

UNIVERSITY OF KENTUCKY LOCAL/CITY TAX

Employee Name _____ Person ID# _____
(Print)

Employee is subject to following taxes:

- This employee is subject to the local/city taxes as indicated below.
- Effective this date _____; this employee's local/city taxes should be changed. (Below indicate the correct local taxes to be withheld.)

I am exempt from local tax for the following reason:

- My work station is not in the local tax district.
- Do not live in the local school board district.
- I meet the guidelines as defined in the Dean of the Graduate School Wimberly C. Royster Memo of October 31, 1985, to Dean, Dept. Chairperson, & Directors of the Graduate School.
- I am partially exempt from the local tax. My job requires that I spend _____% of my time outside the local tax district.
- I am exempt from the local tax. Other Reason: _____

For Multiple Local Tax Withholding

	City/County Taxable	PERNR	City/County Tax Code	Percent Taxable
1	_____	_____	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
2	_____	_____	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
3	_____	_____	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
4	_____	_____	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
5	_____	_____	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>

Employee Signature

Dean/Director/Administrator Office

PAYROLL/DEPARTMENT