

City of Pioneer Village

4700 Summitt Drive

Louisville, Ky. 40229

Ph: 502-957-3800

Fax: 502-957-4580

Annual Reconciliation Return Of Occupational Tax

Business Name: _____

Business Address: _____

Account Number: _____

Year: _____

Due Date: _____

Quarter Ending	Amount Paid
March 31 st	
June 30 th	
September 30 th	
December 31 st	

TOTAL QUARTERLY TAXES PAID	
TOTAL TAXES WITHELD PER FORM W-2	
DIFFERENCE BETWEEN LINES 5 & 6	

Please complete this form and return it with your fourth quarter return.
Thanks for your cooperation.