

Return MUST be Completed Regardless of Remittance

CITY WITHHOLDING TAX

| | |
|----------------------------------|-------------------------|
| TAX PERIOD ENDING | DUE ON OR BEFORE |
| CITY OCCUPATIONAL ACCOUNT NUMBER | |
| BUSINESS NAME | |
| AMENDED RETURN | PAID BY CREDIT CARD/ACH |

STANDARD TAX PAYMENT

L-1 PERIOD: MAR 31 · JUN 30 · SEP 30 · DEC 31 ▶▶▶▶▶
Circle quarter and enter year.

L-2 TOTAL NUMBER OF LOCAL EMPLOYEES ▶▶▶▶▶

L-3 TOTAL WAGES PAID DURING PERIOD ▶▶▶▶▶
Total salaries, wages, commissions & all other compensation paid.

L-4 TAX DUE FOR PERIOD* ▶▶▶▶▶
Line 3 x 1% Tax Rate = TAX DUE

***City tax must be withheld from 100% of wages.**

PAST DUE PENALTY & INTEREST (If Applicable)

L-5 INTEREST ▶▶▶▶▶
Line 4 x 1% per month due after due date = INTEREST

L-6 PENALTY: ▶▶▶▶▶
Line 4 x 5% per month, or fraction of month, not to exceed 25% of tax liability = PENALTY.

L-7 TOTAL TAX DUE ▶▶▶▶▶
Line 4 + Line 5 + Line 6 = TOTAL TAX DUE

Signature Date

Print Name Title

INFORMATION UPDATES & CORRECTIONS

| | |
|--|---------------------|
| Business Name or D/B/A | |
| ▶ | |
| Business Description | |
| ▶ | |
| Industry Type (See 2007 NAICS Table for Codes) | Federal I.D. Number |
| | ▶ |
| Phone | Fax |
| ▶ | ▶ |
| Website | |
| ▶ | |
| Primary Contact (CEO or Officer) | |
| ▶ | |
| E-mail | |
| ▶ | |
| Secondary Contact / Payroll Provider | |
| ▶ | |
| Business Ownership Change (If Applicable) | |
| Date of Change | Previous Owner |
| ▶ | ▶ |
| Former Trade Name | |
| ▶ | |

Rev. January 7, 2021



City of Jeffersontown, Kentucky
P.O. Box 991458
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Attn: Revenue Department