

## Georgetown/Scott County Revenue Commission 2014 Net Profit License Tax Return

For Year Ended		
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/	/	

Name and address				Business type
		Federal ID # or Soc	cial Security #	Individual
				Corporation
				Partnership
				LLC/Individual
Final return (Check only to ina		•		LLC/Partnership
No activity in jurisdictions dur	ing tax year (Check only		· · · · · · · · · · · · · · · · · · ·	Other
A) Business telephone:		B) Principal b	ousiness activity	
C) Principal owner/administrative				_
D) If business activity was discor	<del></del>	• •	ate when	
Dissolution Sale	·	address of successor		
Other_	If other, describe			
E) Is the business entity an affilia	ate of a consolidated cor	rporate federal return?	YESNO	}
F) Did you have employees in the	ne 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 1099-N	lisc
Georgetown/Scott County	Worksheet P	Federal Form 1065, Schedu	le K and rental schedule(s)	
Revenue Commission	Worksheet C	Federal Form 1120, 1120A,	1120S, Schedule K and ren	tal schedule(s)
P O Box 800		TAX COMPL	JTATION	
Georgetown, Kentucky 40324		City of	Scott	Scott County
		Georgetown (A)	County (B)	Schools (C)
1) Adjusted net profit from	om Worksheet			
2) Business apportionm	nent (see reverse)	%	%	%
3) Less: Net profit exemptionsee instructions.			\$10,000	
4) Taxable net profit ({line	1 X line 2\ minus line 3\			
5) Occupational license		1%	1%	0.50%
•		1 70	1 70	0.5070
6) Total tax due				
7) Less: Estimated pay	ments/credits			
8) Balance due				
9) Late Filing/Payment Penalty 5% a month Max 25%  Minimum \$25- due even if filed late with no tax due				
10) Interest12% per annu	ım			
11) Total amount due/(ov				
12) Overpayment Refund  **13) Please check this box if you	Credit	Payment Due (Add Line 11		
RETURN MUST BE SIGNED - I hereby ceri				■ dules are true,
correct, and complete to the best of my knowledge.  OFFICE USE ONLY			,	
		Rec'd		
Preparer's signature	Date	Ck. No.	Taxpayer's signature	 Date
-1	_ 5	Amt.		_ 5
Print name		Ву	Print name	Date



# WORKSHEET Y BUSINESS APPORTIONMENT

Federal ID # or Social Security #

PART I - CITY OF GEORGETOWN			
			DIVIDE↓
APPORTIONMENT FACTORS	COLUMN A CITY OF GEORGETOWN	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			
,			%
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			<u>%</u> 3.

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			
,			%
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.			



#### **Revenue Commission**

	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	



#### **Revenue Commission**

	****IMPORTANT****	Federal ID # or
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	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 DEDUCTIO	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	



### Revenue Commission

	****IMPORTANT****	Federal ID # or
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	WORKSHEET P  COMPUTATION OF ADJUSTED NET PROFIT  FOR BUSINESS ENTITIES REQUIRED TO FILE U.S. RETURN OF PARTNERSHIP I	INCOME 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 DEDUCTIO	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	