2017 / 2	

1. Total Earned Income Tax (EIT) withheld. . . . . $

2. Penalty - add 1% per month tax remains unpaid. . . . . $

3. Interest - tax x .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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Signature   Contact Phone

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Mechanicsburg, PA 17050
(717) 590-7997

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

EARNED INCOME TAX QUARTERLY COUPON
3rd Quarter 2017 - Due October 30, 2017

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2017/ 3	

1. Total Earned Income Tax (EIT) withheld. . . . . $

2. Penalty - add 1% per month tax remains unpaid. . . . . $

3. Interest - tax x .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
4th Quarter 2017 - Due January 30, 2018

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2017 / 4	

1. Total Earned Income Tax (EIT) withheld. . . . . $

2. Penalty - add 1% per month tax remains unpaid. . . . . $

3. Interest - tax x .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"

EIT-QTR-BK

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   *(Attach listing of multiple locations within PA, if applicable)* *(This list must contain full physical address locations)*

COUNTY | BUSINESS PHONE NUMBER | BUSINESS FAX NUMBER

EMPLOYER PSD CODE | FEDERAL EIN OR SOCIAL SECURITY # | EMPLOYER ACCOUNT NUMBER | YEAR AND QUARTER

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) $_____
8. **Balance Due with Return (item 6 minus 7).....** $_____

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. ☐ CHANGE   ☐ NO CHANGE

Do you expect to pay taxable wages next quarter?   ☐ Yes ☐ 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
		$	$	
		$	$	
		$	$	
		$	$	
(16) FIRST PAGE TOTAL..		$	$	

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 NOT ACCEPTABLE)	(13) GROSS COMPENSATION PAID THIS QUARTER	(14) AMOUNT OF EIT WITHHELD THIS QUARTER	(15) RESIDENT PSD CODE
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
		$	$	
(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 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.

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

MEMBER TAX RATES 2017

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%	0.50%	$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%	$47.00	$5.00	$52.00
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%	1.00%	$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 2017 - Due April 30, 2017

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2017 / 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 (tax x .00017 x # of days) . . . . $

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-LST
21 Waterford Drive, Suite 201
Mechanicsburg, PA 17050
(717) 590-7997

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

LOCAL SERVICES TAX QUARTERLY COUPON

2nd Quarter 2017 - Due July 30, 2017

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2017 / 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 (tax x .00017 x # of days) . . . . $

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
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X

Signature   Contact Phone

Mail to:
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Mechanicsburg, PA 17050
(717) 590-7997

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

LOCAL SERVICES TAX QUARTERLY COUPON

3rd Quarter 2017 - Due October 30, 2017

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2017 / 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 (tax x .00017 x # of days) . . . . $

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
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(717) 590-7997

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

LOCAL SERVICES TAX QUARTERLY COUPON

4th Quarter 2017 - Due January 30, 2018

EMPLOYER ACCOUNT NUMBER	EMPLOYER NAME	FEDERAL EIN #	YEAR/QUARTER	PSD
			2017 / 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 (tax x .00017 x # of days) . . . . $

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

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Mechanicsburg, PA 17050
(717) 590-7997

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

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)

☐   Changing Mailing Address Only

☐   Changing Both Mailing Address and Physical Business Address

☐   Business Closed

☐   Business Sold

☐   No Longer has Employees Subject to Local EIT

☐   No Employees on Payroll

☐   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 NOT ACCEPTABLE)

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.*

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.

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
2017 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 ☐ Yes ☐ 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 . . . . $	_____

2. Total Local Services Tax Paid   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 (tax x .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