



2019 Form 211-65

(Valid until Feb. 28, 2022)

APPLICATION FOR REFUND FOR PERSONS 65 YEARS OR OVER

OFFICE USE ONLY	
VCH# _____	_____
ACCT# _____	_____
INITIALS _____	DATE _____

APPLICANT'S LAST 4 DIGITS OF SOCIAL SECURITY NO. AND DATE OF BIRTH _____

NAME _____ EMPLOYED BY _____

ADDRESS _____ ADDRESS _____

DAYTIME TELEPHONE NO. (_____) _____

	FOR OFFICE USE ONLY
1 TOTAL 2019 GROSS COMPENSATION, BEFORE ANY PRETAX DEDUCTIONS Attach all W-2 (s), reporting all wages and local license fee withholding.....	
2 LICENSE FEE WITHHELD FOR THE URBAN COUNTY GOVERNMENT.....	
3 ENTER \$68 OR AMOUNT OF WITHHOLDING- <i>WHICHEVER IS LESS...</i>	

* **PROCESSING WILL BEGIN AFTER MARCH 15, 2020** *
Please allow 6-8 weeks for processing.

I HEREBY **CERTIFY** THAT THE STATEMENTS MADE HEREIN AND IN ANY SUPPORTING SCHEDULES ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

**RETURN MUST
BE SIGNED**

SIGNATURE OF INDIVIDUAL PREPARING RETURN _____ SIGNATURE OF APPLICANT _____ DATE _____

2019 REFUND INSTRUCTIONS

Line 1: Enter the "Total Gross Compensation", the amount before any deductions, for 2019. This includes income from salaries, wages, bonuses, severance and/or termination pay, deferred compensations and/or pension plans, cafeteria plans, etc. and amounts received for approved leave including, but not limited to, vacation, sick or holiday pay. This is generally found in box 18 of the W-2 form.

Line 2: Enter the actual amount of license fee withheld from your compensation for the year. **DO NOT** include amounts that were withheld for the Fayette County Public Schools.

Line 3: Enter **\$68** or amount of withholding from Line 2 - **whichever is less**. This is the amount of your refund.

Mail return to: Lexington-Fayette Urban
County Government
Division of Revenue
P.O. Box 14058
Lexington KY 40512