



P.O. Box 744 ~ 153 West Main St.
Eddyville, KY 42038

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Mayor, Nancy Slaton

Email: Eddyville@vci.net
Website: www.eddyvilleky.org
City Clerk/ Treasurer, Lynn Orange

QUARTERLY RETURN OF PAYROLL TAX

Name _____

Address _____

City _____ State _____ Zip _____

Employer ID # or Social Security # _____

For Quarter Ending _____
Due on or Before _____

Total Number Employees _____ Taxable Employees _____

1. Total Salary, Wages, Commissions and other Compensation Paid or Received During Quarter _____
2. Less Non-Taxable Items (Outside City) _____
3. Taxable Adjusted Gross Income for Quarter _____
4. Actual Tax Due for Quarter (1½ % x Amt on Line 3) _____
5. Interest (12% per annum simple interest) _____
6. Penalty (5% of Line 5 each delinquent quarter; min. \$25) _____
7. Total Due (Include Interest and Penalty, if Delinquent) _____

If no wages were paid or received during the quarter, mark "None" and return this form with explanation. If no additional returns will be required, mark "Final" and return. I hereby certify that the information and statements contained herein and any schedules or exhibits attached are true and correct. Please return two copies with payment. Make check payable to:

City of Eddyville
PO Box 744
Eddyville, KY 42038

Signed: _____

Title: _____

Date: _____

Contact Phone Number: _____