

CITY OF ELIZABETHTOWN, KY.
LICENSE FEE DIVISION

EMPLOYER'S QUARTERLY RETURN OF LICENSE FEE WITHHELD
UNDER ORDINANCE 2006-09

QUARTERLY RETURN

1. Total No. Employees _____ Taxable Employees _____		
2. TOTAL WAGES PAID TO ALL EMPLOYEES (*)--GROSS \$		
3. LESS: NON-TAXABLE ITEMS (COMPENSATION PAID FOR SERVICES OUTSIDE OF ELIZABETHTOWN).....		
4. TAXABLE EARNINGS (ITEM 2 MINUS ITEM 3).....		
5. ACTUAL TAX DUE FOR QUARTER AT 1.35 %..... \$		
6. INTEREST (1.00% PER MONTH).....		
7. PENALTY (5% PER MONTH) NOT TO EXCEED 25 % (A Minimum Penalty of \$25.00 if Delinquent).....		
8. TOTAL INCLUDES INTEREST AND PENALTY IF DELINQUENT.....		

I hereby certify that the information and statements contained herein and any schedules or exhibits attached are true and correct.

(SIGNED) _____

(OFFICIAL TITLE) _____ / ____ / ____

Owner, Partner, Member, President, Date
Treasurer, Agent

Make Check Payable To:
CITY OF ELIZABETHTOWN

Mail To:
Director of Finance
P.O. Box 550
Elizabethtown, KY 42702-0550

FOR QUARTER ENDING 3/31/

DUE ON OR BEFORE 4/30/

* If no wages were paid this quarter, mark "NONE" and return this form with explanation. Notify Dept. of Finance, City of Elizabethtown, of change in ownership or name and address shown above.

This Return must be filed on or Before Date Due Shown

CITY OF ELIZABETHTOWN, KY.
LICENSE FEE DIVISION

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Owner, Partner, Member, President, Date
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Make Check Payable To:
CITY OF ELIZABETHTOWN

Mail To:
Director of Finance
P.O. Box 550
Elizabethtown, KY 42702-0550

FOR QUARTER ENDING 6/30/

DUE ON OR BEFORE 7/31/

* If no wages were paid this quarter, mark "NONE" and return this form with explanation. Notify Dept. of Finance, City of Elizabethtown, of change in ownership or name and address shown above.

This Return must be filed on or Before Date Due Shown

CITY OF ELIZABETHTOWN, KY.
LICENSE FEE DIVISION

EMPLOYER'S QUARTERLY RETURN OF LICENSE FEE WITHHELD
UNDER ORDINANCE 2006-09

QUARTERLY RETURN

1. Total No. Employees _____ Taxable Employees _____		
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I hereby certify that the information and statements contained herein and any schedules or exhibits attached are true and correct.

(SIGNED) _____

(OFFICIAL TITLE) _____ / ____ / ____

Owner, Partner, Member, President, Date
Treasurer, Agent

Make Check Payable To:
CITY OF ELIZABETHTOWN

Mail To:
Director of Finance
P.O. Box 550
Elizabethtown, KY 42702-0550

FOR QUARTER ENDING 9/30

DUE ON OR BEFORE 10/31/

* If no wages were paid this quarter, mark "NONE" and return this form with explanation. Notify Dept. of Finance, City of Elizabethtown, of change in ownership or name and address shown above.

