

Crittenden County Fiscal Court
 107 South Main Street
 Suite 208
 Marion, KY 42064

Crittenden County Fiscal Court
NET PROFIT LICENSE FEE RETURN

Account No. _____

BUSINESS NAME _____

FOR YEAR ENDED
DUE DATE
15th day of the fourth month following close of the
Federal ID or Social Security No.

STREET ADDRESS _____

CITY _____

STATE _____

ZIP _____

PHONE _____

TRADE NAME, If any: _____

NATURE OF BUSINESS _____

ATTACH A COPY OF THE APPLICABLE FEDERAL RETURN OR SCHEDULE:

FED SCH. C or E (1040)
 FED 1041, 1065 OR 1120

Please note: Federal return should include Cost of Goods Sold Schedule and/or Other Schedule

ALL 1099 FORMS ISSUED MUST BE ATTACHED.

1.	Net Profit/Income per attached Federal Return	
2.	Crittenden County Percentage (From Schedule A)	
3.	Net Profit / Income within Crittenden County (line 1 x line 2)	
4.	License Fee Due (0.5% of line 3)	
5.	Annual License Fee	25.00
6.	Enter the larger of Line 4 or Line 5	
7.	Total Estimated Payments (including annual business license fee paid) and applicable credits due	
8.	Total Due (or Credit to carry forward) (line 6 minus line 7)	
9.	Penalty (5% per month, not to exceed 25%. Minimum \$25)	
10.	Interest (12% per annum)	
11.	Total Amount Due (add Lines 8, 9, and 10)	

I certify that the information contained herein and any schedules or exhibits attached are correct.

Signature: _____ Title: _____ Date: _____

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 FOR INTERNAL USE ONLY

Reconciled By: _____ Date: _____

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Federal ID/SSN

Business Name

SCHEDULE A

COMPUTATION OF PERCENTATGE OF NET PROFITS SUBJECT TO LICENSE FEE			
ALLOCATION FACTOR	(A) Crittenden County FACTOR	(B) TOTAL EVERYWHERE	(C) Crittenden County PERCENTAGE
1. Gross Sales or Receipts			