

**City of Bardstown  
Occupational License Fee Return  
Special Individual Form**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Social Security # \_\_\_\_\_ Acct # \_\_\_\_\_

1. \*Wages earned from W-2 \_\_\_\_\_

2. \*Deduct wages not earned in the city limits \_\_\_\_\_

3. Total Earnings subject to the license fee \_\_\_\_\_

4. Bardstown License Fee (Line 3 x .01 ), \_\_\_\_\_

5. Interest of 1% per month if paid after April 15<sup>th</sup> \_\_\_\_\_

6. Penalty of 1% per month, not to exceed 10%, if delinquent \_\_\_\_\_

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**I hereby certify that the statements made herein and any supporting schedules or exhibits are true, correct, and complete.**

\_\_\_\_\_  
**Signature of License Fee Payer**

\_\_\_\_\_  
**Date**

**Make check or money order payable to City of Bardstown and mail to  
Finance Department, 220 N. Fifth St., Bardstown, KY 40004**

\*1. *Compensation* means wages, salaries, commissions, or any other form of remuneration paid or payable by an employer for services performed by an employee, which are required to be reported for federal income tax purposes and adjusted as follows:

(a) Include any amounts contributed by an employee to any retirement, profit sharing, or deferred compensation plan, which are deferred for federal income tax purposes under a salary reduction agreement or similar arrangement, including but not limited to salary reduction arrangements under Section 402(a), 401(k), 402(e), 403(a), 403(b), 408, 414(h), or 457 of the Internal Revenue Code: and

(b) Include any amounts contributed by an employee to any welfare benefit, fringe benefit, or other benefit plan made by salary reduction or other payment method which permits employees to elect to reduce federal taxable compensation under the Internal Revenue Code, including but not limited to Sections 125 and 132 of the Internal Revenue Code.