Signed

## **BOURBON COUNTY ANNUAL LICENSE FEE RETURN**

This return is due on or before April 15 for the Calendar Year or within 105 days of the end of your Fiscal Year. Please correct any error in ownership, name or address.

Name and address of Business or License	Account No.	Account No. Calendar or		
		Fisca	Fiscal Year Ended	
	Make payments to: <b>Bourbon County</b> Fiscal Court	Mo. Da	y Year	
Payer's Phone #  Important  Employer I.D. or Social Security Number	Mail to: <b>Bourbon County Tre</b> 301 Main Street Paris, KY 40361  (859) 987-213	you from which withheld taxes i on this form. Y	eceived by your employer s not to be reported our employer will	
QUESTIONS (ANSWER FULLY)	7. Check which:	Corporation Sub-Cha	pter S	
Nature of Business	_	Partnership  Individua	l Owner ☐ Fiduciary	
Date Business started in Bourbon County	Other(state)  8. Have state Authorities Changed the Net Income Originally Reported for Any Prior Year?			
3. If Organization was Discontinued, state when				
Did you have employees in Bourbon County				
<ol><li>If you answered "yes" to # 4, then you must also file BCPT FORM 01. "Employers Monthly and Quarterly Return of License Fee Withheld".</li></ol>				
6. Basis on which this return is prepared - ☐ Cash ☐ Accrual				
SCHEE	DULE A			
Net Business Income per Federal Return				
For companies or individuals that do business both in and out of     Bourbon County, complete Schedule B and enter average percentage				
3. Net PROFITS subject to License Fee				
4. Tax due at 1.25% (line 3 x .0125)				
5. $5.00\%$ Penalty 12.00% per annum interest for late filing. Minimum \$25.00				
6. Total Due				
SCHE	OULE B			
Business Allocation Percentage - Divide (Col. A) by (Cal. B)		arry out at least 6 p	laces.	
ALLOCATION FACTORS	Column A Bourbon County Factor	Column B TOTAL FACTOR	Column C PERCENTAGE	
Total Gross Business Receipts (See Instructions)	\$	\$	%	
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 2 of Schedule	e A	%	
Items subject to License Fee Tax: State and Local Taxes based on income. No Items not subject to License Fee Tax: Interest (unless one is engaged in the	business of money-lending). Divi		<u> </u>	
payment constitutes a payment or salary). Payments received from social security, pension	ns.			
I hereby certify that the information, statements, schedules, and exhibits filed he	erewith are true and correct.			

Official Title