

CITY OF ST. MATTHEWS
P. O. BOX 7097
LOUISVILLE, KY. 40257-0097
(502) 895-9444

YEAR _____

OFFICIAL USE ONLY

BUSINESS LICENSE TAX DEPARTMENT
(502) 899-2515

CHECK # _____

AMOUNT PAID _____

IMPORTANT NOTICE: READ CAREFULLY BEFORE COMPLETING THIS FORM

DATE PAID _____

BUSINESS/APPLICANT NAME _____

BUSINESS ADDRESS _____
CITY, STATE, ZIP _____ LOCAL TELEPHONE NUMBER _____

MAILING ADDRESS _____
IF DIFFERENT FROM ABOVE _____ CITY, STATE, ZIP _____

CONTACT PERSON _____
LOCAL TELEPHONE NUMBER _____

PRINCIPLE BUSINESS ACTIVITY _____ CONSOLIDATED IRS FORM FILED _____

ACCOUNT # _____ NEW BUSINESS ___ RENEWAL ___ FID/SS# _____ FINAL RETURN _____
See instructions Filed Federal Extension _____

NUMBER OF MONTHS _____ BUSINESS CONDUCTED IN ST. MATTHEWS _____

SEE REVERSE SIDE FOR INSTRUCTIONS COMPLETE BY APRIL 30

1) ST. MATTHEWS GROSS RECEIPTS, AS REPORTED
BY BUSINESS ON FEDERAL INCOME TAX RETURN

\$ _____

2) GROSS RECEIPTS TAX TO BE PAID, BASED ON
TAX TABLE ON REVERSE SIDE

\$ _____

3) 50 PERCENT DISCOUNTED PAYMENT AMOUNT IF
PAID BY APRIL 30

\$ _____

4) PENALTY, 10% OF LINE 2 IF PAID AFTER APRIL 30

\$ _____

5) INTEREST 1.5% OF LINE 2 FOR EACH MONTH OR PART
THEREOF BEGINNING MAY 1

\$ _____

6) TOTAL PAYMENT DUE = LINES, 2, 4 & 5

\$ _____

I HEREBY CERTIFY, UNDER PENALTY OF PERJURY, THAT THE STATEMENTS MADE HEREIN AND ANY SUPPORTING
SCHEDULES ARE TRUE, CORRECT AND COMPLETE, TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF RETURN PREPARER _____

SIGNATURE OF LICENSEE _____

PRINT NAME _____

PRINT NAME _____

TELEPHONE NUMBER _____

DATE _____

TELEPHONE NUMBER _____

CITY OF ST. MATTHEWS

DATE DUE: The St. Matthews Gross Receipts Business License Tax Application is to be completed and payment due on April 30 of each year, and will be considered delinquent on May 1. MUST BE RECEIVED BY APRIL 30, NOT POSTMARKED BY APRIL 30. This is applicable to both calendar year and fiscal year end filings.

DISCOUNT: To receive the discount of 50 percent, payments on business license tax MUST BE PAID BY APRIL 30 OF EACH YEAR.

PENALTY & INTEREST: A penalty of 10% of the tax due applies if payment is made on May 1. Additionally, interest is charged at the rate of 1.5% per month or part thereof)

RECEIPTS FROM THE SALE OF ALCOHOLIC BEVERAGES ARE NOT TO BE COMPUTED IN GROSS RECEIPTS.

GENERAL: Business licenses are required for all businesses located in the City of St. Matthews and/or businesses coming into the City to conduct work. Each separate location is to apply for their individual licensing. Each business location in the City of St. Matthews are to report gross receipts from that location and payment made accordingly. Filing fee for a first year of business or part thereof is \$25.00. Subsequent renewal fees are based on gross receipts. See tax table below:

TAX TABLE

RECEIPTS LESS THAN \$ 30,000.00.....	\$25.00
\$30,001.00 BUT LESS THAN \$ 40,000.00.....	\$30.00
\$40,001.00 BUT LESS THAN \$ 50,000.00.....	\$40.00
\$50,001.00 BUT LESS THAN \$ 60,000.00.....	\$50.00
\$60,001.00 BUT LESS THAN \$ 70,000.00.....	\$60.00
\$70,001.00 BUT LESS THAN \$ 80,000.00.....	\$70.00
\$80,001.00 BUT LESS THAN \$ 90,000.00.....	\$80.00
\$90,001.00 BUT LESS THAN \$100,000.00.....	\$90.00

All receipts in excess of \$100,000.00 are to be taxed at the rate of fifty cents (.50) for each \$1,000.00 or fraction thereof. Payment due - \$ 90.00 plus amount figured for excess of gross receipts of \$100,000.00 added together.

PAYMENTS: Checks must be made payable to James L. King, City Treasurer and mailed to CITY OF ST. MATTHEWS, BUSINESS LICENSE DEPARTMENT, P. O. BOX 7097, LOUISVILLE, KY., 40257-0097.

ATTACHMENTS: If the business is located in the City of St. Matthews the following Internal Revenue Service forms must be attached to this return:

- A. If taxpayer is an individual, attach IRS Form 1040, Schedule C., or equivalent;
- B. If taxpayer is a partnership, attach Page 1, IRS Form 1065, or equivalent;
- C. If taxpayer is a corporation, attach Page 1, IRS form 1120, or equivalent.

QUESTIONS: Any questions can be directed to the Business License Department, (502)899-2515 during normal business hours of 7:30 A.M. to 4:00 P.M., Monday through Thursday, 7:30 A.M. to 11:30 P.M. Friday. City Hall street address - 3940 Grandview Avenue, Louisville, Ky., 40207, (502) 895-9444.

OTHER TAXES: The City of St. Matthews has an Occupational Employee Withholding Tax, Professional License Tax, and Real Estate Tax, in addition to the Gross Receipts Tax. If any additional information is needed, please call the appropriate clerk.

YOUR BUSINESS LICENSE WILL BE ISSUED UNDER THE PROVISIONS OF THE CITY OF ST. MATTHEWS CODE CHAPTER 100. YOU ARE CAUTIONED THAT THE LICENSE DOES NOT PERMIT OPERATION OF A BUSINESS IN VIOLATION OF OTHER MUNICIPAL CODE SECTIONS. YOUR BUSINESS LOCATION WILL BE CHECKED BY ZONING AND, IF NECESSARY, THE FIRE DEPARTMENT OFFICIALS. IF YOU HAVE ANY DOUBT THAT YOUR BUSINESS LOCATION CONFORMS WITH THE REQUIREMENTS OF THE MUNICIPAL CODE ADMINISTERED BY THESE DEPARTMENTS, YOU ARE URGED TO CONTACT THESE DEPARTMENTS FOR FURTHER INFORMATION BEFORE FILING THIS APPLICATION FOR A BUSINESS LICENSE.. LICENSE FEES ARE NON-REFUNDABLE.

THE BUSINESS LICENSE DEPARTMENT IS TO BE NOTIFIED IF YOUR BUSINESS MOVES FROM THE CITY, ANY CHANGE OF OWNERSHIP, NAME CHANGE OR CHANGE OF ADDRESS.