READ INSTRUCTIONS ON THE BACK BEFORE COMPLETING FORM

2014 BOROUGH OF		OFFICIAL USE ONLY					
WEST CONSHOHOCKEN		DATE REC'D					
					AMT REC'D		
FINAL RETURN FOR CALENDAR YEAR ENDED DECE		CHECK NO		BATCH NO			
ESTIMATED RETURN FOR CALENDAR YEAR ENDED DECEMBER 31, 2015 Due Date March 31, 2015			NO		_ BATCHINO		
				1			
BUSINESS ACCOUNT							
NUMBER:				EIN/SSN:			
	BUSINESS LOCATION: DID YOU TERMINATE / MOVE THIS BUSINESS YES NO MOVED DATE:			IF MOVED, WHERE?			
					_		
						NO	
ENTER WHOLE DOLLAR AMOUNTS ONLY					OLLARS	CENTS	S
A return must be filed even if you have no gross receipts 1. Sales or Gross Receipts (January to December only)				4		00	
2. Exclusions (Must attach written proof)				1. 00 2. 00			
3. Taxable Gross Receipts (Line 1 Less Line 2)						00	
FINAL RETURN FOR YEAR ENDED DECEMBER 31, 2015 RECEIPTS FROM LINE ABOVE				TAX COMPUTATIONS			
4. Wholesale	4.		x .001	4.		00	
5. Retail	5.		x .0015	5.		00	
6.Service	6.		N/A	6. XX	xxx	00	
7. Rental / Other Income	7.		N/A	7. XX	XXX	00	
8. Total (add Lines 4 & 5) 8.				8.		00	
9. Deduct 2014 Estimated Tax (Paid with 2013 Return)				9.		00	
10. Total Tax Due, or Credit (Line 8 Less Line 9)				10.		00	
ESTIMATED TAX RETURN FOR YEAR ENDING DECEMBER 31, 2015							
11. 2015 Estimated Tax (Must use amount shown on Line 8)				11.		00	
TOTAL TAX DUE IF PAID BY MARCH 31, 2015							
12. Add Line 10 and Line 11						00	
PENALTY AND INTEREST IF TAX PAID AFTER MARCH 31, 2015							
13. Add: 10% Penalty if paid after March 31, 2015 (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	
16. Annual Business License Fee (a separate License is required for each location, \$10 per location)				16. 10 x	=	00	
17. Total Amount Due (Add Lines 15 & 16)				17.		00	
Any Work Papers containing calculations used to dete	rmine Gross Receipts and	d copies of F	ederal Retur	ns shall be	attached to this r	eturn.	
Tax return will not be considered complete unless suc	h documents are attached						
Make Check Payable to: WEST CONSHOHOCKEN BOROUGH		Mail Return	and Paymen	t to: TRI-ST PO BC	ATE FINANCIAL G	ROUP	
SEND ORGINAL WITH PAYMENT - MAKE A COPY FOR YO I declare under penalty of law that all statements made here and					7A 38 EPORT, PA 19405		
schedules are true, correct and complete to best of knowledge and belief.				610-270-9520			
Print Name	Telephone Numb	er "					
As required by Pen				nsylvania law, West Conshohocken Borough will t a disclosure statement explaining to taxpayer			
				tax proceedings involving the Borough."			
		NEW	BUSINESS: Licens	se must be obt	ained prior to opening	. Tax must be	
Signature of Person Preparing Return (if other than taxpayer) Date			paid within 60 days after opening date. SEE APPLICATION FORM.				
			FORM MUST BE PREPARED IN ITS ENTIRETY, SIGNED AND DATED. IF				
Address of Preparer Telephone Number			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 (1.5 mills) or wholesale (1.0 mill) of any tangible goods sold. This includes the sale of goods from a place of business within the Borough to a person who does not reside within the Borough. 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 Borough.

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