

Annual License Fee Return

This return is due on or before April 15, 2024

Mail this form along with tax return to 308 West Maple Avenue Lancaster KY 40444

Name and Address	Account Number	Filing Due Date 04/15/2024 Make Check Payable To City of Lancaster Ky
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Final Return (Check only to close account)
 No Activity (Check box if there was no activity)

All Licensees Must Answer Questions Below:

- A. Principal business activity _____
- B. What is your Social Security # or Federal Id # _____
- C. Home Phone _____ Business Phone _____
- D. During the past year did Federal Authorities change or propose to change net income reported for that year or any prior year?
 Yes / No (If yes, which year was adjusted?) _____ Attach statement of changes
- E. Principal Corporation Administrative Officer's Name _____
- F. Was there a change in ownership in the past year?
 Date of change _____ Name and address of new owner _____

Did you make payments in the sum of \$600.00 or more to any individual for services rendered in the City of Lancaster? (Other than employee) YES / NO If yes, you are required to file form 1099

For employees who do not have occupational taxes withheld and choose to file annually please use .50% for calculating your gross withholdings.

- 1. Net profit per Federal returns
- 2. Occupational License Fee (Line 1 x .50%)
- 3. Less Estimated Payments and Credits
- 4. Balance Due (Line 2 - Line 3)
- 5. Penalty @ 5% per month (or portion thereof, not to exceed 25% Minimum \$25.00)
- 6. Interest @ 1% per month from Due Date
- 7. UNPAID EMPLOYEE WITHHOLDINGS**
- 8. TOTAL AMOUNT DUE**
- 9. Overpayment Claimed (if line 3 exceeds line 2) Please send written request for refund
 Credit to next year estimated payment Yes / No

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____