

FORM W-1

CITY OF SHIVELY, 3920 Dixie Hwy., Shively, KY 40216

Quarterly report of wages paid and tax withheld. Due last day of month following end of each calendar quarter.

1. NUMBER OF TAXABLE EMPLOYEES	
2. SALARIES, WAGES, COMMISSION & OTHER COMPENSATION PAID ALL EMPLOYEES	\$
3. AMOUNT OF LINE 2 EARNED OUTSIDE SHIVELY	\$
4. AMOUNT OF SALARIES, WAGES, COMMISSIONS, ETC. SUBJECT TO TAX EARNED WITHIN THE CITY OF SHIVELY	\$
5. TAX WITHHELD IN QUARTER (Item No. 4 x 1.50%)	1.50%

I HEREBY CERTIFY THAT THE INFORMATION AND STATEMENTS CONTAINED HEREIN AND ANY SCHEDULES OR EXHIBITS ATTACHED ARE TRUE AND CORRECT. \_\_\_\_\_ DATE

SIGNED \_\_\_\_\_ Official Title Owner, Partner, Manager, President, Etc.

FOR QUARTER ENDING	6. TOTAL TAX	\$
DUE ON OR BEFORE	7. PENALTY 10%	\$
	8. INTEREST 6% Per Annum	\$
	9. TOTAL DUE (Line 6 + Line 7 + Line 8)	\$

MAKE CHECK PAYABLE TO: CITY OF SHIVELY AND MAIL TO: 3920 Dixie Hwy. Shively, KY 40216

★ IF NO WAGES WERE PAID THIS QUARTER, MARK "NONE" AND RETURN FORM WITH EXPLANATION NOTIFY COMMISSIONERS OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

*Annual Reconciliation*

**CITY OF SHIVELY**

ENTER TOTAL OCCUPATIONAL TAX WITHHELD FROM WAGES AS SHOWN BY EMPLOYER'S QUARTERLY RETURN OF LICENSE FEES WITHHELD (FORM W-1)

Employer's annual reconciliation of taxes withheld and quarterly payments. To be accompanied by list of employees' names, addresses, S. S. No. and gross pay.

		CITY OF SHIVELY	
		FOR CALENDAR YEAR	
1. QUARTER ENDED MARCH 31 . . . . .	\$	DUE ON OR BEFORE	6. TOTAL TAX REMITTED ON QUARTERLY RETURNS \$
2. QUARTER ENDED JUNE 30 . . . . .	\$		7. TOTAL TAXES WITHHELD PER EMPLOYEE STATEMENTS ATTACHED \$
3. QUARTER ENDED SEPTEMBER 30 . . . . .	\$		
4. QUARTER ENDED DECEMBER 31 . . . . .	\$		
5. TOTAL REMITTED FOR YEAR . . . . .	\$		

ANY DISCREPANCY BETWEEN THE AMOUNTS SHOWN ON LINES 6 AND 7 MUST BE FULLY EXPLAINED IN AN ATTACHED STATEMENT.

PLEASE RETURN W2 FORM WITH THIS ANNUAL RECONCILIATION

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