



CITY OF WILDER GROSS RECEIPTS TAX AND OCCUPATIONAL LICENSE RENEWAL FEE

**520 LICKING PIKE
WILDER, KY 41071**

Please print

Business name: _____

Address: _____

Address: _____

City/State/Zip: _____

Phone Number: _____

Social Security # or Tax ID #: _____

FISCAL YEAR ENDS _____

EXTENSION REQUEST FILING INSTRUCTIONS:
*For a six month extension, make a copy of this form and pay at least 90% of any estimated fees due.
*Sign, return and remit by due date.

FINAL RETURN (Check only to close account)

Yes No Did you make payments in the sum of \$600 or more to any individual for services rendered in the City of Wilder other than an employee? If YES, You are required to file form 1099-MSC with this form.

Renewal of Occupational License - \$50.00 – Box 9.

COLUMN 1	Col. 2	Col. 3	Col. 4	Col. 5	TAX/FEE LIMITS		Col. 6	Col. 7	Col. 8	
	TAX/FEE TYPE	SUBJECT EARNINGS	RATE (As a Decimal)	TAX AMOUNT	MINIMUM TAX	MAXIMUM TAX	TAX DUE	ESTIMATED PAYMENT	2019 TOTAL Gross TAX DUE	
Wilder	GROSS		.00075		.00	\$40,000				
RETURN MUST BE SIGNED—I hereby certify, under penalty of perjury, that the information herein and in any supporting schedules is true, correct and complete to the best of my knowledge.							TOTAL Col. 8		9	Occ. License Renewal \$50.00
LICENSEE'S SIGNATURE _____ DATE _____ PRINTED NAME _____ TITLE _____							TOTAL (Box 8 plus Box 9) 10.			
PREPARER'S SIGNATURE _____ DATE _____ PRINTED NAME _____							PENALTY (5% per month or portion thereof not to exceed 25%. Minimum \$25) 11.			
PREPARER ADDRESS _____ PHONE NO. _____ SOCIAL SEC. # OR FED. TAX ID. _____							INTEREST (12% annum) 12.			
ATTENTION: Federal ID numbers and Social Security Numbers must be Supplied for both Tax Preparer and Licensee.							TOTAL AMOUNT DUE 13. (check here if REFUND due ____)			
							CHECK NUMBER _____			

**HAVE YOU ATTACHED ALL APPLICABLE FEDERAL FORMS,
SCHEDULES AND STATEMENTS?**

DUE WITHIN FOUR MONTHS FROM THE END OF YOUR FISCAL YEAR.

**Any Questions, please call Juanita Schultz or Karen Schlipf at
859-581-8884.**

CITY OF WILDER
SCHEDULE G: GROSS RECEIPTS METHOD
SPECIFIC WORKSHEET

(Complete only one column, whichever is applicable)

For City of Wilder

(Make a copy of Schedule G)

	Fed. ID # _____		
	INDIVIDUAL	PARTNERSHIP	CORPORATION
1) Gross Receipts from Federal Schedule C of Form 1040 (Attach Schedule C Page 1 and 2)	1) _____		
2) Gross Receipts from Federal Schedule E of Form 1040 (Attach Schedule E)	2) _____		
3) Gross Receipts from Federal Form 1065 (Attach Federal Form 1065)		3) _____	
4) Gross Receipts from Federal Form 1120, 1120A, 1120S (Attach Federal Form 1120, 1120A, 1120S)			4) _____
5) Gross Receipts from "Gross Rents" Federal Form 1120 (Attach Federal Form 1120)			5) _____
6) Gross Receipts from Rental Real Estate of a Partnership or S Corporation (Attach Federal Form 8825)			
7) Total Gross Receipts (Add Lines 1 through Line 6)	7) _____	7) _____	7) _____
8) Gross Alcoholic Beverage Sales	8) _____	8) _____	8) _____
9) Excise Tax (Sales Tax)	9) _____	9) _____	9) _____
10) Returned Goods	10) _____	10) _____	10) _____
11) Total Deductions (Add Lines 8 through Line 10)	11) _____	11) _____	11) _____
12) Adjusted Gross Receipts (Line 7 minus Line 11)	12) _____	12) _____	12) _____
13) Allocation Percentage (If paying on less than 100% of gross receipt(s) (From Schedule Y, Page 5, Line 5)	13) _____	13) _____	13) _____
14) SUBJECT EARNINGS (Multiply Line 12 x Line 13. Enter result here and on Page 1, Col. 3, "SUBJECT EARNINGS" for the City)	14) _____	14) _____	14) _____

SCHEDULE Y: BUSINESS ALLOCATION

(Only to be used by businesses paying on less than 100% of the gross receipts)

For the City of Wilder Make copy of Schedule Y

	A. LOCATED EVERYWHERE	B. LOCATED CITY	C. PERCENTAGE (B DIVIDED BY A)
PROPERTY FACTOR:			
1a) AVERAGE VALUE OF REAL & TANGIBLE PERSONAL PROPERTY	_____	_____	_____
1b) GROSS ANNUAL RENTALS PAID MULTIPLIED BY 8	_____	_____	_____
TOTAL (1a + 1b)	_____	_____	_____ %
PAYROLL FACTOR:			
2) WAGES, SALARIES, ETC. PAID EMPLOYEES	_____	_____	_____ %
SALES FACTOR:			
3) GROSS RECEIPTS FROM SALES, RENTS, WORK OR SERVICES PERFORMED	_____	_____	_____ %
4) TOTAL PERCENTAGES			_____ %
5) ALLOCATION PERCENTAGE (Divide TOTAL PERCENTAGES by NUMBER OF PERCENTAGES USED (IF COLUMN "A" OF ANY FACTOR IS ZERO, DO NOT USE THAT FACTOR TO DIVIDE BY))			_____ %