LAUREL COUNTY, KENTUCKY QUARTERLY LICENSE FEE RETURN

I hereby certify that the information, schedules, statements and exhibits filed herewith are true and correct.

Signed _____

Title _____Date_____

☐ No activity (Return form even if there was no activity this quarter.)

☐ Final return (All taxes have been paid and no future activity is planned.)

☐ Address change (Please note changes below)

Account No. FED ID OR SS NO.

Name & Address

Number of employees working in Laurel County _____

1. Salaries, wages, commissions & other compensation	$ _____
2. Less wages earned outside Laurel County	$ _____
3. Taxable earnings (Line 1 minus Line 2)	$ _____
4. Total Tax (Line 3 X .01)	$ _____
5. Add (+) debit or subtract (-) credit	$ _____
6. Penalty - 5% monthly; max 25%; min $25.00	$ _____
7. Interest - 1% monthly or fraction thereof	$ _____
8. Total due	$ _____

FOR QUARTER ENDING

Month	Day	Year

DUE ON OR BEFORE

Month	Day	Year

Make checks payable LCOT and mail to:

LAUREL COUNTY OCCUPATIONAL TAX OFFICE

PO BOX 650
LONDON KY 40743-0650
(606) 878-9766

***COPY TO BE FILED WITH OCCUPATIONAL TAX OFFICE THERE WILL BE A $25.00 FEE FOR RETURNED OR NSF CHECKS**

Form WH-1 Rev. 01/01/2008

Detach here

Detach here

CLEAR FORM

LAUREL COUNTY, KENTUCKY QUARTERLY LICENSE FEE RETURN

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Signed YOUR COPY FOR YOUR RECORDS

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COPY FOR YOUR RECORDS

***KEEP THIS COPY FOR YOUR RECORDS.**

Form WH-1 Rev. 01/01/2008

PLEASE DETACH THE TOP COPY AND RETURN IT TO THE OCCUPATIONAL TAX OFFICE. YOU SHOULD INCLUDE ANY REMITTANCE WITH THE RETURN. THE SECOND COPY IS FOR YOUR RECORDS.

INSTRUCTIONS

LINE 1. COMPENSATION BEFORE ANY DEDUCTIONS. THE OCCUPATIONAL LICENSE FEE IS ASSESSED ON TRUE GROSS. DO NOT DEDUCT FOR DEFERRED COMPENSATION, (401K, 403B, TSP, ETC.) OR SEC 125 PLANS (PRETAX HEALTH BENEFITS ETC.). YOU SHOULD INCLUDE COMPENSATION OF ALL EMPLOYEES OF THE BUSINESS. COMPENSATION IS DEFINED AS "THE GROSS AMOUNT OF ALL SALARIES, WAGES, COMMISSIONS, FEES (INCLUDING DIRECTOR FEES), BONUSES, OR ANY OTHER MONEY PAYMENTS OF ANY KIND, OR OTHER CONSIDERATIONS HAVING A MONETARY VALUE...".

LINE 2. COMPENSATION AS DEFINED ON LINE 1 EARNED OUTSIDE LAUREL COUNTY.

LINE 5. ENTER ANY UNDERPAYMENTS OR CREDITS FROM PRIOR PERIODS. PLEASE EXPLAIN ON BACK OF FORM.

LINE 6. PENALTY OF 5% PER MONTH OR FRACTION OF A MONTH CALCULATED ON THE TOTAL OF LINE 4 AND LINE

LINE 7. CALCULATED ON THE TOTAL OF LINE 4, LINE 5, AND LINE 6 X 1% X NUMBER OF MONTHS OR FRACTION OF A MONTH.

OUR OFFICE IS LOCATED IN THE LAUREL COUNTY COURTHOUSE ON THE THIRD FLOOR, ROOM 335. THE MAILING ADDRESS IS PO BOX 650 LONDON, KY 40743. VISIT US ON THE WEB AT www.lcotax.com

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