PO Box 25113 Lehigh Valley, PA 18002-5113									W2-R Annual Reconciliation of 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)															W2R														
																								Du	F	y Day il e o	of F d O	nliı	ne	ry							2	
													Please complete information requested and remit to: HAB - EMP REC PO Box 25113 Lehigh Valley, PA 18002-5113																		s							
Please see reverse for instructions Employer Name												You are entitled to receive a written explanation of your right collection of local taxes by calling Berkheimer at 610-599-3182 Berkheimer is not the appointed tax hearing officer for your Petitions for appeal must be filed with the appropriate appeals proper procedures and forms necessary to file an appeal with t												ur tax	ina di	strict	and w	vill na	ot acc	cept a	anv p	etition	s for	appeal.				
Addı	ess																																		1			
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City																							State Zip											 1				
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PSD	Nun	Imber Employer Acct No.											F	ede	ral	ID N	lo.								 	TCD Filed With												
1	. Tot	al nu	umber	of wi	thho	lding s	stater	nents	(W-2	2s) ac	com	panyi	ng th	is rep	port																							
2. Total income tax withheld from all wages during the yea																										(A	.)	\$				_						
																		E	EAF	RNE	D	INC		ИE	TA	x							Ta	хP	aid			
													Quarter ended March 31												\$					_			=					
													Quarter ended June 30										\$					<u> </u>										
												Quarter ended September 30												\$								_						
V V L												Ŀ	Quarter ended December 31												\$					<u> </u>								
3. Total quarterly income tax from wages during the year as re													porte	d on	d on Quarterly E-1 Reports									(В	;)	\$],								
	TOTAL AMOUNT O ENCLOSED CHEC															[,																		

4. Any difference between A and B must be explained in attached statement. Where A and B do not agree, please remit or request refund.

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

There will be a \$29.00 fee for returned payments.

There will be an additional fee assessed if no payment is enclosed for tax due at time of filing.

Phone_

Date_



INSTRUCTIONS FOR FORM W-2R

- 1. Include municipal location of business in PA, assigned account number and Federal ID number. Include employer's full name and address.
- 2. If no balance is due, the W2 Reconciliation can be filed online on or before the last day of February following the close of the calendar year at: www.berk-e.com, or return the reconciliation form. If a balance is due, online filing is still available, but payment must be submitted to the address below, along with this completed form with the "Filed Online" box checked. This form must be accompanied by CITY INCOME TAX copy or facsimile of the Form W-2 if a file has not been submitted electronically for each employee from whom income tax has been withheld during said year.
- 3. The total of all income tax withheld as reflected on W-2s should be entered on line 2. Total Earned Income Tax as reported on a quarterly basis should be entered on line 3.
- 4. Payment is due, if applicable, when filing the reconciliation. Complete the reverse side of this form and mail to the address below. Include the employee name, SSN, address, municipality and amount being paid with the reconciliation.
- 5. If an employer's total payroll consists of a number of separate units or establishments, the Form W-2 should be assembled accordingly and a separate reconciliation Form W-2 should be submitted.

Remit to: HAB - EMP REC PO Box 25113 Lehigh Valley, PA 18002-5113