2024

WAGE TAX REFUND PETITION SALARY/HOURLY EMPLOYEES

(Not to be used by Commissioned Employees)

Read the instructions for both the Employer as well as the Employee on the reverse side of this form prior to completing this petition. Print or type all information. The completed petition must include:

W-2 showing Federal, State, Medicare and Local wages

Signature of Employee and Employer, Employer Certification template and Location sheet

PA Schedule UE if claiming expenses on Line 2E. If PA	Schedule UE ha	s an entry	on (Line	15, s	subn	nit a I	oreak	do	wn o	f th	hose) e)	xper	ses	3 .					
EMPLOYEE'S NAME		SOCIAL SEC				ECURITY NUMBER							DAYTIME TELEPHONE NUMBER								
HOME ADDRESS		OCCUPATION																			
CITY STATE			IF PARTIAL YEAR, PROV							DA	TES:										
CITY STATE ZIP CODE						From							To								
EMPLOYER						EMPI	OYER	IDENT	IFIC	CATION	1 NI	UMBE	:R (E	EIN)							
PLACE OF EMPLOYMENT				COLUMN A January 1, 2024 to June 30, 2024					4 J	<u>COLUMN B</u> July 1, 2024 to December 31, 2024											
1. Gross Compensation per W-2				.00						00	.00										
A. Non-Taxable Stock Options included in Line 1 (Must reflect on W-2)				.00						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)				182 Days/1456 Hours						ırs	184 Days/1472 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 reverse.					Days/Hours							Days/Hours									
D. Number of actual Days/Hours worked outside of Philadelphia in Line 2C. A list of dates and locations when you worked outside of Philadelphia, verified and signed by your employer, is required to be attached. Also provide a copy of Telework Agreement if applicable.				Days/Hours						ırs	Days/Hou										
 E. Percentage of time worked outside of Philadelphia. Divide Line 2D by Line 2C.and round the resulting percentage to 4 decimal places. 						•				아				•				ofo			
F. Non-taxable compensation earned outside of Philadelphia (Line 1B times Line 2E)			.00							0	.00										
G. (i) Total non-reimbursed business expenses allowable under Income Tax Regulation Section 204. Please submit Pennsylvania Schedule UE			.00							0	.00										
(ii) Multiply amount on Line G (i) by the percentage on Line 2E			.00							0	.00										
(iii) Deductible non-reimbursed employee business expenses. Subtract Line G (ii) from Line G (i)				.00						0	.00										
H. Non-taxable income and/or deductible employee business expenses Add Line 2F and Line 2G (iii)			.00						0	.00											
3. Net Taxable compensation (Line 1B minus Line 2H)			.00							0	.00										
 TAX <u>Resident of Philadelphia</u> multiply Line 3, Column A by .037500 and Column B by .037500. <u>Philadelphia</u> Line 3, Column A by .034400, and Column B by .034400. 				.00							.00										
5. TOTAL TAX DUE (Add Line 4, Column A and Line 4, Column B.)											.00										
6. Wage tax withheld per W-2										.00											
7. REFUND REQUESTED (Line 6 minus Line 5)														.00	1						
	EMPLOYER CE	RTIFICAT	ION																		
I certify that the facts shown above supporting employee's or signatories should be familiar with employee's time and atte through 404 requires that the employer withhold and allocate and on behalf of the employee, requests the refund.	ndance, as well	as applica	able	Wage	Ta	x Re	gulat	ions.	Inc	come	Τá	ax R	Regi	ulatio	ons	Sec	tion	401			
AUTHORIZED OFFICIAL SIGNATURE (Signature must be clear and legible.)	PRINTED NAME	_								DAYTIME TELEPHONE NUMBER											
	EMPLOYEE CERTIFICATION																				
I HEREBY CERTIFY that the statements contained herein and belief. I understand that if I knowingly make any false statemen	in any supportin	g schedule	e or e	exhibi												edge	and				
EMPLOYEE'S SIGNATURE (Signature must be clear and legible.)													DATE								
											_		—								

ELECTRONIC FILING NOW AVAILABLE ON THE PHILADELPHIA TAX CENTER – You can now file this Wage Tax petition at **tax-service.phila.gov**. You do not need a username and password to file a Wage Tax petition on the Tax Center, simply select "Request a Wage Tax refund" from the front page. Although paper forms are available, we encourage you to file through the Tax Center to avoid delays.

