

SCHEDULE B

Note: Add and/or deduct only those items which are included in calculating net income per federal return.

ITEMS NOT DEDUCTIBLE (ADD)

- A. State or local taxes based on income..... _____
- B. Capital Gain – Business Portion..... _____
- C. Net Operating Loss Deduction..... _____
- D. Partner’s Salaries (Attached Schedule)..... _____
- E. Other Items (List)..... _____
- F. Total Additions (Enter on Line 2 Schedule A)..... _____

ITEMS NOT SUBJECT (DEDUCT)

- G. Interest..... _____
- H. Royalties on Patents, Copyrights..... _____
- I. Dividends..... _____
- J. Capital Loss (50% Deduction)..... _____
- K. Other (Attach Schedule)..... _____
- L. Total Deductions (Enter on Line 4 Schedule A)..... _____

SCHEDULE C

Business Allocation Percentage – Divide Column A by Column B to obtain decimal. Carry out at least six spaces.

Allocation Factors	Column A	Column B City of Cynthiana Only	Column C (%)
1. Total Gross Business Receipts Per Federal Return	_____	_____	_____
2. Total Wages, Salaries, and Other Compensation	_____	_____	_____
3. Total Percentage.....			_____
4. Average Percentage (Line 3 divided by number of Percentages).....			_____

(Enter this amount on Line 6 Schedule A)

PLEASE REMEMBER TO INCLUDE ALL SUPPORTING DOCUMENTATION WITH YOUR RETURN

A COPY OF FEDERAL TAX RETURN USED AS BASIS OF LICENSE FEE MUST BE INCLUDED!

I hereby certify that the information, schedules, statements, and exhibits filed herewith are true and correct.

Signed: _____

Phone # _____

Title: _____

Date: _____

Make check payable to: **City of Cynthiana**

Mail to: **City of Cynthiana, Director of Finance**
 P.O. Box 67
 Cynthiana, Ky. 41031