



W2R

Please see reverse for instructions.

W2

Scan for FAQs
or to file online



WEB

Year:

Due by Last Day of February

Filed Online (see instructions)

Employer Name

Grid for Employer Name

Address

Grid for Address

City

State

Zip

Grid for City, State, Zip

Municipal Location of Business

Grid for Municipal Location of Business

PSD Number

Employer Acct No.

Federal ID No.

TCD Filed With

Grid for PSD Number, Employer Acct No., Federal ID No., TCD Filed With

EMAIL: Your email on file appears above. If email is incorrect or blank, please provide below.

Grid for Email

Phone Number: Your phone number on file appears above. If phone is incorrect or blank, please provide below. By providing your number, you agree to allow us to contact you regarding your account by phone.

Grid for Phone Number

1. Total number of withholding statements (W-2s) accompanying this report

Grid for number of statements

2. Total income tax withheld from all wages during the year as shown on (W-2s)

(A) \$ Grid for total tax withheld

EARNED INCOME TAX

Tax Paid

Quarter ended March 31 \$ Grid

Quarter ended June 30 \$ Grid

Quarter ended September 30 \$ Grid

Quarter ended December 31 \$ Grid

3. Total quarterly income tax from wages during the year as reported on Quarterly E-1 Reports

(B) \$ Grid for total quarterly income tax

TOTAL AMOUNT OF ENCLOSED CHECK

Grid for total amount of enclosed check

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 PENALTIES 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.

Signature _____ Phone _____ Date _____

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.

You are entitled to receive a written explanation of your rights with regard to the audit, appeal, enforcement, refund and collection of local taxes by calling Berkheimer at 610-599-3182. Or, you can visit our website at www.hab-inc.com.

Berkheimer is not the appointed tax hearing officer for your taxing district and will not accept any petitions for appeal. Petitions for appeal must be filed with the appropriate appeals board for your County. Berkheimer can provide you with the proper procedures and forms necessary to file an appeal with the appeals board for your Tax Collection District.

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