

CITY OF BARDSTOWN, KENTUCKY 220 NORTH 5 th STREET • BARDSTOWN KY 40004 FORM NO. 520					
			LICENSE FEE RETURN		
			CALENDAR OR FISCAL YEAR ENDED		
NAME OF BUSINESS			MONTH	DAY	YEAR
ADDRESS			ACCOUNT NUMBER		
CITY	STATE	ZIP	FEDERAL TAX ID or SSN		

COMPUTATION OF LICENSE FEE		
1. Net Profits Subject to License Fee (Enter Line 7, Schedule A, Page 2)	\$	
2. City of Bardstown License Fee @ ½ % ON FIRST \$100,000 ONLY	\$	
3. Interest @ 12% per annum	\$	
4. Penalty @ 10%	\$	
5. Total (Items 2, 3 and 4)	\$	
6. Less Credits (Enter Line 2, Schedule D, Page 2)	\$	
7. Balance Due	\$	

QUESTIONS (ANSWER FULLY)

- Check Which: ___ Corporation, ___ Partnership, ___ Individual Owner, ___ Fiduciary, ___ Other (State) _____
- If Organization was Discontinued, State Whether by Dissolution _____ or Sale _____
If by sale, give Name and Address of Successor Organization _____

- Did you have any Employees in Bardstown during the taxable year? ___ Yes ___ No
- Has the Bardstown License Fee been withheld from All Subject Employees and remitted in accordance with Regulations?
___ Yes ___ No, Explain _____
- Check Whether this Return is prepared on Cash ___ or Accrual ___ Basis.

I HEREBY CERTIFY THAT THE STATEMENTS MADE HEREIN AND IN ANY SUPPORTING SCHEDULES ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

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 FISCAL YEAR PER ORDINANCE. SUBMIT A COPY OF SUPPORTING FEDERAL INCOME TAX RETURN ALONG WITH THIS RETURN.

Make Check Payable To: City of Bardstown

Mail To: City of Bardstown, Finance Dept,
220 N 5TH St
Bardstown, KY 40004

SCHEDULE A

Computation of Net Profits Subject to License Fee

1. Net Income Per Federal Return, Form 1040 _____; 1041 _____; 1065 _____; 1120 _____.....	\$	.
2. Add Items Not Deductible Under License Fee Ordinance (Schedule B).....	\$	.
3. Total (Line 1 plus Line 2).....	\$	.
4. Deduct Item Not Subject Under License Fee Ordinance (Schedule B).....	\$	.
5. Adjusted Income for Calendar Year 20____or Fiscal Year Ending _____.....	\$	.
6. Percent (As Determined by Schedule C).....		%
7. Net Profits Subject to Bardstown License Fee - Enter as Item 1, Page 1.....(\$100,000 Maximum).....	\$	.

SCHEDULE B

Adjustment of Net Profit for Federal Tax Purposes to Provisions of Bardstown License Fee Ordinance

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	\$.	G. Dividends & Interest	\$	.
B. License Fee under this Ordinance	\$.	H. Other items (list)	\$	.
C. Net Operating Loss Deduction	\$.		\$.
D. Partners' Salaries (attach schedule)	\$.		\$.
E. Other Items (list)	\$.		\$.
	\$.		\$.
	\$.		\$.
F. Total Additional (Enter as Line 2, Schedule A)	\$.	I. Total Deductions (Enter as Line 4, Schedule A)	\$	.

SCHEDULE C

Business Allocation Percentage Formula

Divide (A) by (B) to obtain Decimal - Carry Out Decimal at Least 6 Places

ALLOCATION FACTORS	Column 1 Bardstown Factor (A)	Column 2 Total Factor (B)	Column 3 Percentage
1. Gross Sales of Merchandise, Less Returns and Allowance	\$	\$	
Charges for Work or Service Performed	\$	\$	
Other Income	\$	\$	
Total Business Receipts Factor	\$	\$	
2. Wages, Salaries, and Other Personal Service Compensation	\$	\$	
Total Net Wages Factor	\$	\$	%
3. Total Percents			%
4. Average Percentage (Carry Percentage in Col 3 to Line 6, Schedule A)			%

SCHEDULE D

Credits

1. Estimates & Extension Payment(s)	\$	.
2. Total Credit (Enter As Item 6, Page 1)	\$	.