

**BOROUGH OF SHARON HILL
BUSINESS PRIVILEGE TAX RETURN
2017 ACTUAL**

COMPANY/OWNER:		MRRS ACCT #:
DBA (Doing Business As):		
BUSINESS ADDRESS:		EIN:
TELEPHONE:	EMAIL:	

CALCULATION OF ACTUAL TAX FOR LICENSE YEAR 2017

INDICATE VOLUME OF BUSINESS TRANSACTED	A. WHOLESALE	B. RETAIL	C. RENTAL/SERVICES
1. GROSS RECEIPTS OF SALES FROM BUSINESS JANUARY 1, 2017 - DECEMBER 31, 2017 NOTE: INDIVIDUALS—Attach a copy of Form 1040 (page 1) plus Schedule C and Schedule E (if applicable). PARTNERSHIPS—Attach Form 1065 (page 1). CORPORATIONS—Attach Form 1120 or 1120S (page 1).			
2. TAX RATE	.0005	.001	.001
3. TAX FOR 2017 (Total of Gross Receipts Times Tax Rate)	(1A x .0005)	(1B x .001)	(1C x .001)

4. TOTAL AMOUNT OF TAX FOR 2017: (Lines 3A+3B+3C) \$ _____

5. AMOUNT OF ESTIMATED TAX (Excluding penalties and interest) PAID IN 2017: \$ _____

6. ADDITIONAL 2017 TAX OR CREDIT DUE: (Difference of Line 4 minus Line 5) \$ _____

7. PENALTY AND INTEREST: (Returns filed and/or payments made after MAY 15, 2018 will be subject to the following penalties and interest)

7-A. PENALTY: Add 10% penalty of Total Tax Due (Line 4) \$ _____

7-B. INTEREST: (multiply Line 4 x Interest Rate x Number of months delinquent) \$ _____

Wholesale/Retail/Rental/Service - Add interest at a rate of 1% per month or fraction thereof

\$ _____

8. TOTAL TAX, PENALTY AND INTEREST DUE: (Sum of Line 6 plus Line 7) \$ _____

I/we 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/our knowledge and belief.

Signature of Preparer (if other than Taxpayer)

Signature of Taxpayer

Title

Date

THIS RETURN MUST BE FILED AND THE TAX PAID IN FULL BY MAY 15, 2018

MAKE CHECK OR MONEY ORDER PAYABLE AND REMIT TO:

**BOROUGH OF SHARON HILL
c/o MRRS,LLC
P. O. Box 1391
Media, PA 19063**

Contact Information: Web: www.MRRSLLC.com Email: INFO@MRRSLLC.com Telephone: 610-565-1396

PLEASE RETAIN A COPY FOR YOUR RECORDS