



City of Vanceburg, 189 Second St., Vanceburg, KY 41179

Phone 606-796-3044 | Fax 606-796-6096

Email Greta.May@CityofVanceburg.com or Brenda.Bear@CityofVanceburg.com

www.cityofvanceburg.com

NET PROFIT LICENSE FEE RETURN

For the Year Ended _____ To be Filed by 15th day of the Fourth Month Following Close of the Year.

BUSINESS NAME _____ EMPLOYER IDENTIFICATION NO. _____

ADDRESS _____

PHONE _____ TRADE NAME _____

NATURE OF BUSINESS _____

1.	Net Profit/Income per attached Federal Return	
2.	Add: Items Not Deductible (Line 4, Schedule A on Back)	
3.	Adjusted Net Profit (Line 1 Plus Line 2)	\$
4.	Vanceburg Percentage (From Schedule B on Back)	
5.	Net Profit Subject to License Fee (Line 3 x Line 4)	\$
6.	License Fee Due (1% of Line 5)	\$
7.	Annual Business License Fee	
8.	Enter the Large of Line 6 or Line 7	\$
9.	Total Estimated Payments (including Annual Business License Fee) and Prior Credits	
10.	Refund or Credit. If Line 9 is Greater than Line 8, Enter the Difference. (Circle Refund or Credit.)	\$
11.	Balance Due. If Line 8 is Greater than Line 9. Enter the Difference	\$
12.	Penalty (5% Per Month if Filed After Due Date - Minimum \$25)	
13.	Interest (12% Per Annum Until Paid)	
14.	Total Amount Due (Add Lines 11, 12 and 13)	\$

ATTACH COPY OF APPLICABLE FEDERAL RETURN OR SCHEDULE AND ALL 1099 FORMS. PLEASE NOTE FEDERAL RETURN SHOULD INCLUDE COST OF GOODS SOLD SCHEDULE AND/OR OTHER SCHEDULE.

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

Signature _____ Title _____ Date _____

Internal Use Only: Reconciled by _____ Date _____