61A200 (1-02)
Commonwealth of Kentucky
REVENUE CABINET

Department of Property Valuation
Division of State Valuation
Frankfort, KY 40620

➤ *See Instructions*

PUBLIC SERVICE COMPANY PROPERTY TAX RETURN
For Year Ending December 31, 2001

This return must be filed with the Department of Property Valuation between January 1 and April 30, 2002.

APRIL 2002						
S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

1. Taxpayer Name 1				**LEAVE BLANK**	
Name 2				GNC	
Address 1				Postmark	
Address 2				Log In	
City	State	ZIP Code	FEIN	Entry Person	
Contact Person				Preaudit	
Phone ( )	Fax ( )	E-Mail			

2. Tax Agent Name 1			
Name 2			
Address 1			
Address 2			
City	State	ZIP Code	FEIN
Contact Person			
Phone ( )	Fax ( )	E-Mail	

Taxpayers completing this return must complete the agency portion in order to maintain an agent status.

Agents completing this return must have a current power of attorney on file with the Kentucky Revenue Cabinet.

3. Type of Public Service Company

4. Type of Ownership
☐ Foreign
☐ Corporation ☐ Partnership ☐ Individual
☐ S Corporation ☐ LLC ☐ Other

5. Organization Year State

6. Year Kentucky Operations Commenced:

7. Which address above is to be used for mailing the assessment notice, tax bills and certifications?
☐ Taxpayer Address ☐ Other _____
☐ Tax Agent Address _____

8. Which address above is to be used for mailing the tax return packet?
☐ Taxpayer Address ☐ Other _____
☐ Tax Agent Address _____

9. Is your company affiliated with any other companies? (Parent/Subs) ☐ **Yes** ☐ **No**
If yes, submit organizational chart and informational reports. (KRS 136.130 and 136.140)

10. Has an independent authority or agency valued your property? ☐ **Yes** ☐ **No**
If yes, submit a copy of the appraisal report. (KRS 136.130 and 136.140)

11. Has the company or a fraction thereof sold, been purchased or merged within the last year? ☐ **Yes** ☐ **No**
If yes, complete the appropriate informational report, Revenue Form 61A209 or Revenue Form 61A210, included in this packet.

12. Are you required to file a federal regulatory report? ☐ **Yes** ☐ **No**
If yes, submit a copy of the regulatory report(s). (KRS 136.130 and 136.140)

13. Do you intend to claim the Coal Incentive Tax Credit? ☐ **Yes** ☐ **No**
If yes, provide a copy of the Coal Incentive Tax Credit Certificate. (KRS 141.110)

I declare under penalties of perjury that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

Signature _____ Title _____ Date _____