



City of Vanceburg, 189 Second St., Vanceburg, KY 41179

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ANNUAL RECONCILIATION OF LICENSE FEE WITHHELD

For the Year Ended _____ . To be Filed by February 28th.

BUSINESS NAME _____ ACCOUNT NUMBER _____

MAILING ADDRESS _____

WORK PHONE _____ BUSINESS PHONE _____ FAX _____

		TOTAL PAYROLL	SUBJECT PAYROLL				LICENSE FEE PAID
1.	January			X	1%	=	\$
2.	February			X	1%	=	\$
3.	March/1st Quarter			X	1%	=	\$
4.	April			X	1%	=	\$
5.	May			X	1%	=	\$
6.	June/2nd Quarter			X	1%	=	\$
7.	July			X	1%	=	\$
8.	August			X	1%	=	\$
9.	Sept./3rd Quarter			X	1%	=	\$
10.	October			X	1%	=	\$
11.	November			X	1%	=	\$
12.	Dec./4th Quarter			X	1%	=	\$
13.	TOTAL YEAR			X	1%	=	\$

14.	Actual License Fee withheld per W-2's (attach a copy of W2 for each employee. 1099's & Form 1098.						
15.	Enter the larger of line 13 or Line 14.						\$
16.	Actual License Fee remitted for the year on Form "City of Vanceburg Employer's Return of License Fee Withheld".						
17.	Difference between lines 15 and 16 (if any, check applicable box below).						\$
	Minor difference attributable to fractional variations only (no adjustment due).						
	Difference indicates insufficient total remittance for year. Payment attached.						
	Difference indicates overpayment not attributable to fractional variations. Full explanation/claim for refund is attached.						
18.	Number of Employees						

Signature _____ Title _____ Date _____

Internal Use Only: Reconciled by _____ Date _____