CITY OF PHILADELPHIA ANN



SOCIAL SECURITY NUMBER				

UAL RECONCILIATION OF 2010
EMPLOYEE EARNINGS TAX
DUE DATE APRIL 15, 2011

Name and Address		

Do not file this return if Philadelphia wage tax was withheld on all compensation (Line 12 = Line 13). File a Change Form to cancel this account.

		If wage tax not file this Refund Pet	s return.			
		Downle	oad form	s at <u>www.</u>	phila.gov/r	evenue.
To cancel th	nis account enter the termination date <u>AND</u> file a CHANGE FORM.	>	m m -	dd-	ууу	у
YOU MUST	USE THE CHANGE FORM TO REPORT A CHANGE OF ADDRESS.	this is an an	nended i	return pla	ice an "X"	' here:
1.	Gross Compensation received in 2010. Enclose 2010 W-2 form(s)	1.	<u> </u>		,	.00
2.	Non-taxable gross compensation from Page 2, Line 5	2.			,	.00
3.	Gross taxable compensation (Line 1 minus Line 2)	3.	,		,	.00
4.	Taxable Gross Compensation received by a <u>resident</u> of Philadelph January 1, 2010 to June 30, 2010		,		,	.00
5.	Tax Due (Line 4 times .039296)	5.	,		,	.00
6.	Taxable Gross Compensation received by a <u>resident</u> of Philadelph July 1, 2010 to December 31, 2010		,		, 🔲	.00
7.	Tax Due (Line 6 times .039280)	7.	,		,	.00
	Taxable Gross Compensation received by a <u>nonresident</u> of Philad January 1, 2010 to June 30, 2010	elphia	<u> </u>		j, 🚃	.00
9.	Tax Due (Line 8 times .034997)	9.	,		,	.00
	Taxable Gross Compensation received by a <u>nonresident</u> of Philad July 1, 2010 to December 31, 2010	elphia	<u> </u>		j, 📺	.00
11.	Tax Due (Line 10 times .034985)	11.],	.00
12.	Total Tax Due (Add Lines 5, 7, 9 and 11)	12.	,		,	.00
13.	Any Philadelphia wage tax <u>withheld by employer</u> per enclosed W-2 form If Line 12 is equal to Line 13, <u>STOP HERE!</u> Do not file this return.	ns13.	,		,	.00
	Net Tax Due (Line 12 minus Line 13)	14.	,		, <u> </u>	.00
15.	Tax that you, <u>not your employer</u> , previously paid for 2010. (Not included on W-2 forms)	15.],	.00
	ADDITIONAL TAX DUE If Line 14 is greater than Line 15, enter here and in the Tax Due box of the Payment Coupon below],	.00
	AYMENT OPTIONS If Line 14 is less than Line 15, enter the amount to		,		,	.00
1/A.	REFUNDED. Do not file a separate Refund Petition OR	1/A.	<u>'</u>		! 	=
17B.	APPLIED, up to the tax due, to the 2011 Earnings Tax Return	17B.	,		,	.00
If cla	ming a refund on line 17A, W-2 forms must accompany this	return. Do	not file	a separat	e Refund	Petition.
	Under penalties of perjury, as set forth in 18 PA C.S. §§ 4902-4903 as ar and accompanying statements and schedules, and to the best of my know					
Тахр	ayer Signature Date		Phone	#		
Prep	arer SignatureDate		Phone	#		

NON-RESIDENT EMPLOYEE EARNINGS ALLOCATION AND/OR DEDUCTIBLE EMPLOYEE BUSINESS EXPENSES REPORT

Residents and non-residents of Philadelphia must complete this report to calculate deductible employee business expenses. Certain non-residents must complete this report to calculate non-taxable compensation. If wage tax was overwithheld by your employer, do not file this return. File the Employee Wage Tax Refund Petition.

EMPLOYER	EMPLOYEE SOCIAL SECURITY NUMBER					
PLACE OF EMPLOYMENT	IF PARTIAL YEAR, PROVIDE DATES: From To					
	EMPLOYER IDENTIFICATION	NUMBER (From Form W-2)				
Read Instruction Sheets A and B before completing this report.	Column A 1/1/2010 to 6/30/2010	Column B 7/1/2010 to 12/31/2010				
1. GROSS COMPENSATION FOR EMPLOYEES PAID ON A SALARY BASIS per FORM W-2	.00	.00				
A. Non-Taxable Stock Options included in Line 1. (Must reflect on W-2)	.00	.00				
B. Adjusted Gross Compensation (Subtract Line 1A from Line 1)	.00	.00				
Computation of taxable compensation and/or allowable expenses A. Number of Days/Hours (Include overtime from Line 2C)	Days/Hours	Days/Hours				
B. Non-workdays/Hours (Total of weekend, vacation, holiday, sick or any type of leave time)	Days/Hours	Days/Hours				
C. Number of actual Workdays/Hours (BaseOvertime) (Line 2A minus Line 2B) If computing overtime, see instructions on Instruction Sheet B.	Days/Hours	Days/Hours				
D. Number of actual Days/Hours worked outside of Philadelphia in Line 2C	Days/Hours	Days/Hours				
E. Percentage of time worked outside of Philadelphia (Line 2D divided by Line 2C)	%	%				
F. Non-taxable gross compensation earned outside of Philadelphia (Line 1B times Line 2E)	.00	.00				
G. (i) Total non-reimbursed business expenses from Form 2106 and/or Schedule A, Miscellaneous Deductions, Line 20	.00	.00				
(ii) Multiply amount on Line 2G (i) by the percentage on Line 2E	.00	.00				
(iii) Deductible non-reimbursed employee business expenses. (Subtract Line 2G (ii) from Line 2G (i))	.00	.00				
H. Non-taxable income and/or deductible employee business expenses (Add Line 2F and Line 2G (iii))	.00	.00				
3. GROSS COMPENSATION FOR EMPLOYEES PAID ON A COMMISSION BASIS per FORM W-2	.00	.00				
A. Non-Taxable Stock Options included in Line 3. (Must reflect on W-2)	.00	.00				
B. Adjusted Gross Compensation (Subtract Line 3A from Line 3)	.00	.00				
Computation of taxable compensation and/or allowable expenses A. Total Sales	.00	.00				
B. Sales earned outside of Philadelphia (Income Regulations 209(b))	.00	.00				
C. Percentage of sales outside of Philadelphia. (Divide Line 4B by Line 4A.)	%	%				
D. Commissions earned outside of Philadelphia. (Multiply Line 3B by 4C.)	.00	.00				
E. (i) Total non-reimbursed business expenses from Form 2106 and/or Schedule A, Miscellaneous Deductions, Line 20	.00	.00				
(ii) Multiply amount on Line 4E (i) by the percentage on Line 4C	.00	.00				
(iii) Deductible non-reimbursed employee business expenses. (Subtract Line 4E (ii) from Line 4E (i))	.00	.00				
F. Non-taxable gross commissions/deductible employee business expenses. (Add Line 4D and Line 4E (iii))	.00	.00				
5. TOTAL NON-TAXABLE GROSS COMPENSATION (Add Lines 2H and Line 4F from Columns A <u>and</u> B.) Enter here and on Line 2 of the return.		.00				
6. TAXABLE GROSS COMPENSATION (Line 1B minus Line 2H PLUS Line 3B minus Line 4F) Residents enter Column A on Page 1, Line 4; Non-residents enter Column A on Page 1, Line 8. Residents enter Column B on Page 1, Line 6; Non-residents enter Column B on Page 1, Line 10.	.00	.00				