



Louisville Metro Revenue Commission

# Monthly Withholding Deposit Form

W1\_2018\_V1.0

Form **W1 D**

<b>INDIVIDUAL/ SOLE PROPRIETOR</b>			
Last name	First name	MI	Social Security Number
<b>CORPORATION/ PARTNERSHIP</b>			
Legal name/ Business name			Federal ID Number
Address (number and street)		Unit/Apt. no.	Account ID
City, town, or post office	State	Zip code	Quarter Ending
Email	Phone no.	Ext.	Deposit Amount
\$			

**Requirement for payment of tax**

All monthly withholding tax deposits are due fifteen (15) days after the month end.

Every employer who is responsible for withholding occupational license fees of greater than \$3,000.00 during any one of the four (4) preceding quarters must submit monthly deposits of the occupational license taxes withheld to the Louisville Metro Revenue Commission.

**CHECK APPLICABLE MONTH DEPOSIT IS FOR**

<input type="checkbox"/> January Due Date: February 15 <sup>th</sup>	<input type="checkbox"/> April Due Date: May 15 <sup>th</sup>	<input type="checkbox"/> July Due Date: August 15 <sup>th</sup>	<input type="checkbox"/> October Due Date: November 15 <sup>th</sup>
<input type="checkbox"/> February Due Date: March 15 <sup>th</sup>	<input type="checkbox"/> May Due Date: June 15 <sup>th</sup>	<input type="checkbox"/> August Due Date: September 15 <sup>th</sup>	<input type="checkbox"/> November Due Date: December 15 <sup>th</sup>
<input type="checkbox"/> March Due Date: April 15 <sup>th</sup>	<input type="checkbox"/> June Due Date: July 15 <sup>th</sup>	<input type="checkbox"/> September Due Date: October 15 <sup>th</sup>	<input type="checkbox"/> December Due Date: January 15 <sup>th</sup>

**General Information**

All employers will be required to file a quarterly withholding tax return (FORM W-1) by the last day of the month following the close of the calendar quarter. **Pursuant to KRS 67.790, there is a minimum \$25.00 penalty for failure to file any return or report and/or make payment by the due date.**

License Fee Return For	Filed by (Postmarked or Hand Delivered)
1 <sup>st</sup> Quarter	April 30 <sup>th</sup>
2 <sup>nd</sup> Quarter	July 31 <sup>st</sup>
3 <sup>rd</sup> Quarter	October 31 <sup>st</sup>
4 <sup>th</sup> Quarter	January 31 <sup>st</sup>

**Signature**

I hereby certify, under penalty of perjury, that the information provided and the attached supporting schedules are true, correct, and complete to the best of my knowledge.

Your signature	Date		
Print/Type your name	Your Title	Daytime phone number	

**Preparer Use Only**

Print/Type preparer's name	Preparer's signature	Date	PTIN
Firm's name ▶	Firm's EIN ▶		
Firm's address ▶	Phone no. ▶		

**ELECTRONIC FILING:**

Register for electronic filing. It is an easy, secure, and convenient way to file and pay taxes on-line. For more information log on to <https://www.metrorevenue.org>