INSTRUCTIONS FOR FILING WAGE TAX REFUND PETITION (Salary and Hourly Employees Only)

You must attach the applicable W-2 indicating Federal, Medicare, State and Local wages to the petition. A separate petition must be filed for each W-2 issued by employers that may have over withheld Wage Tax. Please attach letter from employer, on company letterhead with the dates or time period you were REQUIRED to work remotely. Find templates for the employer letter and time and date worksheet online at **phila.gov/revenue.**

Eligibility for Wage Tax refunds - For nonresidents, Philadelphia uses a "requirement of employment" test to determine whether Wage Tax withholding is required. This applies to all non-residents whose base of operations is the employer's location in Philadelphia. Under this test, a nonresident is exempt from the Wage Tax for the days when the employer *requires* him or her to perform a job outside Philadelphia. **A non-resident who works remotely for the sake of his or her convenience is not exempt from the Wage Tax, even with the employer's authorization**.

Taxability of Bonuses, Awards, and other similar payments - Bonuses, awards, leave time (vacation, holiday compensation), and incentive payments are subject to Philadelphia Wage Tax. With respect to a non-resident employee working partly outside Philadelphia, the taxpayer can exclude the percentage of time worked outside Philadelphia when the compensation was historically earned.

Example:

A non-resident employee of a Philadelphia-based company was required to work remotely and only worked in the Philadelphia office for 10% of his or her 2024 workdays. To be paid a yearly bonus for the year 2024, the employee must be employed on March 31, 2025, the date the bonuses are paid. Ten percent (10%) of the employee's bonus is subject to the 2024 Wage Tax because the compensation is attributable to the time, he or she worked in Philadelphia during 2024.

2024 TAX RATES

Resident Rates:

January 1, 2024 to June 30, 2024 = 3.7500% (.037500) July 1, 2024 to December 31, 2024 = 3.7500% (.037500)

Non-Resident Rates:

January 1, 2024 to June 30, 2024 = 3.4400% (.034400)

July 1, 2024 to December 31, 2024 = 3.4400% (.034400)

Statute of Limitations - any claim for refund must be filed within three (3) years from the date the tax was paid, or due, whichever date is later.

Only non-resident employees are eligible for a refund based on work performed outside of Philadelphia. Resident employees are taxable whether working in or out of Philadelphia.

Both the employer and employee must sign the petition for refund. A petition for refund of "erroneously withheld wage tax from an employee must be made by the employer for and on behalf of the employee" (General Regulations Section 306 (2)). The authorizing official signing this form should do so only if they know of the employee's whereabouts as they relate to this petition, as well as an understanding of how this information applies to Sections 401, 402, 403, 404, 405 and 407 of the Philadelphia Income Tax Regulations. These regulations are available at **phila.gov/revenue.**

Partial Year: In the context of this form, a partial year is one in which your liability or status for Wage Tax changes. It could be the result of becoming a resident, starting a new job, terminating a job, etc. In any of these situations, you need to indicate the period for which you were liable for Wage Tax with a particular employer.

WAGE TAX REFUND PETITION LINE INSTRUCTIONS

- Line 1: Enter your gross compensation (this will generally be the highest compensation figure on Form W-2)
- Line 1A: Enter non-taxable stock options which reflects the amount shown on Form W2 box 14 Code V
- Line 1B: Subtract Line 1A from Line 1 to determine adjusted gross compensation
- Line 2A: Enter total sales
- Line 2B: Enter total sales outside of Philadelphia
- Line 2C: Divide Line 2B by Line 2A
- Line 2D: Determine the amount of commissions earned outside of Philadelphia. Multiply Line 1B by 2C
- Line 2E (i): Enter total non-reimbursed business expenses allowable
- Line 3: This amount of your compensation is subject to Philadelphia Wage Tax
- **Line 4:** Calculate the tax for January June AND/OR July December by the rates indicated on Line 4 of the Refund Petition
- Line 5: Combine the tax due from Line 4, column A and Line 4, column B
- Line 6: Insert Phila Local wage tax withheld on box 19 of form W2
- **Line 7:** If Line 6 is higher than Line 5 the difference is your refund, If Line 6 is less than 5 that will be your balance due to the city of Phila and you would be subject to file an Earnings tax return

Mail completed petition to:

CITY OF PHILADELPHIA DEPARTMENT OF REVENUE P.O. BOX 53360 PHILADELPHIA, PA 19105

For further information you may reach the Revenue Department Refund Unit at:

(215) 686-6574, 6575 or 6578 Fax: (215) 686-6228

Send e-mail to refund.unit@phila.gov

Find previous year forms and instructions us on the web at: **phila.gov/revenue.**