



WOODFORD COUNTY NET PROFIT LICENSE FEE RETURN

Email questions to tax@woodfordcountyky.gov

ACCOUNT NO.	CALENDAR YEAR	OR	FISCAL YEAR ENDED MO. DAY YEAR

Name and Address of Business

PLEASE NOTIFY THIS OFFICE OF ANY CHANGE OF OWNERSHIP OR NAME AND ADDRESS SHOWN ABOVE

QUESTIONS (ANSWER FULLY)

- Nature of Business _____
- Date Business Started in Woodford County _____
- If Organization was discontinued, State When _____
Dissolution _____ or Sale _____ If by sale, Give name and address of Successor _____
- Number of employees in Woodford County during the year _____
- Has Woodford County License Fee been withheld from all subject And employees 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 the Return is prepared Cash _____ Accrual _____
- Have Federal Authorities changed the Net Income as originally reported for any prior year? Yes _____ No _____
If answer is "Yes": attach Schedule of Changes for each year.
- Telephone _____
- Contact Name _____

SCHEDULE A

1. Total Gross Income per Federal Return, Form _____	\$	
2. Total Business Deductions per Federal Return	\$	
3. Net Business Income per Federal Return	\$	
4. Add items not deductible (Line G, Schedule B)	\$	
5. Total (line 3 plus Line 4)	\$	
6. DEDUCT items not subject (line N Schedule B)	\$	
7. ADJUSTED NET BUSINESS INCOME (Line 5 Less Line 6)	\$	
8. Enter average percentage allocable to Woodford Co. (Schedule C, Line 4)		%
9. NET PROFITS subject to Woodford Co. License Fee (Line 7 x Line 8)	\$	
10. Woodford Co. License Fee @1.50% of amount on Line 9	\$	
11. Less Credits _____ Estimated Payments _____	\$	
12. Refund or Credit. If Line 11 is greater than Line 10 Enter difference (Refund _____ Credit _____)	\$	
13. Balance Due. If Line 10 is greater than Line 11, Enter difference as License Fee Due	\$	
14. Penalty - 5% of tax due per calendar month or fraction of month not to exceed 25% of total tax due however, not less than \$25.00	\$	
15. Interest - 12% per anum after due date	\$	
16. Total Amount Due (Add Lines 13,14,15)	\$	

* ENCLOSE ONE COPY OF APPLICABLE FEDERAL RETURN INCLUDING SUPPORTING STATEMENTS

MAKE CHECK PAYABLE TO:

Woodford County
Tax Administrator
103 S. Main St, Room 201
Versailles, KY 40383
859-873-3520
859-873-0196 (FAX)

SCHEDULE B NOTE:

ADD AND/OR DEDUCT ONLY THOSE ITEMS WHICH ARE INCLUDED IN CALCULATING NET INCOME PER FEDERAL RETURN

ITEMS NOT DEDUCTIBLE - ADD		ITEMS NOT SUBJECT - DEDUCT	
A. State or Local taxes based on income	\$	H. Interest on Corporate Bonds	\$
B. License Fee under this Ordinance		I. Interest on U.S. Government Securities	
C. Capital Gain		J. Royalties on Patents, Copyrights	
D. Net Operating Loss Carryover		K. Dividends	
E. Partner's Salaries (attach schedule)		L. Capital Loss	
F. Other (attach Schedule)		M. Other (attach schedule)	
G. Total Additions (enter on Line 4)	\$	N. Total Deductions (enter Line 6)	\$

SCHEDULE C

Business Allocation Percentage - Divide (Col. A) by (Col. B) to obtain decimal. Carry out to at least six places.

ALLOCATION FACTORS	Column A Woodford Co. Factor	Column B Total Factor	Column C Percentage
1. TOTAL GROSS BUSINESS RECEIPTS	\$	\$	%
2. Total Wages, Salaries and Other Personal Service Compensation Paid to employees	\$	\$	%
3. TOTAL PERCENTS			%
4. AVERAGE PERCENTAGE (Line 3 divided by number of percents)		Enter on Line 8	%

I hereby certify that the statements made herein and in any supporting schedules are true, correct, and complete to the best of knowledge

Return Must Be Signed

Signature of Individual Preparing Return Date Signature of Taxpayer Date

This return must be filed and paid in full on or before APRIL 15, or within 105 days after close of the fiscal year, sale, liquidation, or transfer.