



CITY OF PHILADELPHIA
2016 NET PROFITS TAX



2016 NPT
DUE DATE: APRIL 18, 2017

CORPORATIONS ARE NOT SUBJECT TO THIS TAX
PROOF OF PRO RATA SHARE MUST BE ATTACHED (if applicable)

Taxpayer Name and Address

City Account Number

EIN

SSN

Taxpayer E-mail Address

If this is a change of address, check this box:
and file a Change Form.

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

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

If your business terminated in 2016, enter the termination date AND file a CHANGE

mm-dd-yyyy

IF YOU ARE NOT ELIGIBLE FOR PA 40 SCHEDULE SP, YOU ARE NOT ELIGIBLE FOR
INCOME-BASED TAXATION AND ARE NOT ELIGIBLE FOR LINES 3-4 OR LINES 8-9.

Place "X" in box to indicate a loss.

Table with 10 columns: Line number, Description, and Amount. Includes lines 1 through 19c for tax calculations and overpayment options.

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 #