

Georgetown/Scott County Revenue Commission 2010 Net Profit License Tax Return

For Year Ended		
_	_	
/	/	

Name and address				Business type
		Federal ID # or Soc	cial Security #	Individual
				Corporation
				Partnership
<u> </u>]	_	LLC/Individual
Final return (Check only to ina		•	diotions)	LLC/Partnership
No activity in jurisdictions duri	ng tax year (Check only			Other
A) Business telephone:	- (('	B) Principal i	ousiness activity	
C) Principal owner/administrative				
D) If business activity was discon		= -	ate when	
Dissolution Sale Other	If other, describe	address of successor		
		rnorato fodoral raturno	YES	
E) Is the business entity an affilia	ne or a consolidated cor	rporate lederal return?	NO NO	
F) Did you have employees in the	e jurisdiction during the	tax year?	YES NO	If YES, how many?
Make check payable		FILING STATUS (pe	er federal return)	
and mail to:	Worksheet I	Federal Schedule C, Sched	ule E, Schedule F or 10	099-Misc
Georgetown/Scott County	Worksheet P	Federal Form 1065, Schedu	le K and rental schedu	ıle(s)
Revenue Commission	Worksheet C	Federal Form 1120, 1120A,		nd rental schedule(s)
P O Box 800		TAX COMPL		
Georgetown, Kentucky 40324		City of Georgetown	Scott County	Scott County Schools
		(A)	(B)	(C)
1) Adjusted net profit fro	m Worksheet			
2) Business apportionment (see reverse)		%		% %
3) Less: Net profit exempt	70	\$10,00		
•		Ψ10,00		
4) Taxable net profit ({line		40/		40/ 0.500/
5) Occupational license tax rate		1%		1% 0.50%
6) Total tax due				
7) Less: Estimated payr	ments/credits			
8) Balance due				
9) Late Filing/Payment Penalty Minimum \$25- due even if file				
10) Interest12% per annui				
11) Total amount due/(ov	erpayment)>>			
12) Overpayment (check one)	Refund	Payment Due (Add Line 1	I, Columns A,B & C)	
	Credit	•		
RETURN MUST BE SIGNED - I hereby cerify, under penalty of perjury, that the statements made herein and any supporting schedules are true,				
correct, and complete to the best of my knowledge. OFFICE USE ONLY				
		Rec'd		
Preparer's signature	Date	Ck. No.	Taxpayer's signat	ure Date
		Amt.		
Print name		Bv	Print name	Date



WORKSHEET Y BUSINESS APPORTIONMENT

Federal ID # or Social Security #

	PART I - CITY OF G	EORGETOWN		
			DIVIDE↓	
APPORTIONMENT FACTORS	COLUMN A	COLUMN B	COLUMN C	
	CITY OF GEORGETOWN	TOTAL EVERYWHERE	$A \div B = C$	
1) PAYROLL FACTOR				
Compensation paid or payable				
to employees			%	
2) SALES REVENUE FACTOR				
Receipts from the sale, lease, or rental				
of goods, services, or property			%	
3) TOTAL PERCENTAGES				
			%	
4) BUSINESS APPORTIONMENT Enter here and on page 1, line 2 of Net Profit License Tax Return				
	%			
	If you had both a payroll factor and a sales revenue factor, then divide line 3 by two (2). If you had a payroll factor or sales revenue factor, but not both, then enter the percentage from line 3.			
ii you nad a payroli factor or sales	revenue lactor, but not both, the	n enter the percentage from line	ა.	

PART II - SCOTT COUNTY AND SCOTT COUNTY SCHOOLS			
			DIVIDE↓
APPORTIONMENT FACTORS	COLUMN A SCOTT COUNTY	COLUMN B TOTAL EVERYWHERE	COLUMN C A ÷ B = C
1) PAYROLL FACTOR			
Compensation paid or payable			_
to employees			%
2) SALES REVENUE FACTOR			
Receipts from the sale, lease, or rental			
of goods, services, or property			%
3) TOTAL PERCENTAGES			9/
4) BUSINESS APPORTIONM	ENT Enter here and on page 1, li	ine 2 of Net Profit License Tax Return	/
If you had both a payroll factor and a lf you had a payroll factor or sales re	a sales revenue factor, then d	livide line 3 by two (2).	% 3.



