

CITY OF PHILADELPHIA
2008 NET PROFITS TAX
 DUE DATE: APRIL 15, 2009



2008 NPT

CORPORATIONS ARE NOT SUBJECT TO THIS TAX

Print Taxpayer Name and Address _____

City Account Number

____ - ____ - ____ - ____ - ____

Federal Identification Number

____ - ____ - ____ - ____ - ____

Social Security Number

____ - ____ - ____ - ____ - ____

If this is an amended return place an "X" here:

YOU MUST USE THE CHANGE FORM TO REPORT A CHANGE OF ADDRESS!

Percentage from Page 3, Worksheet D, %
 Line 3, if applicable.

If your business terminated in 2008, enter the termination date **AND** file a CHANGE FORM. →

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If the amount on Line 1 or Line 3 indicates a loss, darken the circle. ↘

1. Resident taxable income or loss from Page 2, Worksheet A, Line 4.....	1.	<input type="radio"/>	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
2. Line 1 X .0398. If Line 1 is a loss, enter "0"	2.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
3. Non-Resident taxable income or loss from Page 2, Worksheet B, Line 6.....	3.	<input type="radio"/>	<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
4. Line 3 X .035392. If Line 3 is a loss, enter "0"	4.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
5. Tax Due (Line 2 plus Line 4).....	5.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
6a. 60% Business Privilege Tax credit from Page 3, Worksheet K, Line 4.....	6a.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
6b. Estimated payments and other credits from Page 3, Worksheet E, Line 4.....	6b.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
6c. Total payments and credits. (Line 6a plus Line 6b).....	6c.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
7. Net Tax Due (Line 5 less Line 6c). If Line 6c is greater than Line 5, enter the difference on Line 10.....	7.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
8. Interest and Penalty Multiply Line 7 by the cumulative percentage from the chart on the Information Sheet.....	8.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
9. TOTAL DUE including Interest and Penalty (Line 7 plus Line 8).....	9.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
<u>To ensure proper credit to your account you must use the preprinted coupon to remit your payment!</u>											
10. Tax Overpaid. If Line 6c is greater than Line 5, enter difference here and on the Estimated Tax Coupon (ENP-1), Line 2.....	10.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
11. Enter 50% of Page 2, Worksheet C, Line 3. Do not use this line to remit estimated payments	11.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
OVERPAYMENT OPTIONS If Line 10 is greater than Line 11, enter the amount to be:											
12a. Refunded. Do not file a separate Refund Petition	12a.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
12b. Applied, up to the tax due, to the 2008 Business Privilege Tax Return.....	12b.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00
12c. Applied to the 2009 Net Profits Tax.....	12c.		<input type="text"/>	,	<input type="text"/>	,	<input type="text"/>	.	<input type="text"/>	<input type="text"/>	.00

Under penalties of perjury, as set forth in 18 PA C.S. §§ 4902-4903 as amended, I swear that I have reviewed this return and accompanying statements and schedules, and to the best of my knowledge and belief, they are true and complete.

Taxpayer Signature _____ Date _____ Phone # _____

Preparer Signature _____ Date _____ Phone # _____