

TOWNSHIP OF CHELTENHAM

Mercantile and Business Privilege Tax Return

FINAL RETURN **2021** ESTIMATED RETURN **2022**

TAX LICENSE NUMBER #

OVER FOR TAX RETURN INSTRUCTIONS

TAXPAYER - PROVIDE TRADE NAME AND CHELTENHAM TOWNSHIP BUSINESS LOCATION IF NOT SHOWN CORRECTLY BELOW	
TELEPHONE NUMBER	HAS NATURE OF BUSINESS CHANGED DURING THE YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO

FINAL RETURN FOR YEAR ENDING DECEMBER 31, 2021 DUE APRIL 18, 2022

- Actual Gross Receipts for 2021 (as per Federal Tax Return):
 - Wholesale Mercantile \$ _____ x .0010 = \$ _____
If tax is less than Two dollars, enter zero
 - Retail Mercantile \$ _____ x .0015 = \$ _____
If tax is less than Two dollars, enter zero
 - Business Privilege \$ _____ x .0040 = \$ _____
If tax is less than Ten dollars, enter zero
- Total (Add lines a, b &c) \$ _____
- Deduct Estimate Tax Paid in 2021 \$ _____
- Total 2021 tax due or Credit (Line 2 less Line 3) \$ _____
- ADD Penalty of 10% of Line 4 if paid after April 18, 2022 \$ _____
- ADD interest of 1.25% per month of Line 4 if paid after April 18, 2022 \$ _____
- Total Tax, Penalty, Interest Due for 2021 (Add lines 4, 5 & 6) \$ _____

ESTIMATED TAX FOR YEAR ENDING DECEMBER 31, 2022 DUE APRIL 18, 2022

- Actual Gross Receipts for 2022 (as per Federal Tax Return):
 - Wholesale Mercantile \$ _____ x .0010 = \$ _____
If tax is less than Two dollars, enter zero
 - Retail Mercantile \$ _____ x .0015 = \$ _____
If tax is less than Two dollars, enter zero
 - Business Privilege \$ _____ x .0040 = \$ _____
If tax is less than Ten dollars, enter zero
- Total Estimated Taxes Due For 2022 \$ _____
- ADD Penalty of 10% of Line 9 if paid after April 18, 2022 \$ _____
- ADD interest of 1.25% per month of Line 9 if paid after April 18, 2022 \$ _____
- Current Year License Fee
\$15 Per category: Wholesale Retail Business Privilege \$ _____
- Total Tax, Penalty, Interest Due for 2022 (Add lines 9 thru 12) \$ _____
- Total Tax or Refund Due (Add lines 7 & 13) \$ _____

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.

X _____
Signature

Name

Official Title (Owner, Partner, etc.)

Signature of Person Preparing the Return if Other Than Taxpayer

Print Name of Preparer

Telephone Number of Preparer

Date

THIS RETURN MUST BE FILED ON A CALENDAR YEAR BASIS AND THE TAX PAID IN FULL. MAKE CHECK OR MONEY ORDER PAYABLE TO:

CHELTENHAM TOWNSHIP FINANCE OFFICER
8230 OLD YORK ROAD
ELKINS PARK, PA. 19027-1589

FOR OFFICIAL USE ONLY

WHEN FILING YOUR RETURN, A COPY OF THE APPROPRIATE FEDERAL TAX SCHEDULE (S) MUST BE ATTACHED:

- FORM 1040, SCHEDULE C**
- FORM 1065**
- FORM 1120**
- FORM 1040, SCHEDULE E**