CITY OF BELLEVUE, KENTUCKY

www.bellevueky.org

OFFICE OF CLERK-TREASURER
Phone: (859)431-8888 Fax: (859)308-3856

Employer's Quarterly Withholding Return

Under City Bellevue Ordinance 2007-12-01

CHECK QUARTERLY FILING

( ) Mar 31 due Apr 30

( ) June 30 due Jul 31

( ) Sep 30 due Oct 31

( ) Dec 31 due Jan 31

( ) *Check if new address and make corrections*

Business Name:_____

Address:_____

Address:_____

City/State/Zip:_____

PRINT EMPLOYER'S FEDERAL TAX IDENTIFICATION NUMBER

_____

( ) I had no employee earnings this quarter. Check box, sign form and return to address below.

( ) FINAL RETURN (Check ONLY to CLOSE account)
LAST DATE EMPLOYEES PAID:_____
I will have no employees in the future. Check box, sign form And return to with any attachments to address below.

EARNINGS PAID TO EMPLOYEES	EXCLUDED EARNINGS	SUBJECT EARNINGS	WITHHOLDING RATE	TAX DUE
			2.50%	

TOTAL TAX DUE	
PENALTY 5% per month or fraction not exceed 25% **Minimum penalty $25.00**	
INTERREST 1% per month or portion thereof	
TOTAL AMOUNT DUE	

I DECLARE UNDER PENALTY OF PERJURY THAT I HAVE EXAMINED THIS RETURN AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS A TRUE, CORRECT AND COMPLETE RETURN.

_____
Signature Date

_____
Printed Name/Title Phone No.

DID YOU REMEMBER?

- ATTACH EMPLOYEE LIST*
- SIGN THE FORM
- ENCLOSE CHECK OR MONEY ORDER MADE PAYABLE "***CITY OF BELLEVUE***"

*__*ATTACHED EMPLOYEE LIST:*__ A list of employees from whom City taxes were withheld. INCLUDE EACH EMPLOYEE'S NAME, SOCIAL SECURITY NUMBER, TOTAL QUARTERLY GROSS EARNINGS, AND ANY EXCLUDED EMPLOYEE EARNINGS. A COMPUTER GENERATED REPORT CONTAINING THIS INFORMATION MAY BE USED.

MAIL WITH REMITTANCE AND EMPLOYEE LIST TO: City of Bellevue Payroll Taxes, P.O. Box 5738 Carol Stream, IL 60197-5738 ***Thank you.***

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