

# HOPKINS COUNTY, KENTUCKY

## Employers License Fee Withheld Year End Return

1. Total Earnings Paid All Employees \_\_\_\_\_
2. Earnings for Services Outside Hopkins County \_\_\_\_\_
3. Earnings Subject to License Fee (Item 1 less Item 2) \_\_\_\_\_
4. Actual Fee Withheld .5% (.005) \_\_\_\_\_
5. Adjustments from Prior Periods \_\_\_\_\_
6. Interest (1% per month after due date) \_\_\_\_\_
7. Penalty (5% Per Month-Maximum 25%, Minimum \$25) \_\_\_\_\_
8. Total Due Including Interest and Penalty \_\_\_\_\_

Account Number \_\_\_\_\_

**Mail Payment to:**  
 Hopkins County Fiscal Court  
 Attn: Tax Administrator  
 P O Box 690  
 Madisonville, KY 42431

For Year Ending December 31, \_\_\_\_\_

Received

Federal ID Number \_\_\_\_\_

Amount

Check #


Reconciliation of Hopkins County License Fee Withheld for the Calendar Year is Required.  
 For 10 or less employees, use the space provided below or furnish copies of employee's W-2.  
 Larger employers may file on a separate form using the format below or furnish W-2 copies.

Social Security Number	Employee Name	Gross Wages	Taxable Wages	Occupational Tax Withheld

### Completed Form Due January 31st

Monthly Filers Complete Below:			
Total Remitted For the Month Ended			
January 31	_____	July 31	_____
February 28	_____	August 31	_____
March 31	_____	September 30	_____
April 30	_____	October 31	_____
May 31	_____	November 30	_____
June 30	_____	December 31	_____
		Total Remitted	_____

Quarterly Filers Complete Below:	
Total Remitted for the Quarter Ended	
March 31	_____
June 30	_____
September 30	_____
December 31	_____
Total Remitted	_____

Licensee Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_  
 Signature

Date \_\_\_\_\_