



Boone County Fiscal Court

www.BooneCountyKy.org
2950 Washington Street
PO Box 960
Burlington, KY 41005
(859) 334-2144
(859) 334-3914 fax

Net Profit Tax Return for 2020

Use this form if your year end is between January 1, 2020 and December 31, 2020

Name: Account #: _____

dba: FEIN/SSN: _____

Address: Due Date: _____

Due date is April 15, 2021, except returns made on the basis of a fiscal year, which shall be made by the fifteenth day of the fourth month following the close of the fiscal year.

City, State, Zip:

Boone County Board of Education Tax - 1/2 of 1% (.005)

*****No Maximum*****

- 1) Adjusted Net Business Income (worksheet 1, Line 25(a))
2) Multiply Line 1 - by 1/2 of 1% (.005)
3) Late filing and/or Paying Penalty Fee
4) Interest Fee (1% per month, 12% per year)
5) Total Board of Education Tax

Boone County Ordinance #07-27 - 8/10 of 1% (.008)

*****Max \$63,136.00/tax of \$505.09*****

- 6) Adjusted Net Business Income (worksheet 1, Line 25(b))
7) Multiply Line 6 - by 8/10 of 1% (.008) (Not greater than \$505.09)
8) Late filing and/or Paying Penalty Fee
9) Interest fee 1% per month, 12% per year
10) Total Boone County Net Profit Tax

Boone County Mental Health Tax Ordinance #07-26- 15/100 of 1% (.0015)

*****Max Profit \$16,666.00/tax of \$25.00*****

- 11) Adjusted Net Business Income (worksheet 1, Line 25(c))
12) Multiply Line 11- by 15/100 of 1% (.0015) (Not greater than \$25.00)
13) Late filing and/or Paying Penalty Fee
14) Interest fee 1% per month, 12% per year
15) Total Mental Health Tax

16) Subtotal Taxes (add lines 5,10,15)

17) Add Annual Business License Fee \$25.00 See instructions for multiple location fees

18) TOTAL DUE (ADD LINES 16 and 17)

19) Overpayment from Prior Year

20) Estimated Tax Payment with Extension

21) Total Prior Year & Estimated Payments (ADD LINES 19 and 20)

Total remittance (line 18 less line 21)

Make check payable to: Boone County Fiscal Court

If Overage please specify Refund or Credit

Refund []

Credit []

You must attach a copy of the Federal Tax Return, Supporting Schedules (include all pages) and complete page two -Calculation Of Adjusted Business Income

Signed: Date:

Printed Name Official Title:

Tax Form Prepared By: Telephone Number:

E-mail

I declare, under the penalties of perjury, that I have examined this document and to the best of my knowledge and belief, this is a true and accurate return.

Please notify in writing any changes of ownership or new address by completing a Request to Change/Close Occupational License Account which can be found on our website @ www.BooneCountyKY.org. If you have any questions please call 859-334-2144 or email OccLicense@BooneCountyKY.org

Mail your return to: PO Box 457, Florence, KY 41022-0457) are for returns WITH PAYMENT and PO Box 960, Burlington, KY 41005-0960) are for returns WITHOUT PAYMENT.

Account #: _____
 Year Ended: _____

Account Name: _____
 FEIN/SSN: _____

Adjusted Business Income Calculation Page (page 2 of Net Profit Return)

	Individual 1040 Schedule C, E, F, 1040 Other income, 1099	Partnership Form 1065	Corp and S-Corp Form 1120 & 1120S
1 Non-employee Compensation as reported on Form 1099-Misc reported as "other income" on Federal Form 1040 (attach Page 1 of Form 1040 and Form 1099)		N/A	N/A
2 Net Profit/Loss per Federal Schedule C of Form 1040 (attach Schedule C, Pages 1 & 2, Schedule C-EZ)		N/A	N/A
3 Rental Income/Loss per Federal Schedule E of form 1040 (attach Schedule E)		N/A	N/A
4 Net farm Profit/Loss per Federal Schedule F of form 1040 (Attach Schedule F, pages 1 & 2)		N/A	N/A
5 Capital Gain from Federal Form 4797 or form 6252 reported on Schedule D of form 1040 (attach form 4797, Pages 1 & 2 or Form 6252)		N/A	N/A
6 Ordinary Gain/Loss on the sale of property used in trade or business per Federal Form 4797 (Attach Form 4797, pages 1 & 2)		N/A	N/A
7 Ordinary Income/Loss per Federal Form 1065 (Attach Form 1065, Pages 1,2,&3, Schedule of other Deductions and Rental Schedule(s), if applicable)	N/A		N/A
8 Taxable Income/Loss per Federal Form 1120 or 1120A or Ordinary Income/Loss per Federal Form 1120S (Attach Form 1120 or 1120A, Pages 1 & 2, Schedule of other Deductions, and Rental Schedule(s), if applicable)	N/A	N/A	
9 Ordinary Income/Loss per Federal Form 1120S (Attach Form 1120S, Pages 1,2 & 3, Schedule of other Deductions, and Rental Schedule(s), if applicable)	N/A	N/A	
10 State Income Taxes and Occupational taxes deducted on Federal Schedule C,E,F, or Form 1065, 1120, 1120A, or 1120S			
11 Additions from Schedule K of Form 1065 or Form 1120S (Attach Schedule K of Form 1065 or 1120S and rental schedule(s), if applicable).	N/A		
12 Net Operating Loss deducted on Form 1120	N/A	N/A	
13 Total Income - Add Line 1 through Line 12			
14 Subtractions from Schedule K of Form 1065 or Form 1120S (Attach Schedule K of Form 1065 or 1120S and rental schedule(s), if applicable).	N/A		
15 KY Alcoholic Beverages (Attach Computation Sheet)			
16 Other Adjustment (Attach Schedule)			
17 Professional Expense not reimbursed by the Partnership (Attach schedule of Expenses)	N/A		N/A
18 Total Deductible Items - Add Lines 14 through 17			

19 Adjusted Net Business Income - Subtract Line 18 from Line 13			
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COMPUTATION OF APPORTIONMENT PERCENTAGES			
All licensees who conduct a business activity in Boone County, KY must complete this part, regardless of profit or loss.			
	Column A Boone County Factor	Column B Total Operations Everywhere	Column C Boone County % (A/B=C)
20 Gross Receipts from sales made and/or services rendered	20(a)	20(b)	20(c)
21 Gross Compensation including wages, salaries and other compensation (see instructions before completing)	21(a)	21(b)	21(c)
22 Total Apportionment Factor (add Column C, lines 20 & 21)			22(c)
23 Apportionment Factor (Column C line 22 divided by the number of percents used). If both lines 20(b)& 21(b) are greater than zero, divide the entry on Line 22(c) by 2 and enter here. If either Line 20(b) or 21(b) is zero, enter the amount from Line 22 here.			23(c)
24 Taxable Boone County Net Profit - Multiply Line 19 by 23(c) and enter here			24(c)
	Boone County BOE see page 1 for maximum	Boone Cty Ordinance #07-27 see page 1 for maximum	Boone Cty Mental Health #07-26 see page 1 for maximum
25 Allocated Profit Enter Line 24 - transfer to page 1 where appropriate	25(a)	25(b)	25(c)

(Transfer to Line 1 page 1) (Transfer to Line 6 page1) (Transfer to Line 11 page 1)