

ALLEN COUNTY, KY - OCCUPATIONAL TAX



Net Profits Occupational Tax Return

FROM BUSINESS, PROFESSION, OR OTHER ACTIVITY WITHIN ALLEN COUNTY, KY. CONDUCTED BY CORPORATIONS, PARTNERSHIPS INDIVIDUALS AND FIDUCIARIES OF ESTATES AND TRUSTS (RESIDENT OR NON-RESIDENT)

CALENDAR YEAR ENDED DECEMBER 31, 20__

OR

FISCAL YEAR INDICATED BELOW

Make Checks Payable And Mail To:
Allen County Treasurer
P.O. Box 193
Scottsville, KY 42164

Information Request
Phone 270-237-3626
Fax 270-237-9155

MO	DAY	YR

(PRINT NAME AND ADDRESS ABOVE • CHANGE IF NOT CORRECTLY SHOWN)

Give Trade Name, If Any

Nature of Business

FEDERAL IDENTIFICATION NO.

ATTACH one copy of the applicable FEDERAL FORMS AND indicate below which form(s) are attached

(NO FILING OF JOINT RETURNS)

1040 Sch C 1041
 1040 Sch E 1065
 1040 Sch F 1120
 1120 S 741
 720 765
 720 S Other Earned Income (describe)

QUESTIONS • ANSWER FULLY

- Did you have employees in Allen County during the year? Yes No
- Has Allen County License Fee been withheld from subject Employees and Remitted Quarterly in Accordance with the Regulations? Yes No
If answer is "No" Explain

- Check Which Corporation Sub-Chapter S Partnership Individual Owner Fiduciary Other (state)
- Basis on which this Return is Prepared - Cash Accrual
- Have Federal Authorities Changed the Net Income as Ordinarily Reported for Any Prior Year? Yes No
If Answer is "Yes" Attach Schedule of Changes for Each Year.

SCHEDULE A

1. Net Business Income per Federal Return	\$			(Do not write in this space)
2. ADD Items not deductible (Line G, Schedule B)				
3. Total (Line 1 plus Line 2)				
4. DEDUCT Items not subject (Line N, Schedule B)	\$			
5. ADJUSTED BUSINESS INCOME (Line 3 Less Line 4)				
6. If Sch C (Line 4) is used enter here AVERAGE PERCENTAGE			%	
7. NET PROFITS Subject to Allen County License Fee (Line 5 x Line 6)	\$			
8. Allen County License Fee at 1% (.01) of Amount on Line 7	\$			
9. Interest 12% (0.12) per Year				
10. Penalty 10% (1.0) Per Year				
11. TOTAL (Lines 8 + 9 + 10)	\$			
12. Less credits • INITIAL ESTIMATE				
13. BALANCE DUE • PAY THIS AMOUNT				
14. OVERPAYMENT REFUND Apply to Next Year	\$			

SCHEDULE B

NOTE: ADD AND OR DEDUCT ONLY THOSE ITEMS WHICH ARE INCLUDED IN CALCULATING NET INCOME

ITEMS NOT DEDUCTIBLE - ADD

- Federal or Local taxes based on income
- License Fee under this Ordinance
- Ordinary Gain
- Net Operating Loss Deduction
- Partner's Salaries (attach schedule)
- Other items (list)
- TOTAL ADDITIONS (enter on Line 2)

ITEMS NOT SUBJECT - DEDUCT

- Interest on Corporate Bonds
- Interest on U.S. Government Securities
- Royalties on Patents, Copyrights
- Dividends
- Ordinary Loss
- Other (attach schedule)
- TOTAL DEDUCTIONS & enter on Line 4

SCHEDULE C

BUSINESS ALLOCATION PERCENTAGE • DIVIDE (COL A) BY (COL B) TO OBTAIN DECIMAL. CARRY OUT AT LEAST 6 PLACES

ALLOCATION FACTORS	Column A Allen County	Column B Total Everywhere	Column C PERCENTAGE (A / B)
1. Total Net Business Profits Per Federal Returns	\$	\$	
2. Total Wages, Salaries and Other Personal Service Compensation Paid to Employees	\$	\$	
3. TOTAL PERCENTS: Add Lines 1 & 2			%
4. AVERAGE PERCENTAGE (Line 3 divided by Line 2)		Enter on Line 6	%

Prepared By

CERTIFICATE

I HEREBY CERTIFY That the statements made herein and any supporting schedule or exhibit are true, correct and complete.

(Signature of License Fee Payer)

Date 20__

This return must be filed with full payment of the fee on or before April 15 of each year, or within 105 days of the close of your Fiscal year, with the Treasurer of Allen County, P.O. Box 193, Scottsville, KY 42164. Return even if not known of copy of extension.