

BOROUGH OF WEST VIEW
 441 Perry Highway
 Pittsburgh, PA 15229
 (412) 931-1995
 (412) 931-1920 - fax
 westviewborough.org

TAX YEAR _____ BUSINESS GROSS RECEIPTS TAX RETURN

The Business Gross Receipts Tax applies to the carrying on or exercising of any trade, profession, vocation, service, commercial activity, sales, or rendering of services from or attributable to a place of business with the Borough. The tax period is January 1 through December 31, 201x and is calculated as explained below. Pursuant to Pa Act 511 of 1965, and the Ordinance of the Borough of West View, this return must be filed with the Borough of West View Business Tax Collector, with payment, before April 15, 201x to avoid imposition of penalties and interest (unless the business commenced after January 1, 201x).

LOCAL BUSINESS NAME AND ADDRESS

CORPORATE BUSINESS NAME AND ADDRESS

COMPUTATION OF GROSS RECEIPTS

- A. If the business has been in operation at least one full year, enter 2013 total gross receipts *as shown supporting schedule. Attach Page 1 of Federal form 1040, 1065, 1120, 1120S, or Schedule C, E, F, or K-1.* \$ _____
- B. If business commenced after *01/01/201x*, indicate starting date _____ and enter total gross receipts as calculated using Paragraph B of instructions on the reverse side. \$ _____
- C. If business commenced after *01/01/201x*, indicate starting date _____ and enter total gross receipts as calculated using Paragraph C of instructions on the reverse side. \$ _____
- D. If temporary, itinerant or seasonal, enter total gross receipts as calculated using Paragraph D on the reverse side. \$ _____

This business has been granted an exemption or is exempt from the Business Gross Receipts Tax for the following reason:

 Your signature on this tax return certifies that all conditions of the granted exemption remain applicable.

	Total Taxable Gross Receipts	Tax Rate	Tax Due
1. SERVICE	\$ _____	x .00150	\$ _____
2. RENTAL	\$ _____	x .00150	\$ _____
3. RETAIL	\$ _____	x .00150	\$ _____
4. WHOLESALE	\$ _____	x .00100	\$ _____
5. SUBTOTAL	Add lines 1 through 4		\$ _____
6. PAYMENTS			\$ _____
7. Add penalty of ½ % per month after due date of 04/15/1x			\$ _____
8. Add interest of ½ % per month after due date of 04/15/1x.			\$ _____
9. TAX DUE – Tax return required			\$ _____

I hereby certify that all the information contained in this tax return is true and correct to the best of my knowledge and belief.

Signature _____ Title _____ Telephone Number _____

Date _____ Nature of Business _____

INSTRUCTIONS AND ADDITIONAL INFORMATION ON REVERSE SIDE