

Attached is the **FINAL RETURN** for The Borough of Hanover "**BUSINESS PRIVILEGE TAX**" for the year 2014. The due date is June 1, 2015. The tax is at the rate of two mills (.002).

1. LINE 3: BE SURE TO TAKE CREDIT FOR TAX PAID ON THE ESTIMATED FIRST RETURN.
2. Taxes must be paid on gross charges made by the taxpayer for services rendered, including both labor and any materials entering into or becoming component parts of the services performed and all service contracts.
3. Any businesses maintaining an office or establishment within the Borough must pay tax on all services, regardless of where the service is rendered. Any business maintaining NO office or establishment within the Borough must pay tax on those services rendered within the Borough, unless that office or establishment is located in a municipality which also has enacted a Business/Mercantile Privilege Tax and tax has already been paid on said service revenue/contracts.

PLEASE CONTACT THE BOROUGH OFFICE IF YOU HAVE ANY QUESTIONS AT:

THE BOROUGH OF HANOVER
(717) 637-3877

**BOROUGH OF HANOVER
BUSINESS PRIVILEGE TAX RETURN
(FINAL RETURN)
FOR THE YEAR 2014**

Name of Business _____
Business Location _____
Mailing Address _____
Nature of Business _____

Make Checks Payable to
**HANOVER BOROUGH TAX RECEIVER
44 FREDERICK STREET
HANOVER, PA 17331**

Social Security Number	Employer I.D. #

1. Total Gross volume of Business, including Cash or Credit transacted in the period beginning January 1, 2014 and ending December 31, 2014 \$ _____
2. Tax Due - Multiply amount off line by Two Mills (.002) \$ _____
3. Amount of Tax Paid on Estimated First Return \$ _____
4. Balance Due (Line 2 Less Line 3)
(If amount of Tax Paid on Estimated First Return is Greater Than Tax due, Enter Refund Here (Line 3 Less Line 2) \$ _____
5. After Due Date (June 30, 2015) Add the Following to Balance Due (Line 4)
 - A. Interest @ 1/2% Per Month \$ _____
 - B. Penalty @ 10% of Tax Due (Line 4) \$ _____
6. TOTAL AMOUNT DUE
(If Line 6 Amount Due is less than \$1.00, no payment is required)
(If Line 4, Refund is less than \$1.00 no refund will be made unless requested)
(However Final Return Must Be Filed with Tax Receiver)

IMPORTANT - INDICATE WHERE RECORDS WILL BE AVAILABLE FOR AUDIT OF THIS RETURN

Taxpayer - I certify that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return and in accordance with Ordinance No. 1675 as amended.

TAXPAYER SIGNATURE

DATE

WHITE COPY - *Return to:*
HANOVER BOROUGH TAX RECEIVER
44 FREDERICK STREET
HANOVER, PA 17331

DUE DATES: JUNE 1 , 2015

YELLOW COPY - TAXPAYERS COPY



York Office
1405 N. Duke St.
PO Box 15627
York, PA 17405-0156
Phone (717) 845-1584
Fax (717) 854-6376
<http://www.yatb.com>

Gettysburg Office
240 West Street
PO Box 4374
Gettysburg, PA 17325
Phone (717) 334-4000
Fax (717) 337-2565
email: info@yatb.com

July 30, 2015

TO: Employers Located Within Hanover Borough

RE: Change in Hanover Borough Business Privilege Tax Collection

Beginning with the September 2015 estimated filing for the Hanover Borough Business Privilege Tax, the York Adams Tax Bureau has been appointed as the collector for this tax. There is no change in the tax, tax rates or due dates, but tax filings and payments will no longer be sent to the Borough of Hanover. All future filings and business privilege tax payments should be directed to the following address:

**EMPLOYER SERVICES DEPARTMENT
YORK ADAMS TAX BUREAU
PO BOX 15627
YORK PA 17405**

The estimated tax filing is due September 30, 2015 and the final reconciliation tax filing is due June 30, 2016. The York Adams Tax Bureau will mail out estimated tax forms and instructions in the near future. Tax forms and instructions will also be available on our website at www.yatb.com.

Questions and inquiries may be directed to the Employer Services Department at 717-845-1584, option 2, or by email at employer@yatb.com.



