

**MARTIN COUNTY OCCUPATIONAL TAX RETURN**

P.O.Box 309  
Inez, Ky 41224  
(606) 298-2085 Fax (606) 298-2120

**INDIVIDUAL RETURN**

Year Ending \_\_\_\_\_

Due April 15th following tax year ended \_\_\_\_\_

**Make corrections (if any) to the following contact information:**

Account Name: \_\_\_\_\_ Account #: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

- 1. Total Wages earned this year (Box-5 of W-2).....\$ \_\_\_\_\_
- 2. Less: wages earned outside Martin County .....\$ \_\_\_\_\_  
(Please provide proof of out of county wages.)
- 3. Taxable wages (Item 1 minus Item 2).....\$ \_\_\_\_\_
- 4. Tax due (Item 3 at 2.00%).....\$ \_\_\_\_\_
- 5. Interest (If filed late, there will be a 12.00% per annum simple interest on  
the tax shown due. A fraction of a month is counted as an entire month).....\$ \_\_\_\_\_
- 6. Penalty (If filed late, there will be a 5.00% per month, not to exceed 25.00%  
and a minimum of \$25.00 charge).....\$ \_\_\_\_\_
- 7. Total paid (includes interest and penalty if due).....\$ \_\_\_\_\_

\* If no wages were received this year, mark "NONE" and  
return this form with an explanation.

\* Please attach a copy of your W-2 to return.

***I hereby certify that the information and statements contained herein are true and correct.***

Signed \_\_\_\_\_ Date \_\_\_\_\_

Occupation \_\_\_\_\_ Business Address \_\_\_\_\_

Business Phone # \_\_\_\_\_ Home Phone # \_\_\_\_\_

Supervisor Signature \_\_\_\_\_

**Make Check or Money Order Payable to:**

**Martin County Fiscal Court  
P.O.Box 309  
Inez, Ky 41224**