

**BANK DEPOSITS TAX RETURN**



Property Assessed January 1, \_\_\_\_\_

Name _____  Mailing Address _____  City _____ State _____ ZIP Code _____  County _____ FEIN _____	<b>Type Tax = 048</b> <b>FEIN is the Account Number.</b>
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**INSTRUCTIONS**

Each financial institution as defined in KRS 136.500(10) shall file this return with the Department of Revenue, Office of Property Valuation, Frankfort, Kentucky 40620. This return must be filed with payment on or before **March 1** each year and should include the amount of deposits as of the preceding January 1.

Nonresident individual and corporation deposits, reported on lines 14 and 15, may be grouped according to states.

For additional information, contact the Department of Revenue at (502) 564-8175.

**The tax on line 18 must be paid to the Department of Revenue on or before March 1. (KRS 132.030 and KRS 132.040)**

**Total Deposits**

- 1. Demand deposits of individuals, partnerships and corporations..... \$ \_\_\_\_\_
- 2. Time deposits of individuals, partnerships and corporations..... \_\_\_\_\_
- 3. Deposits of the United States government (including postal savings) ..... \_\_\_\_\_
- 4. Deposits of state and political subdivisions ..... \_\_\_\_\_
- 5. Deposits of other banks and trust companies ..... \_\_\_\_\_
- 6. Other deposits (certified and officers' checks) ..... \_\_\_\_\_
- 7. **Total deposits** (add lines 1 through 6) ..... \$ \_\_\_\_\_

**Deposits not Subject to Tax**

- 8. Deposits of the United States government (line 3)..... \$ \_\_\_\_\_
- 9. Deposits of state and political subdivisions (line 4) ..... \_\_\_\_\_
- 10. Deposits of other banks and trust companies (line 5)..... \_\_\_\_\_
- 11. Other deposits (certified and officers' checks) (line 6) ..... \_\_\_\_\_
- 12. Deposits of public schools and public libraries ..... \_\_\_\_\_
- 13. Deposits of religious and charitable institutions ..... \_\_\_\_\_
- 14. Deposits of nonresident individuals (**ATTACH SCHEDULE**) ..... \_\_\_\_\_
- 15. Deposits of nonresident corporations (**ATTACH SCHEDULE**) ..... \_\_\_\_\_
- 16. Total deposits not subject to tax (add lines 8 through 15) ..... \$ \_\_\_\_\_
- 17. Deposits subject to tax (subtract line 16 from line 7)..... \_\_\_\_\_
- 18. **State Deposits Tax** (multiply line 17 by \$.00001) ..... \$ \_\_\_\_\_

I declare, under the penalties of perjury, that this return (including any accompanying schedules and statements) is a correct and complete return; and that all my taxable property has been listed.

Signature of Taxpayer	Date	E-mail Address
Contact Person (Print)	Telephone Number	Fax Number
	Telephone Number	E-mail Address