

3. ADJUSTMENTS. - Line 2, of the return, is to be used for the correction of errors with respect to the amount of tax withheld or the amount of tax paid for the preceding quarter (s) of the same calendar year. Any amounts entered must be explained by a statement, attached to the return. This statement must set forth an explanation of the error which the entry is intended to correct, the particular return period or periods to which the error relates, the amount chargeable to each such period, and the manner in which the employer and employee have settled any over-collection or undercollection of withholding tax.

days after the end of each quarter. A delinquent tax return is subject to six (6) percent per annum interest plus an additional penalty of one-half of one (.005) percent for each month or fraction thereof on the entire amount of the unpaid tax.

2. PAYMENT OF TAX. - Each return must be accompanied by a remittance for the amount of tax withheld. Such remittance is due on or before 30 days after the end of each quarter. A return must be filed for each quarter of the calendar year as follows:

Quarter Ending	Due Date
December 31st	On or before January 31st
March 31st	On or before April 30th
June 30th	On or before July 31st
September 30th	On or before October 31st

1. FILING REQUIREMENTS. - A return must be filed for each quarter of the calendar year as follows:

INSTRUCTIONS

QUARTERLY RETURN OF WITHHELD WAGE TAXES

Hanover Area
Earned Income Tax Bureau
(717) 632-8288
Fax (717) 632-0208

(File with Wage Tax Collector)

ORIGINAL

I declare, under the penalties of perjury, that this return has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return, made in good faith, pursuant to the Wage and Profits Tax Resolution and the regulations issued under authority thereof.

(Signed) _____

(Title) _____
(Owner, president, partner, member, etc.)

(Date) _____

DATE QUARTER ENDED

FOR OFFICE USE ONLY

1. Total Wage Tax withheld from wages during quarter \$ _____

2. Adjustment for preceding quarter (s) of calendar year \$ _____
(Explain in statement attached)

3. Total tax withheld as adjusted. \$ _____

Your Check is
Your Receipt

Space below for Office use

4. Penalty ... \$ _____

5. Interest ... \$ _____

6. Total \$ _____

(Print in above space employer's name and address of principal place of business.) If paid by check or money order make payable to Wage Tax Collector, and mail to Wage Tax Office-M & T Bank-Main Office, 11 Baltimore St.-Lower Level, Hanover, PA 17331-3195.

