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Required

Business Name:

City/State/Zip:

Address:

Address:

This annual

reconciliation

must be re-

mitted to the City of

Florence, even if there are NO

wages to report.

If you have any questions, please

Department. at (859) 647-5413

Signature:

Date:

contact the City of Sub-

CITY OF FLORENCE, KENTUCKY

EMPLOYERS QUARTERLY RETURN OF LICENSE FEE

(NOTE: This original must be filled out and returned to the City of Florence. Please make a copy for your personal records.)

CALENDAR YEAR QUARTER ENDING **DUE DATE** Federal ID/SS #: Phone #: Check here for address changes. INSTRUCTIONS: If this is a 1st, 2nd, 3rd or 4th Quarter return, please fill out section 1 below. For the Annual Reconciliation, please fill out section 2 below. SECTION 1. QUARTERLY RETURN FOR QUARTERS 1, 2, 3, and 4 Annual wage cap for taxable wages/compensation Gross wages is equal to Social Security maximum. Less wages earned outside city/over SS MAX This quarterly return must be remitted to the City of Total City of Florence taxable wages Florence EVEN IF THERE ARE NO WAGES TO REPORT! Non filers will be subject to penalty. Total tax due (line 3 x 2%) Penalty (Minimum of \$25 or 5% per month not to exceed 25%) Florence Finance Department at (859) 647-5413. Interest (1% per month) TOTAL . Number of Employees: _____ For Quarter Ending (Circle One): 3/31 6/30 9/30 12/31 **Due Date:** 4/30 7/31 10/31 1/31 SECTION 2. ANNUAL RECONCILIATION and W-2/W-3 FORMS DUE 2/28 Payments Remitted Gross wages (per W-2's) (excluding penalties & interest) Less wages earned outside city/over SS MAX Total City of Florence taxable wages Total tax due (line 3 x 2%) _____ Less total already remitted (Sub-Total from left) Sub-Total of Balance Due: Florence Finance Total \$ Penalty (Minimum of \$25 or 5% per month not to exceed 25%) 8 Interest (1% per month) Balance Due: Please make sure to include W-2 and W-3 forms with this remittance! For returns WITHOUT PAYMENT For returns WITH PAYMENT Please remit to: Please remit to: City of Florence, Kentucky City of Florence _____/___/____/ P.O. Box 78 Burlington, KY Attn: Finance Dept

41005-0078

8100 Ewing Blvd. Florence, KY 41042