

TELECOMMUNICATIONS PROVIDER TAX RETURN



Check if Amended Reason _____

Name and Address <div style="font-size: 2em; font-weight: bold; text-align: center;">SAMPLE</div>	Period Beginning 07-01-05 Period Ending 07-31-05 Return Due 08-20-05 Account No. 001234	FOR OFFICIAL USE ONLY
--	--	------------------------------

Part I—Excise Tax (Consumers skip to line 8)

1. Gross Receipts (from sale of multichannel video programming service provided to a person whose place of primary use is in Kentucky) \$ XXX,XXX,XX
2. Deductions
 - a. Sales to governmental agencies or units \$ _____
 - b. Sales to resident nonprofit educational, charitable and religious institutions \$ _____
 - c. Services resold \$ _____
 - d. Internet access \$ _____
 - e. Federal, state and local taxes \$ _____
 - f. Bad debt \$ _____
 - g. Other (describe—required if any amount is entered) \$ _____
3. Total Deductions (add lines 2a through 2g) \$ XXX,XXX,XX
4. Net Receipts subject to 3% excise tax (subtract line 3 from line 1) \$ XXX,XXX,XX
5. Excise Tax Due (multiply line 4 by .03) \$ XXX,XXX,XX
6. Compensation (deduct 1.75% of the first \$1,000 of line 5 and 1.00% of the amount in excess of \$1,000—compensation limited to \$1,500). Deduct compensation only if return and payment are timely \$ XXX,XXX,XX
7. Total Excise Tax Due (subtract line 6 from line 5) \$ XXX,XXX,XX

Skip to Part II

8. **CONSUMERS:** Enter the amount of retail purchases of multichannel video programming \$ XXX,XXX,XX
9. Excise Tax Due (multiply line 8 by .03) \$ XXX,XXX,XX

Skip to Line 13

Part II—Allocation Schedule (use continuation page if necessary)

1 County Code	2 County Name	3 Gross revenues from MVP	4 Gross revenues tax from MVP (column 3 *2.4%)	5 Gross revenues from communication services	6 Gross revenues tax from communication services (column 5 *1.3%)
XXX	XXX	\$ XXX,XXX,XX	\$ XXX,XXX,XX	\$ XXX,XXX,XX	\$ XXX,XXX,XX
Totals—Gross Revenue must equal lines 10 and 11, Part II		\$ XXX,XXX,XX	\$ XXX,XXX,XX	\$ XXX,XXX,XX	\$ XXX,XXX,XX

10. **Gross Revenues** (for the provision of multi-channel video programming services) \$ XXX,XXX,XX
 11. **Gross Revenues** (for the provision of communications services) \$ XXX,XXX,XX
- Lines 10 and 11 should equal the total of columns 3 and 5 respectively.
12. Total Gross Revenue Tax Due (column 4 plus column 6) \$ XXX,XXX,XX

Part III—Payment

13. Total Tax Amount Due (add lines 7 and 12) \$ XXX,XXX,XX
- CONSUMERS (enter line 9)**
14. Interest (see instructions) \$ XXX,XXX,XX
 15. Penalties (see instructions) \$ XXX,XXX,XX
 16. Total Amount Due (add lines 13, 14 and 15) \$ XXX,XXX,XX

▶ **IMPORTANT:** Return must be postmarked by the 20th of the month following the taxable month to avoid the assessment of penalty and interest. Remit total amount due. Make check payable to **Kentucky State Treasurer**. Mail to **Department of Revenue, Frankfort, KY 40619**.

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

Print Name of Tax Return Preparer and Title

Print Name, Title of President or
Other Principal Officer, Partner or Proprietor

Signature of Tax Return Preparer Date

Signature of President or
Other Principal Officer, Partner or Proprietor Date

Preparer's Telephone Number () _____

