

<b>LOCAL TAX AUTHORITY</b>	<b>PAYROLL EXPENSE TAX RETURN FORM PET-1</b>	Tax Year: _____  Quarter: _____
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TAXPAYER/ BUSINESS NAME _____	FEDERAL EMPLOYER ID NUMBER (FEIN) _____
MAILING ADDRESS _____	LOCAL ACCOUNT NUMBER _____
CITY, STATE, ZIP CODE _____	TELEPHONE NUMBER _____

	TAX COMPUTATION	AMOUNT
1	Total Payroll Expense (Gross Wages/Compensation Paid)	
2	Less: Excluded/Exempt Payroll (If applicable)	
3	Taxable Payroll Expense (Line 1 minus Line 2)	
4	Tax Rate	
5	Gross Tax Due (Multiply Line 3 by Line 4)	
6	Credits / Prepayments	
7	Net Tax Due (Line 5 minus Line 6)	
8	Penalty (For late filing)	
9	Interest (For late payment)	
10	<b>Total Amount Due (Add Lines 7, 8, and 9)</b>	

<b>DECLARATION AND SIGNATURE</b>		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.		
_____ Authorized Signature	_____ Date	_____ Title
_____ Paid Preparer's Signature (if applicable)	_____ Date	_____ Preparer's PTIN/ FEIN