

**OCCUPATIONAL LICENSE TAX  
ANNUAL TAX RECONCILIATION  
CALENDER YEAR 202**

EMPLOYER NAME:

**Every business entity shall submit a copy of its federal income tax return (W2 – Wage Statement) for the preceding taxable year.**

1. Total Number of Employees \_\_\_\_\_
2. Total Wages Paid for the Year \$ \_\_\_\_\_
3. Total of 1% (0.01) Employee Tax Due \$ \_\_\_\_\_
4. Total Adjustments \$ \_\_\_\_\_
5. Total 1% (0.01) Employee Tax Withheld  
As shown on W2 –attached Wage Statements \$ \_\_\_\_\_

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**Payments made by Quarter**

- |                         |          |
|-------------------------|----------|
| 1 <sup>st</sup> Quarter | \$ _____ |
| 2 <sup>nd</sup> Quarter | \$ _____ |
| 3 <sup>rd</sup> Quarter | \$ _____ |
| 4 <sup>th</sup> Quarter | \$ _____ |
6. Total of all 4 Quarters (Must equal line 5 above) \$ \_\_\_\_\_

**I declare, under penalties of perjury that this reconciliation has been examined by me and, to the best of my knowledge and belief is a true, correct and complete return.**

**Signature:** \_\_\_\_\_  
Signature Title Date

**Please mail this reconciliation form and a copy of the W2- Wage Statement no later than  
Feb 28, 202\_\_ to:**

**City of Beattyville  
PO Box 307  
Beattyville, KY. 41311**