This return is intended for itinerant taxpayers who do not conduct regular repeated business activity in the City and who have obtained a temporary Commercial Activity License from the Department of Licenses and Inspections. If you conduct regular repeat business activity within the City, you should obtain or already have a regular Commercial Activity License and file using the normal Business Income & Receipts and Net Profits returns, as applicable.

All vendors must complete lines 1 through 10 and line 15. If you are unincorporated, also complete lines 11 through 14. Residents and non-residents of Philadelphia have different tax rates. Use the appropriate rate on line 12. For questions concerning this form call 215-686-6434.

<table>
<thead>
<tr>
<th>TAXPAYER'S NAME</th>
<th>EVENT NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAILING ADDRESS</td>
<td>CITY</td>
</tr>
<tr>
<td>BUSINESS ADDRESS (NUMBER AND STREET. DO NOT USE P.O. BOX NUMBERS.)</td>
<td>CITY</td>
</tr>
<tr>
<td>BUSINESS TELEPHONE NUMBER</td>
<td>HOME TELEPHONE NUMBER</td>
</tr>
</tbody>
</table>

### Business Income & Receipts Tax from Trade Show Activity

1. Total Gross Receipts from trade show activity..........................1.
2. Tax Due on Gross Receipts from event (line 1 times .001415)........2.
3. Total Gross Receipts from line 1.............................................3.
5. Payroll - For Event Only..........................................................5.
6. Other Expenses - For Event Only.............................................6.
7. Total Expenses (add lines 4, 5 and 6)......................................7.
8. Net taxable income from event (line 3 minus line 7)....................8.
9. Tax Due on Net Income from event (line 8 times .0645).............9.
10. Total Business Income & Receipts Tax Due (line 2 plus line 9)....10.

### Net Profits Tax from Trade Show Activity

11. Net taxable income from event (amount on line 8).....................11.
12. **Residents** multiply line 11 by .039280. **Non-residents** multiply line 11 by .034985........12.
13. Business Income & Receipts Tax Credit (enter 60% of line 9)......13.
15. Total Tax Due (line 10 plus line 14). **Make check payable to "City of Philadelphia"** 15.

I hereby certify that the information contained herein is true, correct and complete to the best of my knowledge.

Signature ____________________________ Date ________________

Mail completed return and payment to:

City of Philadelphia
Department of Revenue
Exception Processing Unit
Municipal Services Building, Concourse Level
1401 John F. Kennedy Boulevard
Philadelphia, PA  19102

www.phila.gov/revenue