



Louisville Metro Revenue Commission

# Family Limited Partnership Annual Information Questionnaire

2022

Form **FLP**

Legal name/ Business name			Federal ID Number	
Address (number and street)		Unit/Apt. no.	Account ID	
City, town, or post office	State	Zip code	Tax Year Ending	
Email		Phone no.	Ext.	

**General Information**

For the purposes of this Questionnaire, a Family Limited Partnership is defined as: Any family-owned non-corporate entity where the sole activity of such entity is the production of investment income and as such is exempted from Occupational License Tax. **INVESTMENT INCOME** means and includes gross receipts derived from dividends, interest, annuities, and sales or exchanges of stock or securities to the extent of any gains therefrom. **FAMILY-OWNED** is defined as at least 95% of the equity of such entity is owned by members of the family, which means, with respect to an individual, only:

(a) An ancestor of such individual  
 (b) The spouse or former spouse of such individual  
 (c) A lineal descendent of such individual, of such individual's spouse or former spouse, or of a parent of such individual, including a legally adopted child of such individual  
 (d) The spouse or former spouse of any lineal descendent described above  
 (e) The estate or trust of a deceased individual who, while living, would have been categorized as any of the above

**Partnership Questions**

An annual informational return must be filed to qualify for this exemption.

1.	Has the Family Limited Partnership elected to be a limited liability partnership?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.	Does the General Partner have majority ownership of the limited partnership interests as well as the general partnership interests?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.	Is the sole activity of the partnership the production of investment income, foreign and/or domestic, or limited to gross receipts derived from dividends, interest annuities, and sales or exchanges of stock or securities to the extent of any gains therefrom?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4.	Is the partnership involved in the acquisition, sale and or rental of real and or tangible property?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5.	Is this your initial filing of the Family Limited Partnership Questionnaire? If yes, what is the date of the execution of the Family Limited Partnership Agreement or other organizational document (Attach a copy of said agreement and a list of the Family Limited Partnership partners, including mailing addresses)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6.	Have you amended your Family Limited Partnership Agreement since your last filing? If yes, what is the date of the latest amendment of the Family Limited Partnership Agreement (Attach a copy of each amendment executed since your last filing.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7.	Was there a change in Family Limited Partnership partners? If yes, indicate the date of the change and attach a list of the Partnership's partners, including mailing addresses.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8.	Attach a copy of the federal tax return and applicable federal schedules filed by the Family Limited Partnership.		

<b>Signature</b>	Partner signature	Title
	Print Name	Date

MAILING ADDRESS: P.O. BOX 32060, LOUISVILLE, KENTUCKY 40232-2060

Telephone: (502) 574-4860

Please do not send general correspondence with this form/payment to this address