		OHIO COL	JNTY KENTUCKY			Rec'd / Processed		
		NET PROFITS	LICENSE FEE RETURN					
	This	form must be completed in its entir		ed to you and c	delay the f	ïling of your Net Profits tax		
FOR	YEAR ENDING	Check If Applicable			-	Office Hours		
	//			N REQUESTS	<u>S</u>	8 a.m 4 p.m. CT		
	(i.e. 12/31/xx)			oupon provided		Monday - Friday		
DUE	DATE //	AMENDED RETURN ^{(st} NO ACTIVITY	(20.01.)	to ensure ccurate credit		Phone (270) 298-4410		
	(i.e. 4/15/xx)		(with a copy of the F		filed)	Fax (270) 298-4409		
	(Web Address		
	Name		ACCT NO.	ohiocoun	ity.ky.gov/dep	partments-and-services/Pages/Occupational-Tax-Office.aspx		
	Contact			_		Email:		
	Address				c	octaxadmin@ohiocountyky.gov		
	City, State, Zip							
		Phone No	Ext	Fax No				
				Tux Hol_				
А.		E ANSWER ALL QUESTIONS* / /Business Entity:	(if now account) D	ATE Activity Bo	aan IN Ok	aio Country		
	-	-		-	-	nio County:		
В.		administrative officer:						
C.	BUSINESS TYPE:	SOLE PROPRIETOR C-	-CORP S-CORP P	ARTNERSHIP		FIDUCIARY OTHER		
D.	Did you have EM	IPLOYEES in Ohio County this year?_	If YE	S, was EMPLOYE	ES' tax with	held and remitted?		
E.	-	*DID YOU FILE A FEDERAL TAX RETURN THIS YEAR? YES NO (CHECK ONE) If YES, attach applicable schedule						
F.		NS - Give DATE Activity / Operations				Dissolution Sale/Transfer?		
г.	_							
		NSFERRED give Name and Address of						
G.	•		Accrual					
н.	During the past y	year did Federal Authorities change or	propose to change net income r	eported for that	year or any	/ prior year?		
	If YES, which year	r(s) was adjusted?	(Attach statement of ch	anges)				
		*Complete Worksheet	on back BEFORE complet	ing the section		*		
20.	Enter ADJUSTE	D NET PROFIT (From line 15 on the ba	ack of this form)		20.			
21.	Enter PERCENT	AGE from Line 18 or 19			21.	%		
22.	Net Profits Subject to License Fee (Line 20 X Line 21)							
23.	Ohio County License Fee Due (Line 22 X 1.25%) (Applies to all Net Profits after 7/1/2020.) 23.							
24.	LESS Credit / Es	stimated Payment	inala "One dit" on "Fatimente d Decumenta" if		24.			
25.			ircle "Credit" or "Estimated Payment" if	Applicable)	25.			
		se Fee Due (Line 23 minus Line 24)						
26.	Penalty due on amo	6 per month, not to exceed 25% - MI bunt owed at original due date, unless full payr	ment was paid timely.		26.			
07		nt or Account Credit was less than amount ow	ved, figure Penalty on difference.		27.			
27.	INTEREST - 12 Calculate interest or	2% per annum n amount owed on Line 25 from original due d	late.		21.			
28.	Farm Labor at 1.2	5% of gross amount paid OR If	tax was remitted "Quarterly" please ch	eck	28.			
29.	Total Amount D	ueMinimum Payment - \$0 due if Maximum Payment - \$10,000		terest)	29.			
30.	Underpayment P	Penalty (If line 29 is greater than \$5,000			30.			
31.	Overpayment	**Refund	Credit		31.			
		le for Refund - 'Less than' \$50.00 will be c		. ,				
i nere	eby certity, under pena	alty of perjury, that the statements made herei	n and any supporting schedules are tr	ue, correct, and con	nplete to the	best of my knowledge.		
						1 1		
Prepa	rer Signature (Return m	nust be signed.)	Date Taxp	ayer Signature (Retu	rn must be sig	gned.) Date		
Print N	lame		Federal ID Prin	it Name				
Addres	SS		Phone No.	Title		Social Security No.		
Email	:		E	mail:				
<u> </u>	Make sheets	n noveble to t	Mattable for			a hadulaa ta		
	Make checks payable to: Mail this form along with supporting schedules to: Ohio Co. Occ. Tax Adm. OHIO COUNTY OCCUPATIONAL TAX * P O BOX 185 * HARTFORD, KY 42347							
		υ. ταλ Αυπ.				105 HARTFURD, <u>RT 42341</u>		

Extension Reque	st Coupon	(Detach Coupon Before Mailing)	ACCT NO.
DUE DATE		Extension Payment \$	
Mail To:	OHIO COUNTY OCCUPATIONAL TAX P.O. BOX 185 HARTFORD KY 42347	Signature	Date
		Title	NP1 Rev 7/1/20