KEAD INSTRUCTIONS OF	N THE BACK E	DEFURE	COMIL		G FURIVI	
2015		OFFICIAL USE ONLY				
BOROUGH OF						
WEST CONSHOHOCKEN						
MERCANTILE TAX RETURN	DATE REC'D			AMT REC'D		
FINAL RETURN FOR CALENDAR YEAR ENDED DECEM	CLIECK N	0		DATCH NO		
ESTIMATED RETURN FOR CALENDAR YEAR ENDED DEC Due Date March 31, 2016	CHECK N	U		BATCH NO		
246 246 maren 21, 2010						
	BUSINESS ACCOUNT NUMBER:			EIN/SSN:		
	BUSINESS LOCATION:					
DID YOU TERMINATE / MOVE			OVE THIS BUSINESS IF MOVED, WHERE?		RE?	
	MOVED DATE:		·			
	□ NON-PROFIT □ MANU	JFACTURER				
ENTER WHOLE DOLLAR AM	MOUNTS ONLY			DO	LLARS	NO CENTS
A return must be filed even if you have n	o gross receipts					
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.	014DUT 4 TIQUO	00	
FINAL RETURN FOR YEAR ENDED DECEMBER 31, 2015	RECEIPTS FROM LINE ABOVE				OMPUTATIONS	00
4. Wholesale	4.		x .001	4.		00
5. Retail	5.		x .0015	5.		00
6.Service	6.		N/A	6. XXX	XXX	00
7. Rental / Other Income	7.		N/A	7. XXXXX		00
8. Total (add Lines 4 & 5)	8.			8.		00
9. Deduct 2015 Estimated Tax (Paid with 2014 Return)				9.		00
10. Total Tax Due, or Credit (Line 8 Less Line 9)				10.		00
ESTIMATED TAX RETURN FOR YEAR ENDING DECEMBER 3	1, 2016					
11. 2016 Estimated Tax (Must use amount shown on Line 8)				11.		00
TOTAL TAX DUE IF PAID BY MARCH 31, 2016						
12. Add Line 10 and Line 11				12.		00
PENALTY AND INTEREST IF TAX PAID AFTER MARCH 31, 20 13. Add: 10% Penalty if paid after March 31, 2016 (multiply Line 2)				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	. 1-1)			10.		- 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 determ	-	-	leral Returi	ns shall be a	attached to this re	eturn.
Tax return will not be considered complete unless such Make Check Payable to: WEST CONSHOHOCKEN BOROUGH	aocuments are attached		nd Payment	t to: TRI-STA	TE FINANCIAL GR	ROUP
SEND ORIGINAL WITH PAYMENT - MAKE A COPY FOR YOU	R RECORDS			PO BOX		 -

I declare under penalty of law that all statements made here and/or in supporting schedules are true, correct and complete to the best of my 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, West Conshohocken Borough will provide upon request a disclosure statement explaining to the taxpayer their rights in certain tax proceedings involving the Borough."

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 THE 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 Estimated 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 business within the Borough.

NOTICE

You are entitled to receive a written explanation of your 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