

# LOCAL INCOME TAX WITHHOLDING RETURN

## EMPLOYER INFORMATION

Name

Address

## TAXING AUTHORITY & PERIOD

Local Taxing Jurisdiction

Tax Year

Quarter / Month

Federal EIN

Local Account Number

Due Date

Tax Computation		Amount
1	Total Gross Wages Subject to Local Tax this Period	
2	Local Tax Rate (%)	
3	Total Local Tax Required to be Withheld (Line 1 x Line 2)	
4	Adjustments (Attach explanation)	
5	Penalty	
6	Interest	
7	Total Amount Due (Line 3 plus or minus Line 4, plus Lines 5 and 6)	

## DECLARATION & SIGNATURE

I declare under penalties of perjury that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return.

Authorized Signature

Date

Title

Phone Number

