

**PERRY 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 _____ <input type="checkbox"/> No activity (Return form even if there was no activity this quarter.) <input type="checkbox"/> Final Return (All taxes have been paid and no future activity is planned) <input type="checkbox"/> Address change (Please note changes below)	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;">Number of employees working in Perry County</td> <td style="width:20%; text-align: right;">_____</td> </tr> <tr> <td>1. Salaries, wages, commissions &amp; other compensation</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>2. Less wages earned outside Perry County</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>3. Taxable earnings (Line 1 minus Line 2)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>4. Total Tax (Line 3 x 0.01)</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>5. Add (+) debit or subtract (-) credit</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>6. Penalty - 5% monthly; max 25%; min \$25.00</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>7. Interest - 1% monthly or fraction thereof</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>8. Total due</td> <td style="text-align: right;">\$ _____</td> </tr> </table>	Number of employees working in Perry County	_____	1. Salaries, wages, commissions & other compensation	\$ _____	2. Less wages earned outside Perry County	\$ _____	3. Taxable earnings (Line 1 minus Line 2)	\$ _____	4. Total Tax (Line 3 x 0.01)	\$ _____	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	\$ _____
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COPY TO BE FILED WITH OCCUPATIONAL TAX OFFICE

THERE WILL BE A \$25.00 FEE FOR RETURNED OR NSF CHECKS

Detach here

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KEEP THIS COPY FOR YOUR RECORDS

PLEASE DETACH THE TOP COPY & 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 PERRY COUNTY.

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

LINE 6. PENALTY OF 0% PER MONTH OR FRACTION OF A MONTH CALCULATED ON THE TOTAL OF LINE 4.

LINE 7. CALCULATED ON THE TOTAL OF LINE 4, LINE 5, AND LINE 6 x 0% x NUMBER OF MONTHS OR FRACTIONS OF A MONTH

**OUR OFFICE IS LOCATED IN THE PERRY COUNTY COURTHOUSE 2nd FLOOR SUITE 275. THE MAILING ADDRESS IS**  
**481 Main Street**  
**Suite 203**  
**Hazard, KY 41701**