

LOGAN COUNTY ANNUAL RECONCILIATION FORM

LOGAN COUNTY OCCUPATIONAL TAX

RETURN THIS FORM ALONG WITH COPIES OF W2'S AND 1099'S

NO LATER THAN FEBRUARY 29, 2016 (only the 1099's that are applicable to Logan County)

EMPLOYER'S NAME AND ADDRESS

Account Number

Phone Number

LOGAN COUNTY
OCCUPATIONAL TAX

P.O. BOX 236

RUSSELLVILLE KY 42276

Phone: 270-726-4667

Fax: 270-726-4668

FOR YEAR ENDING:

12/31/2015

(1) Total Gross Salaries, Wages, and Other Compensation Paid for the year Per W2	\$	
(2) Less Compensation Paid for Services Outside of Logan County	\$	
(3) Taxable Earnings (Subtract line 2 from line 1)	\$	
(4) Occupational License Fee (Line 3 x 0.75%)	\$	

County Tax Paid Per Monthly, Quarterly or Yrly <small>If you file a yearly put information in column C.</small>	COLUMN A Monthly Payments	COLUMN B Quarterly Payments		COLUMN C Total For Year
January				1st Q
Febuary				
March		\$		
April				2nd Q
May				
June		\$		
July				3rd Q
August				
September		\$		
October				4th Q
November				
December		\$		

(5.) Actual Occupational License Fee remitted during the year.	\$	
(6) Difference between totals on line 4 and 5 (if any, check applicable box below)	\$	
() Difference indicates an underpayment for the year (payment enclosed)	\$	
() Difference indicates overpayment. Credit to Next Quarter () Refund ()		
An amended return for the period overpaid must be filed separately with a letter of explanation		
(7) Total Local Withholdings Per W-2		(7)

Signature _____ Title _____ Date _____