



**YORK ADAMS TAX BUREAU**

York: 717-845-1584  
Fax: 717-854-6376  
email: employer@yatb.com  
www.yatb.com



**EMPLOYER QUARTERLY RETURN  
EARNED INCOME TAX WITHHOLDING**

EMPLOYER BUSINESS NAME (USE FEDERAL ID NAME)  
[ ]

EMPLOYER BUSINESS LOCATION - STREET ADDRESS (INCLUDE PO BOX IF PRIMARY USE)  
[ ]

CITY OR POST OFFICE [ ] STATE [ ] ZIP CODE [ ]

MUNICIPAL TAXING AUTHORITY (CITY, BOROUGH, TOWNSHIP) IN WHICH FACILITY OF BUSINESS IS LOCATED  
[ ]

COUNTY [ ] BUSINESS PHONE NUMBER [ ] BUSINESS FAX NUMBER [ ]

EMPLOYER PSD CODE [ ] FEDERAL EIN [ ] YATB EMPLOYER ACCOUNT NUMBER [ ] TAX YEAR [ ] 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: .000110 x # days tax remains unpaid..... [ ]  
6. Total Amount of Tax Due..... [ ]  
7. Total Payments Made this Quarter..... [ ]  
8. Balance Due with Return (Item 6 minus 7) ..... [ ]

9. Date Period Ended (MM/DD/YYYY)..... [ ]  
10. Total Pages 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 the date 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 schedule and statements and to the best of my (our) belief, they are true, accurate and complete.

PRIMARY CONTACT INDIVIDUAL FIRST NAME [ ] PRIMARY CONTACT INDIVIDUAL LAST NAME [ ]

TITLE [ ]

PRIMARY CONTACT PHONE NUMBER [ ] PRIMARY CONTACT EMAIL ADDRESS [ ]

SIGNATURE OF PRIMARY CONTACT INDIVIDUAL [ ] DATE (MM/DD/YYYY) [ ]

(12) Employee's Social Security Number	(13) Employee's Name/Address (No PO Boxes)	(14) Gross Compensation Paid this Quarter	(15) Amount of EIT Withheld this Quarter	(16) Resident PSD Code
[ ]	[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]	[ ]

(17) This Page Total..... [ ] [ ]

Total Amount Enclosed..... [ ]

**MAKE CHECKS PAYABLE TO: YATB**  
THERE WILL BE A **\$25.00** FEE FOR RETURNED PAYMENTS AND CHECKS.

**REMIT TO:**  
York Adams Tax Bureau  
1405 North Duke Street, PO Box 15627 York, PA 17405

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(17) This Page Total.....