JESSAMINE COUNTY/CITY OF NICHOLASVILLE NET PROFIT LICENSE FEE RETURN

FORM JCOT 2

THIS RETURN IS DUE ON OR REFORE APRIL 15th FOR THE CALENDAR YEAR OR WITHIN 105 DAYS OF THE FISCAL YEAR END

				Account No.	CALENDA	R/FISCAL YEAR END		
	me and Address of I t any error in ownership		Month	Day	Year			
					For Office Use Only Received		Make Checks Payable to: City Tax: City of Nicholasvill	
				Check No.	Check No.	Co. Tax: Jessamine Co Fiscal C		
			•	Amount	Amount	Occupation 105 (onal Tax Office Court Row c, Kentucky 4035	
				City	County		9) 885-3206 59) 887-0900	
Federal	I.D. or Social Secu		eck only to close acc	ccount) Amended Return				
. C	heck federal filing status	s: []Individual ow	ner 🔲	Partnership Corporati	ion S-Corp	LLC Other		
All questions must	be completed:							
	ss Activity			F. If organization v	vas discontinued	l:		
3. Business Phone	:			Date	by	/ 🗌 Dissolut	ion 🗌 Sale	
C. Business Site Ado	lress	□ N □ N.	-	New owner name	and address			
	ployees in Jessamine Co. ille? □ Yes □ No	☐ Yes ☐ INO	•	G. Did you make pay	ments in the sum	of \$600.00 or	more to any	
	norities changed the Net	Income as original	lly	individual for serv				
Reported for any	prior year? 🔲 Yes 🔲 l	No		City of Nicholasvi			employee)	
*If yes, attach sched	hule of changes for each yea	r.		If yes, you are req	uired to file Form	1099.		
SECTION 1: CALC	ULATION OF LICENS	E FEE LIABILIT	Ϋ́Y	City of Nicholasville		Jessamine Cour	ıty	
	\$			☐ No activity this year		No activity this	-	
	come per worksheet (Se		1		1			
2. Business Allocation Percentage (See Section 2)			$\frac{2}{2}$		2			
3. Taxable Net Profit (Line 1 multiplied by Line 2)			3		3		······································	
4. License Fee Due at 1% (Line 3 multiplied by 1%)								
5. Estimated Payments/Credits								
6. Subtotal (Line 4	•		6_		o			
•	nd/or filing (5% per month o		7		7			
portion thereof not to exceed 25%; \$25.00 minimum)								
8. Interest (12% per annum for late payment and/or filing)			°		9			
9. Total Due Ⅰ0. If overpaid, please indicate ☐Account Credit or ☐Refund			10_		10			
SECTION 2: BUSIN essamine County outsid	IESS ALLOCATION PE le the City of Nicholasville m Col A: Nicholasville	RCENTAGE: Lice	, regardl	those business operations we ess of profit or loss. Percen	tages should be carried Col D: $A \div C = 1$	ed out four (4) p D Col	of Nicholasville or laces. E: B ÷C = E amine County %	
JROSS RECEIPTS		— <u> </u>						
rom sales made and/or ervices rendered	\$	\$		\$		%	%	
WAGES, SALARIES and other		dı.		o .		-	n.,	
ompensation paid to imployees	\$	\$		\$	·	%	%	
fotal Percentages (Add	otal Percentages (Add the percentages computed above for columns D and E)						%	
Average Percentage (Total Percentage divided by number of percents) Enter on Line 2 of Section 1						%	%	
certify that the	statements made he	rein and in any	/ Silnn	orting schedules er	e frue correct	and compl	ete to the	
best of my knowl		a waxa arku aki aldiy	aupp	orang seneames at	~ 11 uo, 6011 cel	and compl	or to the	
Signed			T	itle	Da	ite		
·		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~	***************************************				

Signed

SECTION 3: WORKSHEET Please complete the column that relates to your form of business	Individual	<u>Partnership</u>	Corporation and S-corp	Other
 Non-employee compensation per federal Form 1099 reported as "other income" on federal Form 1040 (attach Form 1040 and 1099) 		N/A	N/A	Nucleoid contention of contention of contention of the contention
2. Net profit or (loss) per Schedule C, C-EZ, E or F of federal Form 1040 (attach Form 1040 and applicable Schedule(s))	Consequence property comment in layout and although a symbol contribution in the desirable.	N/A	N/A	yawwaxayuun haddhiiddahaddahaddahaddahad
 Gain or (loss) on the sale of property used in a trade or business per federal Form 1040 (attach Form 4797 and/or Schedule D) 	***************************************	N/A	N/A	proportion, and demand a fundamental detailed.
 Ordinary income or (loss) per federal Form 1065 (attach form 1065) 	N/A		N/A	proyection of the second secon
Taxable income or (loss) per federal Form 1120 or 1120 A (attach Form 1120 or 1120 A)	N/A	N/A	<u> </u>	
 Ordinary income or (loss) per federal Form 1120S (attach Form 1120S) 	N/A	N/A	ADDRESSAN STATE OF THE STATE OF	The state of the s
 Other additions from Schedule K of federal Form 1065 1120S (see instructions) (attach Schedule K) 	N/A	Association and management of the second of	(Mayoro and a control of the control	
8. Other business income (attach schedule)	ERMANANCII (TOOTINEERITTAN TITOMA NAMAHA ETAMANAA TOTIONAANA		MACOON MA	THE STATE OF THE S
9. Total business income (add Lines 1 through 8)		2000 William Street Chronocom Commission Com		Majo del de de messo de so compositore .
 Other allowable subtractions from Schedule K of federal Form 1065 or 1120S (see instructions) (attach Schedule K) 	N/A			
11. Net business income (Line 9 less Line 10)				**************************************
ITEMS NOT DEDUCTIBLE				
12. State and local license fees or taxes based on income		MANAGEMENT OF THE PROPERTY OF		(200-200-000)
13. Net operating loss deduction	N/A	N/A	National Association and the Company of the Company	wayyeyaya istalah kalanda kalanda kalanda ka
14. Partners' salaries (attach schedules)	N/A	www.gog.com/procedure/schools/	N/A	
15. Expenses associated with income not subject to the license Fee (attach schedule)	Material State of Control of Cont	энхих на этом стать при	WASHINGTON AND AND AND AND AND AND AND AND AND AN	padrianiani estimada de concentra de concent
16. Other (attach full explanation and schedule)				
17. Total items not deductible (Add Lines 12 through 16)	department of the control of the con	. (- Kondamoder Angelege programme dans
ITEMS NOT SUBJECT		•	F	
18. Interest income from U.S. obligations	N/A			2000/2009 pagagang mengapapanan mendada sakan dalam da
19. IRC Section 78 dividends and IRS Section 951 dividends	N/A		***************************************	
20. Kentucky alcoholic beverages net (attach schedule)	ADMINISTRAÇÃO DE CONTRACTOR DE			
21. Other (attach full explanation and schedule)				
22. Total items not subject (add Lines 18 through 22)	BORROS HANGE HANGE STATE OF THE		A STATE OF THE STA	and an exercise annual new such desirables of the desirables.
23. Adjusted net business income (Line 11 plus Line 17 less Line 22) Enter in Section 1, Line 1	Mandadoresia de canada se menor en el composito de la composito de canada de			Section and Australia Control