



YORK ADAMS TAX BUREAU

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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.
Do you expect to pay taxable wages next quarter?

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)

Table with 5 columns: (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

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

(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.....