## CITY of MOREHEAD KENTUCKY

## Occupational License Fees

TAX OFFICE	USE ONLY
DATE RECEIVED	
DATE POSTED	
G/L	
DUE AMT (IF ANY)	
INITIALS	

## **EMPLOYEERS ANNUAL RECONCILIATION OF LICENSE FEE WITHHELD**

Enter all compensation paid to employees in **TOTAL PAYROLL** column. Enter compensation for services performed in City of Morehead in **LOCAL PAYROLL** includes all wages, vacation, sick pay, holiday pay, tips, and gratuities. On second page, enter for each subject employee the information indicated. Total compensation paid (before the deduction of any pre-taxed items) and amount of MOREHEAD license fee withheld. Attach additional sheets, if necessary to complete this reconciliation. Employers may opt to submit copies of forms W-2 or 1099, or other data listings that include needed information for this reconciliation, which is acceptable as long as it contains full information for employee(s). DUE ON or BEFORE **FEBRUARY 28tH**for PRIOR YEAR payroll.

FEBRUARY 28thor PRIOR YEAR payroll.				
PIDN			Year Ending	Due Date
Employer Name			mm/dd/yyyy	Last day of Feb
Mailing Address				following year end
City				
ST	Zip	Number of Employe	es Subject to Taxes	
Contact				
Email		Total Payroll is actu	al payroll including	benefits
Phone		Local payroll is subj	ect to Occupationa	I Fee of
		TOTAL PAYROLL	LOCAL PAYROLL	LICENSE FEE DUE
2.	1st Quarter ended Mar 31			
3.	2nd Quarter ended Jun 30			
4.	3rd Quarter ended Sep 30			
5.	4th Quarter ended Dec 31			
	6. Annual Total(s)			
lail to: City of Morehead	(-)	7. Actual License fe	e withheld per W-2	S
314 Bridge St Morehead, KY 40351			ger of line 6 or line	
	9. Acutal L	icense Fee submitted b	y Employer for yea	r
(000)704.0744			ween line 8 and line 9 applicable box below	
(606)784-9744 businesslicensing@morehead-ky.g		Minor difference attributable to Difference indicates insufficient	fractional variations only (	(no adjustment due)
Information obtained from this form, incluthe business name, business address, nam owner(s) and agent(s) of the business, whether or not the business is delinquent i payment of its taxes is subject to p disclosure. All proprietary and confident information exempt from disclosure under Kentucky Open Records Act shall be confident and shall not be disclosed.	uding es of and n the bublic ential r the	Difference indicates overpayme Full explanation and claim for re	ent not attributable to fract	·
I certify that the informa	ation contained herein and a	any schedules or exhibi	ts attached are corr	ect.

## Annual Reconcilliation of Occupational Tax Withheld - City of Morehead, KY

Employer Name Year Ending
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Filer may attach a separate listing if desired **Total Annual** License Fee **Employee Name** SSN Address, City, Zip Earnings Withheld **Page Subtotal or Report Total**