



**MCLEAN COUNTY, KY
P.O. BOX 128 CALHOUN, KY 42327**

Phone
(270)273-9170

Office Hours
Tuesday-Thursday

NET PROFIT LICENSE FEE RETURN FOR YEAR: _____

TO BE FILED BY APRIL _____, _____ OR WITHIN 105 DAYS AFTER CLOSE OF FISCAL YEAR

TYPE OR PRINT TAXPAYER'S NAME, ACCOUNT #, AND ADDRESS BELOW

DID YOUR BUSINESS ACTIVITY CEASE IN
MCLEAN COUNTY?

YES _____ NO _____

IF YES, WHEN _____

PLEASE NOTIFY OUR OFFICE OF ANY CHANGES IN NAME OR ADDRESS SHOWN ABOVE

COMPUTATION OF NET PROFIT LICENSE FEE

- 1. Total Gross Receipts/Income in McLean County
(Business Income, Farm Income, Rental Income, etc.) \$ _____
- 2. Total Expenses in McLean County \$ _____
- 3. Net Profit in McLean County (Line 1 Less Line 2)
(If less than \$2,000, then no payment is due and you need not
complete line 4-8, form must still be signed, returned, and filed) \$ _____
- 4. License Fee Due (1% (.01) of Line 3) (Maximum is \$500.00) \$ _____
- 5. Interest for Late Payment (12% Per Year) (1% Per Month) \$ _____
- 6. Occupational License Fees (1% of Gross Wages)
(Applicable if not paid on a Quarterly Basis) \$ _____
- 7. Credit (Prior Payment) (Must Attach Proof of Prior Payment) \$ _____
- 8. Total Amount Due (Line 4 Plus Line 5 Plus Line 6 Less Line 7) \$ _____

Please make check payable to and mail to:

**MCLEAN COUNTY LICENSE FEE ADMINISTRATOR
P.O. BOX 128
CALHOUN, KY 42327**

All questions should be directed to the McLean County License Fee Administrator by mail to the above address or by telephone at (270)273-9170. The McLean County License Fee Administrator is available by appointment only.

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

Date Signature Title

Taxpayer must attach a copy of its federal income tax return, including all supporting statements and schedules.

Preparer Use Only

Firm Name and Address: _____

Date: _____ Signature of Preparer: _____

INSTRUCTIONS

This return should be taken to your professional tax preparer to be completed with your federal and state returns.

GENERAL

All persons engaged in any trade, occupation, or profession within McLean County must pay a business license fee equal to one percent (1%) of the net profit realized from such activity. If the net profit is less than two thousand dollars (\$2,000.00), then no license fee is due, but this return must be completed and returned in either circumstance.

MAXIMUM LIABILITY

In no event shall any person be liable for a business license fee in excess of five hundred dollars (\$500.00). The payment of five hundred dollars (\$500.00) by any person shall eliminate that person's reporting requirements. If a person pays the maximum liability, then that person only needs to identify their name and address and sign the return.

REQUEST FOR EXTENSION

If an extension of time for filing is necessary, you must notify the License Fee Administrator, in writing of your request for an extension.

CONTACT INFORMATION

All questions should be directed to the License Fee Administrator by mail or telephone as follows:

McLean County License Fee Administrator

P.O. Box 128

Calhoun, KY 42327

(270)273-9170