	"""IMPORTANT	Federal ID # or
This Worksheet along with copies of all applicable federal forms and schedules MUST		Social Security #
be attac	ched to the Net Profit License Tax Return.	
	WORKSHEET C COMPUTATION OF ADJUSTED NET PROFIT FOR BUSINESS ENTITIES REQUIRED TO FILE U.S. CORPORATE INCOME	TAX RETURN
1)	Taxable income or (loss) per Federal Form 1120 or 1120A or Ordinary income or (loss) per Federal Form 1120S (Attach the applicable 1120 or 1120A, Pages 1 and 2 or 1120S Pages 1, 2 and 3, Schedule of Other Deductions and rental schedule(s), if applicable)	
2)	State income taxes and occupational taxes based on income deducted on the Federal Form 1120, 1120A or 1120S (Attach schedule)	
3)	Net operating loss deducted on Form 1120	
4)	Additions from Schedule K of Form 1120S (See instructions) (Attach Schedule K of Form 1120S and rental schedule(s), if applicable)	
5)	Total Income (Add lines 1 through 4)	
6)	Subtractions from Schedule K of Form 1120S (See instructions) (Attach Schedule K of Form 1120S and rental schedule(s), if applicable)	
7)	Alcoholic Beverage Sales Deduction (Worksheet X, Line 3)	
8)	Local/other adjustments (Attach full explanation and schedule)	
9)	Total adjustments (Add lines 6 through 8)	
10)	Adjusted Net Profit (Subtract line 9 from line 5) Enter here and on line 1 of the Net Profit License Tax Return	
	WORKSHEET X: ALCOHOLIC BEVERAGE SALES DEDUCTIO	N
1)	DIVIDE→ Kentucky Alcoholic Beverage Sales Total sales	%
2)	Enter "Total Income" from line 5 of Worksheet C	
3)	Alcoholic Beverage Sales Deduction (multiply line 1 by line 2) Enter here and on line 7 above	



	****IMPORTANT****	Federal ID # or
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be attac	ched to the Net Profit License Tax Return.	
	WORKSHEET I COMPUTATION OF ADJUSTED NET PROFIT FOR BUSINESS ENTITIES REQUIRED TO FILE INDIVIDUAL U.S. INCOME	TAX RETURN
1)	Non-employee compensation as reported on Form 1099-Misc reported as "Other Income" on Federal Form 1040 (Attach Page 1 of Form 1040 and Form 1099)	
2)	Net profit or (loss) per line 31 of the Federal Schedule C of Form 1040 (Attach Schedule C Pages 1 and 2)	
3)	Gain or (loss) on sales of business property used in a trade or business from Federal Form 4797 or Form 6252 reported on Schedule D of Form 1040 (Attach Form 4797 Pages 1 and 2 and/or Form 6252)	
4)	Rental income or (loss) per Federal Schedule E of Form 1040 (See instructions)(Attach Schedule E)	
5)	Net farm profit or (loss) per Federal Schedule F of Form 1040 (Attach Schedule F Pages 1 and 2)	
6)	State income taxes and occupational license taxes based upon income deducted on the Federal Schedule C, E, or F (Attach schedule)	
7)	Total Income (Add lines 1 through 6)	
8)	Alcoholic Beverage Sales Deduction (Worksheet X, Line 3)	
9)	Local/other adjustments (Attach full explanation and schedule)	
10)	Total adjustments (Add lines 8 and 9)	
11)	Adjusted Net Profit (Subtract line 10 from line 7) Enter here and on line 1 of the Net Profit License Tax Return	
	WORKSHEET X: ALCOHOLIC BEVERAGE SALES DEDUCTION	N
1)	DIVIDE→ Kentucky Alcoholic Beverage Sales Total sales	%
2)	Enter "Total Income" from line 7 of Worksheet I	
3)	Alcoholic Beverage Sales Deduction (multiply line 1 by line 2) Enter here and on line 8 above	



	****IMPORTANT****	Federal ID # or
This V	Vorksheet along with copies of all applicable federal forms and schedules MUST	Social Security #
be atta	ached to the Net Profit License Tax Return.	
	WORKSHEET P COMPUTATION OF ADJUSTED NET PROFIT FOR BUSINESS ENTITIES REQUIRED TO FILE U.S. RETURN OF PARTNERSHIP I	NCOME TAX RETURN
1)	Ordinary income or (loss) per Federal Form 1065 (Attach Form 1065, Pages 1, 2 and 3, Schedule of Other Deductions, and rental schedule(s), if applicable)	
2)	State income taxes and occupational taxes based on income deducted on the Federal Form 1065 (Attach schedule)	
3)	Additions from Schedule K of Form 1065 (See instructions) (Attach Schedule K of Form 1065 and rental schedule(s), if applicable)	
4)	Total income (Add lines 1 through 3)	
5)	Subtractions from Schedule K of Form 1065 (See instructions) (Attach Schedule K of Form 1065 and rental schedule(s), if applicable)	
6)	Alcoholic Beverage Sales Deduction (Worksheet X, Line 3)	
7)	Local/other adjustments (Attach full explanation and schedule)	
8)	Professional expenses not reimbursed by the partnership (Attach schedule of expenses)	
9)	Total adjustments (Add lines 5 through 8)	
10)	Adjusted Net Profit (Subtract line 9 from line 4) Enter here and on line 1 of the Net Profit License Tax Return	
	WORKSHEET X: ALCOHOLIC BEVERAGE SALES DEDUCTION	ON
1)	DIVIDE→ Kentucky Alcoholic Beverage Sales Total sales	%
2)	Enter "Total Income" from line 4 of Worksheet P	
3)	Alcoholic Beverage Sales Deduction (multiply line 1 by line 2) Enter here and on line 6 above	