***Employer’s Quarterly Return of Occupational***

***License Fee Withheld* – Form W-1**

3920 Dixie Hwy • Shively, KY 40216 • (502) 449-5000 • **ORDINANCE No.5, Series 2021**

**Name of Business:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Account#\_\_\_\_\_\_\_\_\_\_\_\_**

**Email or Phone #**: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. NUMBER OF TAXABLE EMPLOYEES \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. SALARIES, WAGES, COMMISSION & OTHER

COMPENSATION PAID ALL EMPLOYEES $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. AMOUNT of LINE 2 EARNED OUTSIDE SHIVELY $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. TAXABLE EARNINGS (ITEMS 2 MINUS ITEMS 3) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. TAX WITHHELD IN QUARTER AT 2%

(MULTIPLY ITEM 4 BY THE 2%) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. PENALTY 10% $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. INTEREST 6%, PER ANNUM $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. TOTAL (LINE 6 + LINE 7 + LINE 8) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\***If no wages were paid in this quarter, mark “NONE” and return this form**

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

Print Name

Official Title Date

(Owner, Partner, Member, President, Treasurer, Agent)

MAKE CHECKS PAYABLE TO:

City of Shively

3920 Dixie Hwy. Shively KY 40216

www.shivelyky.gov

|  |  |  |  |
| --- | --- | --- | --- |
| **FOR QUARTER** **ENDING**  | **MONTH** | **DAY** | **YEAR** |
| **DUE ON OR BEFORE** |  |  |  |

**taxoffice@shivelyky.gov**

**ENCLOSE A SELF ADDRESSED**

**ENVELOPE TO RECEIVE A RECEIPT.**

 **INSTRUCTIONS FOR PREPARING AND FILING THIS FORM**

**Quarterly return**

A quarterly return for all wages paid and tax withheld, paid by the last day of the month following the closing of the calendar quarter. Penalty and interest are due for late filing.

**1:** Enter the total number of taxable employees.

**2:** Enter total salaries, wages, commissions, incentive payments,bonus and other compensation paid to all employees during quarter for which return is prepared. If no salaries, wages, or other compensation was paid during the quarter, so indicate and file form with explanation.

**3:** Enter that portion of the compensation paid employees for services rendered outside the City of Shively.

**4:** Amount of salaries, wages, commissions, ETC. subject to tax earned within the City of Shively.

**5:** This is the actual occupational payment due. (Item No. 4 x 2%)

**6:** Only complete this step if payment is late. Multiply amount in line 5 by 10%.

**7:** Only complete this step if payment is late. Add 6% per annum.

**8:** Total Due by adding items 5 + item 6 + item 7. **Forms available at: https://shivelyky.gov/forms-documents/**