

READ INSTRUCTIONS ON THE BACK BEFORE COMPLETING FORM

20 TOWNSHIP OF NORTH COVENTRY

MERCANTILE TAX RETURN

FINAL RETURN FOR CALENDAR YEAR ENDED DECEMBER 31, 20
ESTIMATED RETURN FOR CALENDAR YEAR ENDED DECEMBER 31, 20
Due Date April 15, 20

OFFICIAL USE ONLY

DATE REC'D _____ AMT REC'D _____
CHECK NO _____ BATCH NO _____

BUSINESS ACCOUNT NUMBER:

EIN/SSN:

BUSINESS LOCATION:

DID YOU TERMINATE / MOVE THIS BUSINESS

IF MOVED, WHERE?

YES NO MOVED DATE:

NON-PROFIT MANUFACTURER

ENTER WHOLE DOLLAR AMOUNTS ONLY

A return must be filed even if you have no gross receipts

DOLLARS

NO
CENTS

1. Sales or Gross Receipts (January to December only)

1. _____ 00

2. Exclusions (Must attach written proof)

2. _____ 00

3. Taxable Gross Receipts (Line 1 Less Line 2)

3. _____ 00

FINAL RETURN FOR YEAR ENDED DECEMBER 31, 20

RECEIPTS FROM LINE ABOVE

TAX COMPUTATIONS

4. Wholesale

4. _____ x .0005 4. _____ 00

5. Retail

5. _____ x .00075 5. _____ 00

6. Service

6. _____ N/A 6. XX XX 00

7. Rental / Other Income

7. _____ N/A 7. XX XX 00

8. Total (add Lines 4, 5, 6, & 7)

8. _____ 8. _____ 00

9. Deduct 20 Estimated Tax (Paid with 20 Return)

9. _____ 00

10. Total Tax Due, or Credit (Line 8 Less Line 9)

10. _____ 00

ESTIMATED TAX RETURN FOR YEAR ENDING DECEMBER 31, 20

11. 20 Estimated Tax (Must use amount shown on Line 8)

11. _____ 00

TOTAL TAX DUE IF PAID BY APRIL 15, 20

12. Add Line 10 and Line 11

12. _____ 00

PENALTY AND INTEREST IF TAX PAID AFTER APRIL 15, 20

13. Add: 10% Penalty if paid after April 15, 20 (multiply Line 12 x 10%)

13. _____ 00

14. Add: 1% Interest per month or part thereof (multiply Line 12 x 1% x No. of months)

14. _____ 00

15. TOTAL TAX, PENALTY AND INTEREST (Add Lines 12,13, & 14)

15. _____ 00

LICENSE FEE

16. Annual Business License Fee (separate License due for each location, \$8 per location)

16. 8 x ____ = _____ 00

17. Total Amount Due (Add Lines 15 & 16)

17. _____ 00

Any Work Papers containing calculations used to determine Gross Receipts and copies of Federal Returns shall be attached to this return.

Tax return will not be considered complete unless such documents are attached.

Make Check Payable to: **NORTH COVENTRY TOWNSHIP**

Mail Return and Payment to: **TRI-STATE FINANCIAL GROUP**

SEND ORIGINAL WITH PAYMENT - MAKE A COPY FOR YOUR RECORDS

PO BOX 38

declare under penalty of law that all statements made here and/or in supporting schedules are true, correct and complete to best of knowledge and belief.

BRIDGEPORT, PA 19405

610-270-9520

Print Name	Telephone Number
Signature	Date
Signature of Person Preparing Return (if other than taxpayer)	Date
Address of Preparer	Telephone Number

"As required by Pennsylvania law, North Coventry Township will provide upon request a disclosure statement explaining to taxpayer their rights in certain tax proceedings involving the Township."

NEW BUSINESS: License must be obtained prior to opening. Tax must be paid within 60 days after opening date. SEE APPLICATION FORM.

FORM MUST BE PREPARED IN ITS ENTIRETY, SIGNED AND DATED. IF NOT FORM WILL BE RETURNED AND PENALTY AND INTEREST ADDED UNTIL COMPLETED FORM IS RECEIVED.

INSTRUCTIONS

MERCANTILE TAX

The Mercantile Tax is to be paid on all the receipts from the sale either at retail (.75 mills) or wholesale (.5 mill) of any tangible goods sold. This includes the sale of goods from a place of business within the Township to a person who does not reside within the Township. This also includes food and beverage sold for consumption or otherwise.

PARTIAL YEAR

If the business has not been operating for a full year then the Tax will be on the Gross Receipts for the period in the year that the firm has been operating. The Estimate Tax shall be computed by dividing the Tax by the number of months in business and then multiplying by twelve (12).

LICENSE

A separate license shall be required for each place of businesses within the Township.

NOTICE

You are entitled to receive a written explanation of you rights with regard to the audit, appeal, enforcement, refund and collection of local taxes by calling Tri-State Financial Group at (610) 270-9520 during the office hours of 8:30 am to 4:30 pm, Monday through Friday.

All questions for clarification or help should be directed to:

**Tri-State Financial Group
PO Box 38
Bridgeport, PA 19405
610-270-9520**

To access additional forms you may visit our web-site: www.tfgtax.com