

2000
LONG
FORM

BUSINESS PAYROLL EXPENSE TAX STATEMENT

SAN FRANCISCO TAX COLLECTOR
BUSINESS TAX SECTION
P.O. BOX 7425
SAN FRANCISCO, CA 94120-7425
TELEPHONE: (415) 554-4400



DELINQUENT AFTER FEBRUARY 28, 2001

BUSINESS TAX ID NUMBER

CERTIFICATE NUMBER

TAX YEAR

2000

DO NOT WRITE IN PRE-PRINTED AREAS. USE BLACK INK AND STAY INSIDE BOXES. PLEASE HAND PRINT. DO NOT TYPE. DO NOT SEND PHOTOCOPY.

Final Statement for closed business

Neighborhood Beautification Fund Designation

BUSINESS TELEPHONE NUMBER

____ - ____ - ____

1.	From Schedule C, line 5A, column A	Total GROSS RECEIPTS	\$	_____
2.	From Schedule C, line 5A, column B	Total EXEMPT RECEIPTS	\$	_____
3.	From Schedule C, line 5A, column C	Total Taxable Receipts (Subtract line 2 from line 1)	\$	_____
4.	From Schedule C, line 5A, column D	Calculated Gross Receipts Tax (See Business Tax Rate table on reverse side.)	\$	_____
5.	From Schedule C, line 5B, column A	Total PAYROLL EXPENSE	\$	_____
6.	From Schedule C, line 5B, column B	Total EXEMPT PAYROLL	\$	_____
7.	From Schedule C, line 5B, column C	Total Taxable Payroll (Subtract line 6 from line 5)	\$	_____
8.	From Schedule C, line 5B, column D	Calculated Payroll Tax (1.5% times line 7)	\$	_____
9.	Enter the GREATER of line 4 or line 8.		\$	_____
10.	Enter calculated Summer Youth or New Jobs TAX CREDIT AMOUNTS and ATTACH WORKSHEETS. If none, put ZERO as line 10 total.			
	<i>Summer Youth</i>	<i>New Jobs</i>	ENTER TAX CREDITS TOTAL (SY+NJ):	\$ _____
11.	Tax Due after SY and NJ Tax Credits (Subtract TOTAL of line 10 from line 9. If line 10 is greater than line 9, enter ZERO.)		\$	_____
12.	If Line 11 is over \$2,500.00 enter the amount from Line 11; OTHERWISE, enter ZERO.		\$	_____
13.	Enter the amount from line 11 if you are filing after Feb. 28, 2001; OTHERWISE, enter ZERO.		\$	_____
14.	Tax Due (Enter the larger amount from Lines 12 or 13.)		\$	_____
15.	Enter calculated Enterprise Zone or Garment Mfgs. TAX CREDIT AMOUNTS and ATTACH WORKSHEETS. If none, put ZERO as line 15 total.			
	<i>Enterprise Zone</i>	<i>Garment Mfgs.</i>	ENTER TAX CREDITS TOTAL (EZ+GM):	\$ _____
16.	Tax Due after EZ and GM Tax Credits (Subtract TOTAL of line 15 from line 14. If line 15 is greater than line 14, enter ZERO.)		\$	_____
17.	Business Tax Special Credit for 2000 Tax Year. See		\$	_____
18.	Tax Due after Credit. (Subtract line 17 from line 16. If line 17 greater than line 16, enter ZERO.)		\$	_____
19.	Enter 2000 PREPAYMENT PAID (Do not include Registration Fees). If none, enter ZERO.		\$	_____
20.	Tax Balance Due (Subtract line 19 from line 18; If line 19 is larger than line 18, enter ZERO)		\$	_____
21.	OVERPAYMENT (If line 19 is larger than line 18, enter difference.) See instructions.		\$	_____
22.	IF paid or postmarked after February 28, 2001, Enter LATE FILING PENALTY. See instructions.		\$	_____
23.	IF paid or postmarked after February 28, 2001, Enter NEGLIGENCE PENALTY. See instructions.		\$	_____
24.	IF paid or postmarked after February 28, 2001, Enter INTEREST - 1% per month of Line 20.		\$	_____
25.	TOTAL AMOUNT DUE (Add Lines 20, 22, 23, 24.) Make check payable to the San Francisco Tax Collector.		\$	_____

THIS STATEMENT MUST BE FILED BY FEBRUARY 28, 2001 EVEN IF NO TAX IS DUE OR YOU WILL BE SUBJECT TO PENALTIES AND LOSS OF TAX EXEMPTION.
I declare, under penalty of perjury, that I have examined this statement and that this information is true and complete

SIGN HERE X _____ DATE _____

Do NOT prepare more than one STATEMENT (Long Form) even if you attach multiple Schedule C's B106-00

4078

PLEASE ATTACH SCHEDULE C(s) TO STATEMENT WHEN FILING





Business Payroll Expense

SCHEDULE C

BUSINESS TAX ID

CERTIFICATE NUMBER

Tax Year

GROSS RECEIPTS TAX CALCULATIONS

Column A

Column B

Column C

Column D

Table with 8 columns: Locations (non-SF = 999), Bus. Class, PBC, Gross Receipts, Exempt Receipts, Taxable Receipts, Rate/1000, Tax Due. Rows 1A-4A for individual locations and 5A for Totals.

PAYROLL TAX CALCULATIONS

Column A

Column B

Column C

Column D

Table with 7 columns: Locations (non-SF = 999), No. employees as of 12/31/00, Gross Payroll, Exempt Payroll, Taxable Payroll, Tax Rate, Tax Due. Rows 1B-4B for individual locations and 5B for Totals.

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PLEASE DO NOT TEAR APART

2000 LONG FORM

BUSINESS PAYROLL EXPENSE TAX

PERIOD COVERED: January 1 - December 31, 2000 DELINQUENT IF PAID OR POSTMARKED AFTER FEBRUARY 28, 2001

Table with 3 columns: BUSINESS TAX ID NUMBER, OWNERSHIP NAME, PAYMENT ENCLOSED

NOTE: Payment enclosed must equal the amount stated on Line 25 of statement. (Please write your Business Tax ID at the bottom of your check.)