

TOWNSHIP OF LOWER MERION
 MBP TAX COLLECTOR
 75 E. LANCASTER AVENUE
 ARDMORE, PA 19003-2376

Self Calculating PDF form available at
 www.lowermerion.org
 EMAIL: BusinessTax@lowermerion.org

2015

BUSINESS PRIVILEGE AND MERCANTILE TAX RETURN

| | |
|----------------------------------|---|
| ACCOUNT NUMBER | RETURN DUE: April 18, 2016 |
| TAXPAYER NAME AND ADDRESS | <ul style="list-style-type: none"> ➤ ROUND numbers to the nearest whole dollar ➤ READ instructions before completing ➤ ATTACH required federal tax return ➤ ATTACH state/local returns if excluding receipts ➤ SIGN and date your return and make checks payable to Treasurer, Township of Lower Merion |
| | <input type="checkbox"/> AMENDED <input type="checkbox"/> BUSINESS CLOSED IN 2015 Enter Date: _____ |

BUSINESS PRIVILEGE TAX (Enter receipts from services in this section)

| | | |
|---|----|---------------------------------|
| 1. TOTAL 2015 GROSS RECEIPTS: (MUST attach federal return or other required documentation - SEE INSTRUCTIONS) | 1 | .00 |
| 2. EXCLUSIONS -DESCRIPTION: _____ (MUST complete description and attach required documentation - SEE INSTRUCTIONS) | 2 | .00 |
| 3. TAXABLE GROSS RECEIPTS (Line 1 minus Line 2) | 3 | .00 |
| 4. TAX DUE (Line 3 X .0015) | 4 | .00 |
| 5. 2016 ESTIMATED TAX DUE PAYMENT (Must equal line 4) | 5 | .00 |
| 6. TOTAL BUSINESS PRIVILEGE TAX DUE (Line 4 plus Line 5) | 6 | .00 |
| 7. PAYMENTS - Enter 2015 Estimated Tax/Extension payments | 7(| .00) |
| 8. TOTAL BUSINESS PRIVILEGE TAX DUE (Line 6 minus 7) ** If Credit, check box next to field ** | 8 | .00 |
| | | Credit <input type="checkbox"/> |

MERCANTILE TAX (Enter receipts from retail or wholesale activities only)

| | | |
|---|-----|---------------------------------|
| 9. TOTAL 2015 RETAIL/WHOLESALE GROSS RECEIPTS (See instructions) (MUST attach federal return or other required documentation - SEE INSTRUCTIONS) | 9 | .00 |
| 10. EXCLUSIONS - Description: _____ (MUST complete description and attach required documentation - SEE INSTRUCTIONS) | 10 | .00 |
| 11. TAXABLE GROSS RECEIPTS (Line 9 minus Line 10) | 11 | .00 |
| 12. TAX DUE (Line 11 X .001) | 12 | .00 |
| 13. 2016 ESTIMATED TAX PAYMENT (Must equal line 12) | 13 | .00 |
| 14. TOTAL MERCANTILE TAX DUE (Line 12 plus Line 13) | 14 | .00 |
| 15. PAYMENTS - Enter 2015 Estimated Tax/Extension payments | 15(| .00) |
| 16. TOTAL MERCANTILE TAX DUE (Line 14 minus Line 15) ** If Credit, check box next to field ** | 16 | .00 |
| | | Credit <input type="checkbox"/> |
| 17. TOTAL TAX DUE (ADD lines 8, 16) ** If Credit, check box next to field ** | 17 | .00 |
| | | Credit <input type="checkbox"/> |

PENALTY AND INTEREST - must be completed if return postmarked or filed after due date and Line 17 shows a balance due

| | | |
|---|----|-----|
| 18. Penalty (Line 17 X .10) | 18 | .00 |
| 19. Interest (Line 17 X .015 X# of Months Late) | 19 | .00 |
| 20. TOTAL TAX, PENALTY AND INTEREST DUE (Add Lines 17, 18 and 19) If Line 20 is a credit, please check one: <input type="checkbox"/> REFUND <input type="checkbox"/> CREDIT NEXT YEAR | 20 | .00 |

I DECLARE UNDER PENALTY OF LAW THAT ALL STATEMENTS MADE HEREIN AND/OR IN SUPPORTING SCHEDULES ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

| | | | |
|---|-------------|--|-------------|
| Print Name (Owner or Authorized Person) | Telephone # | Print Name of Person Preparing Return (if other than taxpayer) | Telephone # |
| Signature (Owner or Authorized Person) | Date | Address of person preparing if (other than taxpayer) | Date |