CITY OF PHILADELPHIA
DEPARTMENT OF REVENUE
Business Tax Return
For Use by Trade Show Vendors

Due Date: *No later than 30 days from final date of show*

City Account Number

Federal EIN or SSN

Tax Year
2011

This return is intended for itinerant taxpayers who do not conduct regular repeated business activity in the City and who have obtained a temporary *Business Privilege 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 Business Privilege License and file using the normal Business Privilege 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.

TAXPAYER'S NAME	EVENT NAME		

MAILING ADDRESS	CITY	STATE	ZIP CODE

BUSINESS ADDRESS *(NUMBER AND STREET. DO NOT USE P.O. BOX NUMBERS.)*	CITY	STATE	ZIP CODE

BUSINESS TELEPHONE NUMBER	HOME TELEPHONE NUMBER	FAX NUMBER	E-MAIL ADDRESS

Business Privilege Tax from Trade Show Activity

1. Total Gross Receipts from trade show activity..1.   ,   . 0 0

2. **Tax Due on Gross Receipts** from event (line 1 times .001415)....................................2.   ,   . 0 0

3. Total Gross Receipts from line 1..3.   ,   . 0 0

4. Cost of goods sold...4.   ,   . 0 0

5. Payroll - For Event Only...5.   ,   . 0 0

6. Other Expenses - For Event Only..6.   ,   . 0 0

7. Total Expenses (add lines 4, 5 and 6)...7.   ,   . 0 0

8. Net taxable income from event (line 3 minus line 7)..8.   ,   . 0 0

9. **Tax Due on Net Income** from event (line 8 times .0645)..9.   ,   . 0 0

10. **Total Business Privilege Tax Due** (line 2 plus line 9)..10.   ,   . 0 0

Net Profits Tax from Trade Show Activity

11. Net taxable income from event (amount on line 8)..11.   ,   . 0 0

12. **Residents** multiply line 11 by .039280. **Non-residents** multiply line 11 by .034985..................12.   ,   . 0 0

13. Business Privilege Tax Credit (enter 60% of line 9)..13.   ,   . 0 0

14. **Net Profits Tax Due** (line 12 minus line 13)..14.   ,   . 0 0

15. **Total Tax Due** (line 10 plus line 14). **Make check payable to "City of Philadelphia"**...............15.   ,   . 0 0

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

Trade Show Vendor Wrksht. 11-29-2012