



BOYLE COUNTY TAX ADMINISTRATOR
 321 WEST MAIN STREET, ROOM 117
 BOYLE COUNTY COURTHOUSE
 DANVILLE, KENTUCKY 40422-1848
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BOYLE COUNTY AND CITY OF DANVILLE ANNUAL RECONCILIATION

TAX YEAR 20__

NAME AND ADDRESS

ACCOUNT # _____

FEIN # _____

YOU MUST ATTACH COPIES OF W-2 AND W-3 FORMS
 THIS RETURN DUE BY 2/28

BOYLE COUNTY

QUARTER ENDING	A GROSS WAGES IN BOYLE CO BEFORE ANY DEDUCTIONS	B LICENSE FEE WITHHELD	C LICENSE FEE SUBMITTED
MARCH 31 .0125	\$ _____	_____	_____
JUNE 30 .0125	\$ _____	_____	_____
SEPT. 30 .0125	\$ _____	_____	_____
DEC. 31 .0125	\$ _____	_____	_____
TOTALS COUNTY	\$ _____	_____	_____

IF EMPLOYMENT WAS WITHIN THE CITY OF DANVILLE, BOTH SECTIONS ARE TO BE COMPLETED.

CITY OF DANVILLE

QUARTER ENDING	A GROSS WAGES IN DANVILLE BEFORE ANY DEDUCTIONS	B LICENSE FEE WITHHELD	C LICENSE FEE SUBMITTED
MARCH 31 .0190	\$ _____	_____	_____
JUNE 30 .0190	\$ _____	_____	_____
SEPT. 30 .0190	\$ _____	_____	_____
DEC. 31 .0190	\$ _____	_____	_____
TOTALS CITY	\$ _____	_____	_____

TOTALS (B) + (B) \$ _____ (C) + (C) \$ _____ DIFFERENCE BETWEEN B & C \$ _____

#W-2'S ATTACHED _____ #EMPLOYEES _____

IF DIFFERENCE IS **LESS THAN \$5.00**, NOTHING IS TO BE PAID OR BE REFUNDED. IF GREATER THAN **\$5.00**, PLEASE ISSUE PAYMENT AS APPROPRIATE TO AVOID PENALTIES. IF REFUND IS DUE YOU MUST **AMEND** THE APPROPRIATE QUARTERLY RETURN TO OBTAIN REFUND.

SIGNATURE _____ DATE _____

PRINTED NAME _____ TELEPHONE # _____ EXT. _____