CITY OF PHILADELPHIA
NET PROFITS TAX RETURN

DUE BY APRIL 15, 2005

MAKE NO MARKS IN THIS AREA

N P 0 4

DO NOT STAPLE THIS RETURN

2004 NPT

CITY ACCOUNT NUMBER

Always enter your account number

FEDERAL IDENTIFICATION NUMBER

-

SOCIAL SECURITY NUMBER

- -

TAXPAYER NAME & ADDRESS PLACE LABEL HERE

Use the Change Form to indicate a change of address. Refer to Instruction Sheet I.

If your business terminated in 2004, enter the termination date here:

m m - d d - y y y y

If applicable, enter percentage from Page 3, Worksheet D, Line 3..... %

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

CORPORATIONS ARE NOT SUBJECT TO THIS TAX. **Darken box to indicate a net loss.**

1. Residents Taxable Income or loss from Page 2, Worksheet A, Line 4.....1. , , .00
2. Line 1 X .044625. **Do not calculate and enter an amount if Line 1 is a loss!**.....2. , , .00
3. Non-Residents Taxable Income or loss from Page 2, Worksheet B, Line 6.....3. , , .00
4. Line 3 X .038801. **Do not calculate and enter an amount if Line 3 is a loss!**.....4. , , .00
5. Total Tax Due (Line 2 plus Line 4).....5. , , .00

6a. 60% Business Privilege Tax credit from Page 3, Worksheet K, Line 4.....6a. , , .00

6b. Estimated payments and other credits from Page 3, Worksheet E, Line 4.....6b. , , .00

6c. Total payments and credits (Line 6a plus Line 6b).....6c. , , .00

7. Amount of Tax Due (Line 5 less Line 6c); if Line 6c is greater than Line 5 enter difference on Line 10.....7. , , .00
8. Interest and Penalty (Cumulative % from Instruction Sheet III multiplied by Line 7).....8. , , .00
9. **TOTAL DUE** including Interest and Penalty (Line 7 plus Line 8). **Make check payable to: "City of Philadelphia"**.....9. , , .00
10. Tax Overpaid. If Line 6c is greater than Line 5, enter difference here and on the Estimated Tax Coupon (ENP-1), Page 8, Line 2.....10. , , .00
11. Enter 50% of Page 2, Worksheet C, Line 3. **This line is <u>not</u> used to remit estimated payments**.....11. , , .00
12. If Line 10 is greater than Line 11, enter the difference as the:
    A. Amount to be refunded to the taxpayer. **Do not file a separate Refund Petition**.....12A. , , .00
    B. Amount of overpayment to be applied, up to the tax due, to the 2004 Business Privilege Tax Return.....12B. , , .00
    C. Amount of overpayment to be applied to the 2005 Net Profits Tax.....12C. , , .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 #_____

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