CLARK 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. Calendar or Fiscal Year Ended			
		Make payments to:	Mo. Da	y Year	
		Clark County Fiscal Court			
		riscal Count			
		Mail to:	Salaries, wages	, and other	
Payer's Phone #		Clark County Treasurer	compensation received by		
		34 South Main, Room 10 Winchester, KY 40391	you nom minon	you from which your employer withheld taxes is not to be reported	
<u>Important</u>		(859) 745-0202	on this form. You	•	
	Employer I.D. or Social Security Number		report these earnings.		
OHECTIONS (ANS)		1			
QUESTIONS (ANSWER FULLY) 1. Nature of Business		6. Check which: Corpora		•	
Nature of Business Date Business started in Clark County		Other(state)			
If Organization was Discontinued, state when		7. Have federal authorities changed the net income originally reported for			
Dissolution ☐ or Sale ☐ If by Sale, Give Name and Address of Successor		any prior year? ☐ Yes ☐ No			
		If Answer is "Yes", Attach Sch	-		
4. Did you have employees in Clark County ☐ Yes ☐ No		8. Were you engaged in agriculture business within Clark County			
5. If you answered "yes" to # 4, then you must also file CCPT FORM 01.		during the taxable period?			
-	y and Quarterly Return of License Fee Withheld".	9. Basis on which this return is p	repared - LI Cas	n LI Accrual	
	SCHED	ULE A			
1. Net Business Incor	me per Federal Return				
Clark County, com	ndividuals that do business both in and out of plete Schedule B and enter average percentage				
•	ect to License Fee				
	of Line 3				
•	for City of Winchester business license				
6. Other (+ or -) Expla	in and attach documentation if required				
7. If Late, Penalty is 5 and Maximum 25.0	5.00% of Tax Due For Each Month or Fraction Thereof. Mi 90% Of Tax Due Plus 12.00% Interest Per Annum. (Note: A as a Whole Month)	A Fraction of a	7		
8. Total Due					
	SCHED	ULE B			
Business Allocat	tion Percentage - Divide (Col. A) by (Cal. B) t	to obtain decimal. Carry o	ut at least 6 pla	ices.	
	ALLOCATION FACTORS	Column A Clark County Factor	Column B TOTAL FACTOR	Column C PERCENTAGE	
Total Gross Busine	ess Receipts (See Instructions)	\$ \$		%	
Total Wages, Salaries and Other Personal Service Compensation Paid to Employees		\$ \$		%	
				%	
	S			%	
	ENTAGE (Line 3 divided by number of percents)	Enter on Line 2 of Schedule A		io tovoblo	
Items subject to Lice					
Items not subject to payment constitutes a pay	License Fee Tax: Interest (unless one is engaged in the but ment or salary). Payments received from social security, pensions.		oyanes on Patents, co	pyngnis (utiless tile	
I hereby certify that the	e information, statements, schedules, and exhibits filed her	rewith are true and correct.			
Signed		Official Title	Date		