

# EMPLOYER'S QUARTERLY RETURN OF LICENSE FEE WITHHELD



CITY OF VERSAILLES  
 TAX DEPARTMENT  
 P.O. BOX 625  
 VERSAILLES, KY 40383  
 (859) 873-5184  
 www.versaillesky.com

RETURN SERVICE REQUESTED

FOR	PERIOD	ENDED	DUE ON OR BEFORE
CITY OCCUPATIONAL ACCOUNT NUMBER			
MEMO TO TAXPAYER			
THIS RETURN MUST BE FILED WHETHER YOU HAD PAYROLL OR NOT DURING THIS PERIOD  LINE 1 MUST BE COMPLETED BY ALL TAXPAYERS			

1. Number of Taxable Employees	→	→	
2. Total Gross Salaries, Wages, Commissions and other Compensation Paid	→		
3. Less Compensation Paid For Services Outside City of Versailles	→		
4. Taxable Earnings (Line 2 Minus Line 3)	→		
5. City Tax Due (line 4 x 1.5%)	→		
6. Less Estimated Payments	→		
7. Net Taxes Due On or Before Due Date (Line 5 Minus Line 6)	→		
8. Interest - 12% per anum after due date	→		
9. Penalty - 5% of tax due per month or fraction of month not to exceed 25% of total tax due however, not less than \$25.00	→		
10. TOTAL TAX, PENALTY AND INTEREST	→		

I hereby certify that this information is true and correct:

NAME \_\_\_\_\_ TITLE \_\_\_\_\_ PHONE \_\_\_\_\_ DATE \_\_\_\_\_

## INSTRUCTIONS TO TAXPAYER

Payment should be made payable to:

CITY OF VERSAILLES  
 P.O. BOX 625  
 VERSAILLES, KY 40383

Our office hours are 8:00 a.m. to 4:00 p.m., Monday through Friday.

if this business has changes address, ownership, or tax entity, notify this office immediately.

The employer must submit an annual reconciliation of gross wages and taxes filed with the City on or before the last day of February of each year.

Please make a copy to retain for your records.