INDIVIDUAL OR EMPLOYER'S WITHHOLDING TAX RETURN

NOTICE: THIS FORM MUST BE RETURNED WHETHER OR NOT YOU HAD EMPLOYEES DURING THIS QUARTER UNDER ORDINANCE 2003-2004. NOTIFY BOYD COUNT Y OCCUPATIONAL TAX ADMINISTRATOR OF ANY CHANGE IN OWNERSHIP OF NAME AND ADDRESS SHOWN BELOW.

1. NUMBER OF TAXABLE EMPLOYEES_____
2. TOTAL SALERIES, WAGES, COMMISSIONS, AND OTHER COMPENSATION PAID_____$_____
3. LESS COMPENSATION PAID FOR SERVICE OUTSIDE OF BOYD COUNTY_____
4. TAXABLE EARNINGS (ITEM 2 MINUS ITEM 3)_____
5. ACTUAL TAX DUE IN MONTH AT 1 % _____$_____
6. ADJUSTMENTS (PRIOR MONTH)_____
7. INTEREST 1% PER MONTH AFTER DUE DATE _____
8. PENALTY 1% PER MONTH NOT TO EXCEED 1% _____
9. TOTAL TAXES DUE INCLUDING INTEREST PENALTY _____

IF NO WAGES WERE PAID THIS QUARTER, MARK NONE AND RETURN THIS FORM WITH EXPLANATION. A COPY OF THE INDIVIDUAL'S W-2 IS REQUIRED ANNUALLY WITH ALL RETURNS & DUE BY FEBRUARY 28TH.

I HEREBY CERTIFY THAT THE INFORMATION AND STATEMENTS CONTAINED HEREIN AND ANY SCHEDULES OR EXHIBITS ARE TRUE AND CORRECT.

SIGNED _____

OFFICIAL TITLE_____

NAME,
ACCOUNT NO.,
ADDRESS OF
EMPLOYER

Make check payable to:
Boyd County Fiscal Court

Check No.	For Quarter ending	Due on/or before
	12/31/05	01/31/06

ORIGINAL-RETURN TO: Boyd County Occ. Tax
P.O. Box 423
Catlettsburg, KY 41129