

CITY OF ELKTON, KENTUCKY
PO BOX 578, ELKTON, KY 42220

2020 OCCUPATIONAL LICENSE TAX RETURN

GENERAL INSTRUCTIONS: Any person(s) who engaged in any business for all or part of one year shall pay a license fee based upon **gross receipts from the preceding calendar or fiscal year**. All items on this application must be answered. Failure to do so will delay the processing of your application and could result in a penalty charge. Instructions are provided for your assistance on the reverse side. **Copies of all applicable federal tax forms must be attached to this return. Please print or type all answers.**

NAME/BUSINESS _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

FEDERAL ID OR SOCIAL SECURITY NUMBER _____ EMAIL _____

BUSINESS PHONE (_____) _____ FAX (_____) _____

FISCAL YEAR END DATE _____ / _____ / _____

FILING STATUS (CHECK ONE): INDIVIDUAL CORPORATION PARTNERSHIP S CORP OTHER: _____

CHECK ALL THAT APPLY: NO ACTIVITY AMENDED FINAL (complete line B) ADDRESS CHANGE

A. Did you have employees during this reporting year in our locality: YES NO

(Please note the Occupational License Tax on gross wages is 2.0% to be withheld from gross wages earned in Elkton).

B. If this is a final return, state reason for discontinuance: _____

Enter closing date: ____ / ____ / ____ List successor, if sold: _____

c. Did you make payments in the sum of \$600.00 or more for services rendered in the city limits of Elkton to any individual other than an employee? YES NO (If YES, you are required to submit "STATEMENT AND TRANSMITTAL OF NON-EMPLOYEE COMPENSATION" form with copies of 1099s to the city by the last day in February. If you have not already done so, please submit now).

OCCUPATIONAL LICENSE FEE CALCULATION

- 1) IF AN **INDIVIDUAL**, enter Gross Receipts from Federal Schedule C of Form 1040.....\$ _____
(Attach Form 1040 and applicable schedules)
- 2) IF AN **INDIVIDUAL**, enter non-employee Compensation as Reported on Forms 1099-MISC as.....\$ _____
"Other Income" on Federal Form 1040 (Attach Form 1040 and applicable schedules)
- 3) IF AN **INDIVIDUAL**, enter Rental Gross Receipts from Federal Schedule E of Form 1040.....\$ _____
(Attach Form 1040 and applicable schedules)
- 4) IF AN **INDIVIDUAL**, enter Capital Gain from Federal Form 4797, Form 6252, and/or Schedule D.....\$ _____
for property used in a trade or business (Attach federal schedules)
- 5) IF AN **INDIVIDUAL**, enter Farm Gross Receipts from Federal Schedule F of Form 1040.....\$ _____
(Attach Form 1040 and applicable schedules)
- 6) IF A **PARTNERSHIP**, enter Gross Receipts from Federal Form 1065 (Attach Federal Form 1065.....\$ _____
and applicable schedules)
- 7) IF A **CORPORATION**, enter Gross Receipts from Federal Form 1120 per Federal Form 1120S.....\$ _____
(Attach Form 1120 or 1120S and applicable schedules)
- 8) IF A **CORPORATION**, enter Gross Receipts from "Gross Rents" from Federal Form 1120.....\$ _____
(Attach Federal Form 1120)
- 9) **Gross Receipts from Rental Activity** of a **PARTNERSHIP** or **S CORPORATION**.....\$ _____
(Attach Federal Form 8825 and other applicable schedules)
- 10) **Total Gross Receipts** (Add lines 1 through 9).....\$ _____
- 11) **Sales and Excise Taxes Included in Gross Receipts**.....(_____)
- 12) **Returned Goods and Allowances Deduction**.....(_____)
- 13) **Total Deductions (Add Line 11 plus Line 12)**(_____)
- 14) **Adjusted Gross Receipts (Line 10 minus Line 13)**.....\$ _____

(Continued on next page)

- 15) Enter **Apportionment Percentage** from Schedule 1, Line 4 below **OR 100%** if all Sales.....%
and Payroll are conducted in Elkton
- 16) **Taxable Gross Receipts** (Multiply Line 14 x Line 15)\$
- 17) **License Fee Calculation** (Line 16 x .00125)\$
- 18) **License Fee Due - Calculation on Line 17 Subject to the Following:**
If Line 17 is \$6.25 OR LESS, Enter EXEMPT
If Line 17 is between \$6.26 and \$62.50, Enter Minimum Fee of \$62.50
If Line 17 is between \$62.51 and \$3,125.00, Enter the Amount on Line 17
If Line 17 is greater than \$3,125.01, Enter Maximum Fee of \$3,125.00.\$
- 19) **Enter estimated payment filed with extension and/or prior year credit on previous year return**.....\$
(Must match total already filed with city)
- 20) **Occupational License Fee Due** (Subtract Line 19 from Line 18).....\$
- 21) **Penalty** (See Instructions. Minimum \$25.00)\$
- 22) **Interest** (See Instructions)\$
- 23) **Total Amount Due** (Add Lines 20, 21, and 22)\$
- 24) **Overpayment** (If Line 23 is less than zero, enter how to apply overpayment: Credit to Next Year Refund

**SCHEDULE 1: APPORTIONMENT PERCENTAGE (Only to be used if both sales and payroll were conducted outside Elkton.
NOTE: All percentages should be carried out five (5) decimal places.**

	Column A In City of Elkton Only	Column B Total Everywhere	Column C Percentage
1. SALES FACTOR - Gross Receipts (Less other allowable deductions)....	\$ (A)	\$ (B)	A÷B %
2. PAYROLL FACTOR - Total Wages & Salaries.....	\$ (A)	\$ (B)	A÷B %
3. Total Percentages (Line 1 Column C plus Line 2 Column C).....			%
4. Apportionment Percentage (If both Lines 1 Column B and Line 2 Column B are greater than zero, divide Line 3 by 2 and enter here. If either Line 1 Column B or Line 2 Column B is zero, enter amount from Line 3 here.)			%

SIGNATURE

I hereby certify that the statements made herein and in any supporting schedules are true, correct, and complete to the best of my knowledge under penalty of perjury.

Tax Preparer

Signature of Tax Preparer

Printed Name of Tax Preparer

Date

Phone Number

Email Address

Taxpayer

Signature of Owner/Partner/Corporate Officer

Printed Name of Owner/Partner/Corporate Officer

Date

Phone Number

Email Address

NOTE: THE CITY OF ELKTON WILL NOT ISSUE A LICENSE TO ANY BUSINESS SUBMITTING A RETURN THAT IS NOT ACCOMPANIED BY THE CORRECT FEDERAL TAX FORMS, APPLICABLE SCHEDULES, AND PROPER PAYMENT.

THE FULL ORDINANCE PERTAINING TO OCCUPATIONAL LICENSE TAXES AND ADDITIONAL FORMS MAY BE FOUND ON THE CITY OF ELKTON WEBSITE AT WWW.ELKTONKY.COM.