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Date Received (Official Use Only)

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GROSS RECEIPTS TAX - PRIVATE BANKERS

Revenue ID, Federal ID (FEIN), Parent Corporation (FEIN)

Taxpayer Name, First Line of Address, Second Line of Address, City, State, ZIP, Phone, Email

Tax Year Begin:

Tax Year End: 12/31/20__

Due Date: February 15

Check to Indicate a Change of Address, Send All Correspondence to the Preparer Amended Report (Include REV-1175.), First Report, Payment Made Electronically, Final Report (See Instructions.), Out of Existence Date:

USE WHOLE DOLLARS ONLY

- 1. Gross Receipts Tax-Private Bankers (Page 2, Line 12)
2. Total Estimated Payments
3. Total Payments Carried Forward From Prior Year Return
4. Total "Restricted" Tax Credits
5. Total Credit: (Line 2 plus Line 3 plus Line 4)
6. Tax Due: (If Line 1 is more than Line 5, enter the difference here.)
7. Remittance
8. Overpayment: (If Line 5 is more than Line 1, enter the difference here.)
9. Refund: (Amount of Line 8 to be refunded after offsetting all unpaid liabilities)
10. Transfer: (Amount of Line 8 to be credited to the next tax year after offsetting all unpaid liabilities)

Table with 10 rows for line items



Corporate Officer Information:

Officer Last Name, Officer First Name, Title of Officer, Social Security Number of Officer, Phone, Email

I affirm under penalties prescribed by law, this report, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete report.

Signature of Officer, Date

GROSS RECEIPTS FROM THE FOLLOWING SOURCES:

USE WHOLE DOLLARS ONLY

| | | |
|--|----|-------|
| 1. Commissions on loans and various banking services | \$ | _____ |
| 2. Discounts on loans | \$ | _____ |
| 3. Abatements or allowances | \$ | _____ |
| 4. Banking charges or fees on depositors accounts | \$ | _____ |
| 5. Rents on real estate owned | \$ | _____ |
| 6. Interest on: | | |
| a. Bonds of public and private corporations | \$ | _____ |
| b. Bonds of states other than the Commonwealth of Pennsylvania | \$ | _____ |
| c. Bonds issued by municipal subdivisions of the Commonwealth of Pennsylvania | \$ | _____ |
| d. Loans | \$ | _____ |
| e. Mortgages and judgments | \$ | _____ |
| f. Drawing accounts or overdrafts of partners | \$ | _____ |
| g. Balances with other banks | \$ | _____ |
| h. Total interest (Sum of 6a through 6g) | \$ | _____ |
| i. Less: amortization of premiums, etc. | \$ | _____ |
| j. Total interest less amortization of premiums (6h less 6i) | \$ | _____ |
| 7. Dividends on stocks | \$ | _____ |
| 8. Purchases and sales of securities for investment or trading purposes: | | |
| a. Profits | \$ | _____ |
| b. Losses | \$ | _____ |
| c. Profits less losses on purchases and sales of securities for investment or trading purposes (8a less 8b) | \$ | _____ |
| 9. Rental of safe-deposit boxes | \$ | _____ |
| 10. Other sources: (Provide details.) | | |
| a. | \$ | _____ |
| b. | \$ | _____ |
| c. | \$ | _____ |
| d. | \$ | _____ |
| e. Total of other sources (Sum of 10a through 10d) | \$ | _____ |
| 11. Total gross receipts (Sum of Lines 1 through 10) | \$ | _____ |
| (Interest on obligations of the U.S. and interest on obligations of the Commonwealth of Pennsylvania are not taxable.) | | |
| 12. Tax (Line 11 times tax rate - See Instructions.) | \$ | _____ |

Revenue ID

Preparer's Information:

Firm Name
Firm FEIN
Address
City
State
ZIP

Individual Preparer Name
Phone
Email
Social Security Number
or PTIN

I affirm under penalties prescribed by law, this report, including any accompanying schedules and statements, has been prepared by me and to the best of my knowledge and belief is a true, correct and complete report.

Signature of Preparer

Date