

**CITY OF PHILADELPHIA
ANNUAL RECONCILIATION OF
2011 EMPLOYER WAGE TAX
DUE DATE: FEBRUARY 29, 2012**



City Account Number

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Federal Identification Number

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Name and Address

To file online, click on "Online Services" at www.phila.gov/revenue.

If your business terminated in 2011, enter the termination date AND file a CHANGE FORM.

m	m	-	d	d	-	y	y	y	y
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YOU MUST USE THE CHANGE FORM TO REPORT A CHANGE OF ADDRESS.

If this is an amended return place an "X" here:

- A. Enter the number of Philadelphia Residents for whom wage tax was remitted for the pay period including March 12, 2011.....A.

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 - B. Enter the number of **nonresidents** (employees living outside Philadelphia city limits) for whom wage tax was remitted for the pay period including March 12, 2011.....B.

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 - C. Total number of employees **for all company locations** reported on the Employer's Federal Quarterly Tax Return for the first quarter of 2011 (for the pay period including March 12, 2011).....C.

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 - D. Number of employees working **at company locations within Philadelphia city limits**, for the pay period including March 12, 2011.....D.

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- 1. Gross Compensation per W-2 forms for all employees.....1.

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 . 0 0
 - 2. Non-Taxable Gross Compensation included in Line 1. (Paid to nonresidents working outside of Philadelphia).....2.

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 . 0 0
 - 3. Gross Compensation per W-2 forms on which Philadelphia Wage Tax was withheld or due (Line 1 minus Line 2).....3.

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 . 0 0
 - 4. Total Taxable Gross Compensation paid to **residents** of Philadelphia in 2011.....4.

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 - 5. Tax Due (Line 4 times .03928).....5.

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 - 6. Total Taxable Gross Compensation paid to **nonresidents** of Philadelphia in 2011.....6.

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 - 7. Tax Due (Line 6 times .034985).....7.

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 - 8. **Total Tax Due** (Line 5 plus Line 7).....8.

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 - 9. **Tax previously paid for 2011**.....9.

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 - 10. **ADDITIONAL TAX DUE** If Line 8 is greater than Line 9, enter the amount here.....10.

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 - 11. **TAX OVERPAID** If Line 9 is greater than Line 8, enter the amount here. See instructions for filing a Refund Petition.....11.

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Under penalties of perjury, as set forth in 18 PA C.S. §§ 4902-4903 as amended, I swear that I have reviewed this return and accompanying statements and schedules, and to the best of my knowledge and belief, they are true and complete.

Taxpayer Signature _____ Date _____ Phone # _____

Preparer Signature _____ Date _____ Phone # _____