LOCAL

the city of Lancaster
a city authentic

CITY OF LANCASTER
2015

CITY REVITALIZATION AND IMPROVEMENT ZONE
LOCAL TAX REPORT INSTRUCTIONS

The City of Lancaster has established a City Revitalization and Improvement Zone (CRIZ) in accordance with Act 52 of 2013. Selected state and local taxes collected from businesses working within the CRIZ will be used to fund projects approved by the Lancaster CRIZ Authority for various economic development projects within the CRIZ.

Pennsylvania law requires all businesses within the CRIZ or businesses working on a CRIZ Authority approved project to complete this report annually so that selected local taxes may be transferred to the CRIZ Fund established for the redevelopment projects.

All businesses listed on the master listing must complete the report on an annual basis and the report must be received by the City of Lancaster ***on or before June 15, 2016***, identifying the type and amount of all taxes remitted to the local tax collector during the previous calendar year **(January 1, 2015 through December 31, 2015)**. Please maintain evidence of timely filing. We strongly suggest sending by a traceable method, such as registered or certified mail.

Each business must use the schedules in this report to identify local taxes attributable to the location(s) within the CRIZ or the CRIZ Authority approved project. To determine taxes paid, the schedules require businesses to identify tax payments and tax refunds.

THE SCHEDULES MUST BE COMPLETED BASED ON PAYMENTS MADE AND REFUNDS RECEIVED IN CALENDAR YEAR 2015 (CASH BASIS PAYMENTS OR REFUNDS RECEIVED); REGARDLESS OF WHAT YEAR THEY ARE RELATED TO.

Refund payments issued by the local taxing authority as the result of an overpayment, the submission of an amended tax return or a successful petition for refund must be documented on each schedule within the Report.

NOTE: This form is for LOCAL tax remittances ONLY. DO NOT include STATE or FEDERAL tax remittances on this form. Report your STATE tax remittances ONLINE on the PA STATE website. Go to: http://www.revenue.state.pa.us/CRIZ for instructions on filing your STATE form.

This LOCAL completed report must be Mailed, Emailed, or Hand-Delivered

on or before June 15, 2016 to:

City of Lancaster
Treasury Office, Attn: Jill Rhinier
PO Box 1020
Lancaster, PA 17608-1020
CrizReports@cityoflancasterpa.com

Questions regarding the report may be directed to Jill Rhinier in the Treasury Office at:

(717) 735-3435

For more information on the Lancaster CRIZ, go to: www.cityoflancasterpa.com/business/criz

CITY OF LANCASTER - LOCAL CRIZ REPORTING
2015

CITY REVITALIZATION AND IMPROVEMENT ZONE ANNUAL CRIZ TAX REPORT
(Based on CASH BASIS payments made in 2015)

1. Business Information Calendar Year: _____2015_____

Legal Name:_____

Doing Business As (DBA)/Trade Name:_____

Locations within the CRIZ (or CRIZ Project Address): _____

Address 1: _____

Address 2: _____ _____ _____

City: _____ State: _____ ZIP Code:_____

Date business commenced operations in the CRIZ: _____

(If more than two CRIZ business locations or CRIZ Authority Approved Projects, please identify additional locations on a separate sheet.)

Did the business cease operations? Yes: _____ No:_____ If yes, date business ceased (mm/dd/yyyy) _____

Describe the type of business, principal product or service and parent company, if any:

_____

_____

How many employees are working within the CRIZ _____?

2. Business Tax Account Information

Federal Employer Identification Number: _____

Social Security Number (for businesses without employees): _____

CRIZ Business Registration Number:_____

Local Employer Withholding Account Number: _____

Contact Information
All questions concerning this report should be directed to the following contact:

Name: _____ Title: _____

Email Address: _____ Telephone: _____

3. Per Act 32, are you an employer that has elected to file a combined return? _____ (yes) _____ (no)
If yes, please identify the County with whom you are filing and the identity of the local tax collector.

County: _____ Tax Collector_____

CASH BASIS

CITY OF LANCASTER - LOCAL CRIZ REPORTING
2015

Entity Legal Name:	Federal Employer Identification # (EIN) or Social Security #:

BUSINESS(ES) WITH LOCATION(S) IN THE CRIZ

TAX TYPE	Local taxes paid by the business for ALL City of Lancaster location(s) in the 2015 CALENDAR YEAR (less cash basis refunds)	Local taxes paid and attributable to CRIZ LOCATION(S) within the City of Lancaster in the 2015 CALENDAR YEAR (less cash basis refunds)	
Earned Income Tax (EIT) **EIT** for Employees ***residing*** *in the City of Lancaster ONLY*	**TOTAL ↓**	**TOTAL ↓**	**CRIZ%=55% ↓**
Local Services Tax (LST) **LST** for Employees ***working*** *in City of Lancaster*	**TOTAL ↓**	**TOTAL ↓**	**CRIZ%=90.4% ↓**
Total Taxes remitted to the City of Lancaster attributable to **CRIZ BUSINESS LOCATION(S) →**			

CRIZ AUTHORITY APPROVED PROJECT(S)

TAX TYPE	Local taxes paid and attributable to the CRIZ AUTHORITY APPROVED PROJECT LOCATION(S) within the City of Lancaster in the 2015 CALENDAR YEAR (less cash basis refunds)	
Earned Income Tax (EIT) **EIT only** for those Employees ***working*** on a *CRIZ Authority Approved Project* **AND** who ***reside*** in the City of Lancaster	**TOTAL CRIZ LOCATIONS ↓**	**CRIZ % = 55% ↓**
Local Services Tax (LST) **LST** for Employees ***working*** on a *CRIZ Authority Approved Project*	**TOTAL ↓**	**CRIZ % =90.4% ↓**
Total Taxes remitted to the City of Lancaster attributable to **CRIZ AUTHORITY APPROVED PROJECTS →**		

Taxpayer Affirmation

"I hereby affirm under penalties prescribed by law that this report, including any accompanying schedules, has been examined by me, and to the best of my knowledge and belief is a true, correct and complete report."

Signature of authorized taxpayer: _____ Date of Submission: _____

Print taxpayer's name: _____

Preparer's signature if different from taxpayer: _____

Print preparer's name: _____

Preparer's email: _____Phone:_____