

**City of Philadelphia Department of Revenue**  
**2004 Net Profits Tax Return**  
**Design Specifications**

All variable data shall be in 12 point Courier font.

All money fields should be numeric only, right justified and rounded to the nearest dollar. If the field is zero, enter "0" or leave blank. Money fields will not contain punctuation. Fields designated as a decimal will contain a decimal point (.). Any line indicating a loss must have an "X" placed in the box at the beginning of that line. Brackets, the minus sign or the work "loss" must not be used. Date should use the "mm-dd-yyyy" format.

Each page has a registration mark in each of the four corners. The boxes measure 3/16 of an inch square.

## Net Profits Tax Return

The Form ID Number is NP04

Field	# of chars.	X/Y Start Position
• Top Left Reg. Mark		6/4
• Top Right Reg. Mark		79/4
• Bottom Left Reg. Mark		6/61
• Bottom Right Reg. Mark		79/61
• Form ID Number	4	43/5 to 46/5
• Name & Address Line 1	35	8/10 to 42/10
• Name & Address Line 2	35	8/11 to 42/11
• Name & Address Line 3	35	8/12 to 42/12
• Name & Address Line 4	35	8/13 to 42/13
• City Account Number	7	63/9 to 69/9
• Federal Identification Number	9	63/12 to 71/12
• Social Security Number	9	63/15 to 71/15
• Percentage	3	73/17 to 75/17
• Termination Date	10	29/18 to 38/18
• Amended Return Check Box	1	78/20 to 78/20
• Line 1 Check Box	1	61/23 to 61/23
• Line 1	7	68/23 to 74/23
• Line 2	7	68/25 to 74/25
• Line 3 Check Box	1	61/27 to 61/27
• Line 3	7	68/27 to 74/27
• Line 4	7	68/29 to 74/29
• Line 5	7	68/31 to 74/31
• Line 6a	7	68/33 to 74/33
• Line 6b	7	68/35 to 74/35
• Line 6c	7	68/37 to 74/37
• Line 7	7	68/39 to 74/39
• Line 8	7	68/41 to 74/41
• Line 9	7	68/43 to 74/43
• Line 10	7	68/45 to 74/45
• Line 11	7	68/47 to 74/47
• Line 12a	7	68/49 to 74/49
• Line 12b	7	68/51 to 74/51
• Line 12c	7	68/53 to 74/53

CITY OF PHILADELPHIA  
NET PROFITS TAX RETURN

MAKE NO MARKS IN THIS AREA  
NP04

2004 NPT

DUE DATE APRIL 15, 2005

CORPORATIONS ARE NOT SUBJECT TO THIS TAX.

TAXPAYER NAME & ADDRESS

CITY ACCOUNT NUMBER

FEDERAL IDENTIFICATION NUMBER

SOCIAL SECURITY NUMBER

Use the Change Form to report an address change.

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

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

If Line 1 or 3 is a Loss, place an "X" in the box.

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

1. Residents Taxable Income or loss from Page 2, Worksheet A, Line 4.....	1.	<input type="checkbox"/>	00
2. Line 1 X .044625.....	2.		00
3. Non-Residents Taxable Income or loss from Page 2, Worksheet B, Line 6.....	3.	<input type="checkbox"/>	00
4. Line 3 X .038801.....	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:			00
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 # \_\_\_\_\_

**CITY OF PHILADELPHIA  
NET PROFITS TAX RETURN**

MAKE NO MARKS IN THIS AREA  
NP04

**2004 NPT**

**DUE DATE APRIL 15, 2005**

**CORPORATIONS ARE NOT SUBJECT TO THIS TAX.**

TAXPAYER NAME & ADDRESS

Name and address.....	Line 1
Name and address.....	Line 2
Name and address.....	Line 3
Name and address.....	Line 4

CITY ACCOUNT NUMBER  
7171717

FEDERAL IDENTIFICATION NUMBER  
99999999

SOCIAL SECURITY NUMBER  
88888888

Use the Change Form to report an address change.

If your business terminated in 2004, mm-dd-yyyy  
enter the termination date here:

If applicable, enter percentage from 100 %  
Page 3, Worksheet D, Line 3.....

If Line 1 or 3 is a Loss, place an "X" in the box.

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

1. Residents Taxable Income or loss from Page 2, Worksheet A, Line 4.....	1.	<input checked="" type="checkbox"/>	1111111	00
2. Line 1 X .044625.....	2.		2222222	00
3. Non-Residents Taxable Income or loss from Page 2, Worksheet B, Line 6.....	3.	<input checked="" type="checkbox"/>	3333333	00
4. Line 3 X .038801.....	4.		4444444	00
5. Total Tax Due (Line 2 plus Line 4).....	5.		5555555	00
6a. 60% Business Privilege Tax credit from Page 3, Worksheet K, Line 4.....	6a.		6666661	00
6b. Estimated payments and other credits from Page 3, Worksheet E, Line 4.....	6b.		6666662	00
6c. Total payments and credits (Line 6a plus Line 6b).....	6c.		6666663	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.		7777777	00
8. Interest and Penalty (Cumulative % from Instruction Sheet III multiplied by Line 7).....	8.		8888888	00
9. <b>TOTAL DUE</b> including Interest and Penalty (Line 7 plus Line 8). <b>Make check payable to: "City of Philadelphia"</b> .....	9.		9999999	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.		1010101	00
11. Enter 50% of Page 2, Worksheet C, Line 3. <b>This line is not used to remit estimated payments</b> .....	11.		1111111	00
12. If Line 10 is greater than Line 11, enter the difference as the:				
A. Amount to be refunded to the taxpayer. <b>Do not file a separate Refund Petition</b> .....	12A.		1212121	00
B. Amount of overpayment to be applied up to the tax due to the 2004 Business Privilege Tax Return.....	12B.		1212122	00
C. Amount of overpayment to be applied to the 2005 Net Profits Tax.....	12C.		1212123	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 # \_\_\_\_\_