

**County of Nelson  
FORM 501Q**

**EMPLOYER'S QUARTERLY RETURN**

1. Total Salaries, wages, commissions and other compensation paid to employees	
2. Amount on line 1 subject to Nelson County Fee	
3. Nelson License Fee Payable (1/2% of line 2)	
4. Adjust for Fractions	
5. Interest	
6. Total Amount Due (sum of lines 3, 4, and 5)	

**Employer's Name and Address**


I declare that this is a true, correct and complete  
return for the QUARTER ending \_\_\_\_\_, 20

Signature \_\_\_\_\_

Date \_\_\_\_\_

**The return is for a period of three calendar months ended March 31, June 30, September 30, or December 31 and is due on or before the last day of the month following the end of the quarter.**

- Line 1. Enter total compensation paid during the quarter, regardless of when or where earned.
- Line 2. Enter the amount included in line 1 which represents payments subject to the Nelson County License Fee. The employer must maintain adequate records to substantiate this amount.
- Line 3. Enter the amount of line 2 times .005
- Line 4. A penalty of 10% is imposed for License Fees not paid when due.
- Line 5. Interest accrues on unpaid License Fees at a rate of 6% per annum from the due date of the return until paid.
- Line 6. Enter the the total amount of line 3, 4, and 5

**SUBMIT PAYMENT TO:  
NELSON COUNTY OCCUPATIONAL LICENSE  
ONE COURT SQUARE STE 202 PO BOX 578  
BARDSTOWN, KY 40004  
502-348-1862 fax 502-348-1897**