YORK ADAMS TAX BUREAU
 York: 717-845-1584
 Fax: 717-854-6376 email: employer@yatb.com
 Information at www.yatb.com

**MERCANTILE AND BUSINESS
 PRIVILEGE TAX RETURN
 Estimated - Due Sept. 30, 2015**

THIS FORM MUST BE FILED WITH YOUR PAYMENT

DO NOT WRITE IN THIS SPACE

REPORT FOR TAX YEAR **20** _____

TAXING AUTHORITY:

MBP ACCOUNT NUMBER:		FEDERAL EIN:	
BUSINESS NAME AND MAILING ADDRESS:		BUSINESS LOCATION:	
ACKNOWLEDGMENT AND SIGNATURE: I DECLARE UNDER PENALTY OF LAW THAT THIS RETURN IS A TRUE AND COMPLETE STATEMENT TO THE BEST OF MY KNOWLEDGMENT AND BELIEF.		NATURE OF BUSINESS	
SIGNED _____		BUSINESS OWNER	
DATE: _____		OWNER PHONE NUMBER	
		TAX PREPARER	
		PREPARER PHONE NUMBER	

COMPUTATION OF VOLUME OF BUSINESS:

A. IF BUSINESS COMMENCED AFTER JANUARY 1 OF PRIOR CALENDAR YEAR, INDICATE STARTING DATE (MM/DD/YY):

MULTIPLY YOUR FIRST MONTH'S VOLUME OF BUSINESS BY TWELVE (12): \$ _____ X 12 = \$ _____ **A.**

B. IF BUSINESS COMMENCED IN CURRENT YEAR, MULTIPLY YOUR FIRST MONTH'S VOLUME OF BUSINESS BY THE REMAINING NUMBER OF MONTHS IN THE CURRENT YEAR INCLUDING FRACTIONS THEREOF FROM STARTING DATE TO DECEMBER 31. FILE TAX RETURN 40 DAYS FROM THE DATE OF COMMENCING SUCH BUSINESS:

\$ _____ X _____ = \$ _____ **B.**
FIRST MONTH'S VOLUME REMAINING # OF MONTHS INCLUDING FRACTIONS THEREOF

C. IF TEMPORARY OR SEASONAL, FILE RETURN 7 DAYS AFTER CLOSE OF BUSINESS:

STARTING DATE _____ COMPLETION DATE _____ \$ _____ **C.**

	REPORT ACTUAL GROSS OF BUSINESS	GROSS VOLUME OF BUSINESS	*EXEMPTION & EXCLUSIONS	TAXABLE AMOUNT	TAX RATE	AMOUNT OF TAX DUE		
1.	SERVICE, RENTALS					\$	1.	
2.	TOTAL TAX						\$	2.
3.	ADD INTEREST @ 1/2% PER MONTH OR FRACTION THEREOF FROM DATE DUE UNTIL PAID.						\$	3.
4.	AFTER SEPT 30 PENALTY OF 10%						\$	4.
5.	LICENSE/REGISTRATION FEE IF APPLICABLE THIS TAXING AUTHORITY						\$ -0-	5.
6.	COST OF COLLECTION (LATE FEE)						\$	6.
7.	TOTAL (ENTER TOTAL OF LINES 2-6) MAKE CHECKS PAYABLE TO: YATB						\$	7.

*LIST EXEMPTIONS HERE

Make Checks payable to: YATB

There will be a **\$25.00** fee for returned payments & checks.

TOTAL	\$
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REMIT TO:
 York Adams Tax Bureau
 1405 North Duke Street
 PO Box 15627
 York, PA 17405

← peel label and apply to your return envelope

Mercantile and Business Privilege Tax

The completed form with payment must be remitted to the York Adams Tax Bureau. Please contact the Employer Services Department with any questions via email at employer@yatb.com or by phone at 717-845-1584, option 2.

INSTRUCTIONS

1. Each person, partnership, association, or corporation engaged in a business providing a service within the Borough is liable for filing the business privilege tax returns and paying all tax which is due. Service gross receipts include all labor and materials that are a part of the service.
2. Filings with payments must be remitted by the due dates. The estimated return is due on or before September 30. The final return is due on or before June 30. Failure to pay by the due dates will result in penalty and interest charges being charged.
3. A copy of the appropriate properly completed IRS and/or PA schedule or schedules must be enclosed with your final return. An accounting of your receipts is also requested if the figure reported on the filing differs from the receipts amount listed on the schedule.
4. If business commenced less than one full year prior to the beginning of the tax year gross receipts are determined by multiplying by 12 the first full months receipts.
5. If business commenced after the beginning of the tax year the gross receipts are determined by multiplying the first month's receipts by the number of months remaining in the tax year.
6. If you require a receipt of your payment please include a self-addressed stamped envelope with your filing(s).

Remittance Address:

EMPLOYER SERVICES
YORK ADAMS TAX BUREAU
PO BOX 15627
YORK PA 17405