

CALDWELL COUNTY, KENTUCKY OCCUPATIONAL TAX TAX YEAR 2021 NET PROFIT LICENSE FEE RETURN

FOR BUSINESS, PROFESSIONS OR OTHER ACTIVITY WITHIN CALDWELL COUNTY, KY, CONDUCTED BY CORPORATIONS, PARTNERSHIPS,
INDIVIDUALS AND FIDUCIARIES OF ESTATE AND TRUSTS, FARM OWNERSHIP (RESIDENT OR NON-RESIDENT)

Name: _____

Address: _____

City, State, Zip: _____

Vendor Code: _____

MAKE CHECK PAYABLE TO:
Caldwell County Treasurer

RETURN TO:
OCCUPATIONAL TAX ADMINISTRATOR
100 EAST MARKET ST., ROOM 27
PRINCETON, KY 42445
Phone 270.365.9776
E-Mail: ldunning@caldwellcourthouse.com

PLEASE NOTIFY THIS OFFICE OF ANY CHANGES IN OWNERSHIP, NAME OR ADDRESS SHOWN ABOVE

ALL AMOUNTS ROUNDED TO NEAREST DOLLAR

1. Total Gross Receipts/Income in Caldwell County (year ended ____/____/____).....		
2. Total Expenses in Caldwell County.....		
3. Net Profit Caldwell County (Line 1, less Line 2).....	\$	-
4. Caldwell County Tax Liability is 1.5% of Amount on Line 3 (SEE GENERAL INSTRUCTIONS).....	\$	-
5. Penalty 1% Per Month, Not Exceeding 10%, of Line 4.....	\$	
6. Interest 1% Per Month.....	\$	
7. Balance Due - Minimum of \$25.00 (Line 4, plus Line 5 & 6).....	\$	-

8. THE MINIMUM AMOUNT DUE IS \$25 . IF LINE 7 IS LESS THAN \$25, THE AMOUNT DUE IS \$25. (Change effective 2014 tax year)

INSTRUCTIONS ON BACK OF RETURN

I hereby certify that the information provided herein is true, correct and complete.

Please attach a copy of Federal Income Schedule used in completing your return as required by the Ordinance.

Signature _____ Date _____

Telephone No. (daytime) _____ **E-Mail:** _____
For E-mail Delivery of Form

Social Security _____ or Federal Tax No. _____

----- **Preparer Use Only** -----

Signature _____ Date _____

Firm Name: _____ **E-Mail:** _____

Address: _____

**THIS RETURN MUST BE FILED ON OR BEFORE MAY 15 OF EACH YEAR
OR WITHIN 135 DAYS OF THE FISCAL YEAR END SHOWING A NET PROFIT OR NET LOSS**

