



City of Williamsport - City Treasurer
 PO Box 1265 • Williamsport, PA 17703
 570.327.7520

LOCAL SERVICES TAX RETURN

Each employer and/or business owner working within the taxing district must pay the Local Services Tax (LST) and file the required LST form (including detail) with the Williamsport City Treasurer's Office on a quarterly basis. Employers shall withhold a maximum of \$52.00 of LST per employee per year, no more than \$1.00 per week.

Each quarterly LST filing must include:

- A completed LST form along with payment.
- A spreadsheet of employee detail listing each employee's name, address, SSN and the amount of tax remitted for each individual listed.
- A sample Excel spreadsheet is available at www.cityofwilliamsport.org/government/treasurer.

PLEASE NOTE:

- 1. Low Income Exemption** - There is a mandatory low-income exemption for individuals earning less than \$12,000.00 per year. In order to receive the exemption, the individual must annually fill out the LST exemption form. Unless the employee supplies the employer with the completed exemption form, you are to proceed with the regular collections of the LST.
- Employers are required by law to make the exemption form available to their employees. A copy of the form can be found at www.cityofwilliamsport.org/government/treasurer.
- In the event you have no employees during the reporting period, file "0" on line 1 of the LST form, sign and return it.

**** Online filing now available. Please call our office or visit our website for more information. ****

PAYMENTS MUST INCLUDE EMPLOYEE BACKUP AND THE CORRECT PAYMENT COUPON.

**CHANGE/CORRECTION
 Correct Account Information**

Account Number Federal EIN#
 Name and Address of Business (change)

**LOCAL SERVICES TAX RETURN
 4th quarter - Due: Jan. 31st**

Account Number
 Federal EIN#
 Tax Year

Payable to:
City of Williamsport
 City Treasurer
 PO Box 1265
 Williamsport, PA 17703
**Please make a copy for
 your records and return
 this coupon with payment.**

I declare under penalty of law that the information contained herein is true and correct.

1. Number of employees or self-employed individuals.....
2. Amount of LST for current quarter.....
3. Penalty (5%).....
4. Interest (1/2% per month).....
6. Total tax, penalty, and interest paid this quarter.....

\$
\$
\$
\$
\$

NO STAPLES PLEASE

printed name

signature

phone

date

**CHANGE/CORRECTION
 Correct Account Information**

Account Number Federal EIN#
 Name and Address of Business (change)

**LOCAL SERVICES TAX RETURN
 3rd quarter - Due: Oct. 31st**

Account Number
 Federal EIN#
 Tax Year

Payable to:
City of Williamsport
 City Treasurer
 PO Box 1265
 Williamsport, PA 17703
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 this coupon with payment.**

I declare under penalty of law that the information contained herein is true and correct.

1. Number of employees or self-employed individuals.....
2. Amount of LST for current quarter.....
3. Penalty (5%).....
4. Interest (1/2% per month).....
6. Total tax, penalty, and interest paid this quarter.....

\$
\$
\$
\$
\$

NO STAPLES PLEASE

printed name

signature

phone

date

**CHANGE/CORRECTION
 Correct Account Information**

Account Number Federal EIN#
 Name and Address of Business (change)

**LOCAL SERVICES TAX RETURN
 2nd quarter - Due: July. 31st**

Account Number
 Federal EIN#
 Tax Year

Payable to:
City of Williamsport
 City Treasurer
 PO Box 1265
 Williamsport, PA 17703
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I declare under penalty of law that the information contained herein is true and correct.

1. Number of employees or self-employed individuals.....
2. Amount of LST for current quarter.....
3. Penalty (5%).....
4. Interest (1/2% per month).....
6. Total tax, penalty, and interest paid this quarter.....

\$
\$
\$
\$
\$

NO STAPLES PLEASE

printed name

signature

phone

date

**CHANGE/CORRECTION
 Correct Account Information**

Account Number Federal EIN#
 Name and Address of Business (change)

**LOCAL SERVICES TAX RETURN
 1st quarter - Due: April 30th**

Account Number
 Federal EIN#
 Tax Year

Payable to:
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 City Treasurer
 PO Box 1265
 Williamsport, PA 17703
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I declare under penalty of law that the information contained herein is true and correct.

1. Number of employees or self-employed individuals.....
2. Amount of LST for current quarter.....
3. Penalty (5%).....
4. Interest (1/2% per month).....
6. Total tax, penalty, and interest paid this quarter.....

\$
\$
\$
\$
\$

NO STAPLES PLEASE

printed name

signature

phone

date