This Return must be filed on or Before Date Due Shown

1. Total No. Employees _____ Taxable Employees _____		I hereby certify that the information and statements contained herein and any schedules or exhibits attached are true and correct. (SIGNED) _____ (OFFICIAL TITLE) _____ / / Owner, Partner, Member, President, Date Treasurer, Agent Make Check Payable To: CITY OF ELIZABETHTOWN Mail To: Director of Finance P.O. Box 550 Elizabethtown, KY 42702-0550 FOR QUARTER ENDING 12/31/ DUE ON OR BEFORE 1/31/ This Return must be filed on or Before Date Due Shown
2. TOTAL WAGES PAID TO ALL EMPLOYEES (*)--GROSS \$ _____		
3. LESS: NON-TAXABLE ITEMS (COMPENSATION PAID FOR SERVICES OUTSIDE OF ELIZABETHTOWN).....		
4. TAXABLE EARNINGS (ITEM 2 MINUS ITEM 3).....		
5. ACTUAL TAX DUE FOR QUARTER AT 1.35%.....\$ _____		
6. INTEREST (1.00% PER MONTH).....		
7. PENALTY (5% PER MONTH) NOT TO EXCEED 25 % (A Minimum Penalty of \$25.00 if Delinquent).....		
8. TOTAL INCLUDES INTEREST AND PENALTY IF DELINQUENT.....		

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INSTRUCTIONS FOR PREPARING AND FILING FORM

Each employer (except those specifically exempt by ordinance) of one or more persons must withhold the license fee of 1.35% from gross salaries, wages, and commissions paid. All Employees are subject to the license fee except domestics, including employees of organizations in a business that is not subject to the license fee. Effective January 1, 1971.

Quarterly Return

A quarterly return for all license fees withheld must be filed and the license fee paid by the last day of the month following the close of the calendar quarter. An employer shall be liable to a fine and imprisonment as provided by ordinance for failure to file a return and / or to pay the license fee or for filing a fraudulent return. Interest and penalties are also provided for late filing.

- Item 1 Enter total amount of employees and number of taxable employees.
- Item 2 Enter total salaries, wages, commissions, incentive payments, bonuses and other compensation paid to all employees during quarter for which return is prepared. Per KRS 67.750, taxable salaries shall include the total gross amount of wages, including employee contributions to retirement plans, fringe benefits, etc. If no salaries, wages or other compensation was paid during the quarter, so indicate and file form with explanation.
- Item 3 Enter that portion of the compensation paid employees for services rendered outside of the City of Elizabethtown.
- Item 4 Represents the difference between items 2 and 3.
- Item 5 Multiply line 4 by 1.35%.
- Item 6 For each 30 days or fraction thereof that the return or payment is late, multiply line 5 by 1% (.01).
- Item 7 For each 30 days or fraction thereof that the return or payment is late, multiply line 5 by 5%.
 The maximum penalty due is 25 % of line 5. The penalty shall not be less than \$25.00.
- Item 8 Enter the total of line 5, line 6 and line 7.

Forms available at www.elizabethtownky.org

Due By February 28,

- | | |
|---|---|
| <p>1. Total number of employees listed hereon: _____</p> <p>2. Total number of employees subject to license fee withholding: _____</p> <p>3. Total Gross Wages Paid: \$ _____</p> <p style="margin-left: 40px;">Identification Number/ Name and Address</p> | <p>4. Less: Wages not taxable to City of Elizabethtown (_____)</p> <p>5. Taxable Wages Paid \$ _____</p> <p>6. Elizabethtown License Fee _____ 1.35%</p> <p>7. Total License Fees due to Elizabethtown \$ _____</p> <p>8. License Fees Paid for Quarter Ending</p> <p style="margin-left: 40px;">March 31 _____ June 30 _____</p> <p style="margin-left: 40px;">Sept. 30 _____ Dec. 31 _____</p> <p>9. Total Paid for Year \$ _____</p> <p>10. Balance Due (Line 7 minus Line 9)
 (Attach check payable to: Director of Finance) \$ _____</p> <p>11. Overpayment (Line 9 minus Line 7) \$ _____</p> |
|---|---|

SOCIAL SECURITY NO.	EMPLOYEE NAME	GROSS WAGE PAID	TAXABLE WAGES PAID	ELIZABETHTOWN LIC. FEE (Taxable Wages x 1.35 %)
Total for This Page		\$	\$	\$
TOTALS FOR ALL PAGES		\$	\$	\$