



COMMONWEALTH OF KENTUCKY
DEPARTMENT OF REVENUE
FRANKFORT, KENTUCKY 40620

42A740(PKT) (10-16)

2016 Kentucky Individual Income Tax Forms



www.revenue.ky.gov



Electronic Filing — *It's to your advantage! Choose one of these easy methods!*

Federal/State Electronic Filing — Individuals who use a professional tax practitioner to prepare their Kentucky income tax return can file both their state and federal returns by using the E-File Program. With no data entry, you can have your refund in just a few short weeks.

Federal/State Online Filing — This filing method offers the same benefits as the Federal/State E-Filing Program, but you prepare and file your return from the convenience of your own home computer.

TAXPAYER ASSISTANCE—www.revenue.ky.gov

Refund Inquiries—You may check the status of your refund at www.revenue.ky.gov or by calling our automated line at (502) 564-1600. These systems are available 24 hours a day, 7 days a week, and are updated nightly.

The following information from your return will be required:

- Your Social Security number shown on the return.
- The **exact** whole-dollar amount to be refunded to you.



Kentucky Taxpayer Service Centers—*Information and forms are available in the following locations:*

Ashland

1539 Greenup Avenue, 41101-7695
(606) 920-2037

Bowling Green

201 West Professional Park Court, 42104-3278
(270) 746-7470

Corbin

15100 North US 25E, Suite 2, 40701-6188
(606) 528-3322

Frankfort

501 High Street, 40601-2103

(502) 564-4581 (General Information)
(502) 564-3658 (Forms)

Hopkinsville

181 Hammond Drive, 42240-7926
(270) 889-6521

Louisville

600 West Cedar Street
2nd Floor West, 40202-2310
(502) 595-4512

Northern Kentucky

Turfway Ridge Office Park
7310 Turfway Road, Suite 190
Florence, 41042-4871
(859) 371-9049

Owensboro

Corporate Center
401 Frederica Street
Building C, Suite 201, 42301
(270) 687-7301

Paducah

Clark Business Complex, Suite G
2928 Park Avenue, 42001-4024
(270) 575-7148

Pikeville

Uniplex Center, Suite 203
126 Trivette Drive, 41501-1275
(606) 433-7675

What's New

FAMILY SIZE TAX CREDIT—This credit provides benefits to individuals and families at incomes up to 133 percent of the threshold amount based on the federal poverty level. The 2016 threshold amount is \$11,880 for a family size of one, \$16,020 for a family of two, \$20,160 for a family of three and \$24,300 for a family of four or more.

STANDARD DEDUCTION—For 2016, the standard deduction is \$2,460.

SIGNING YOUR RETURN—In addition to signing the tax return, the Department of Revenue is requesting that taxpayers also include a driver's license or state issued identification number. This additional information will assist the Department of Revenue's efforts to protect the taxpayer and their identity. Kentucky has implemented many internal measures along with partnering with outside sources to prevent tax fraud and identity theft. Safeguarding tax information is very important to the Department of Revenue.

INDIVIDUAL INCOME TAX REFUND CONTRIBUTIONS—An individual income taxpayer required to file a return under KRS 141.180 who is entitled to an income tax refund may designate an amount, not to exceed the amount of the refund, to be paid to a selected fund. Effective for taxable years beginning on or after Jan. 1, 2016, new options have been added to the Kentucky Individual Income Tax Return which allow a designation of all or portion of an individual's refund to be contributed to the taxpayer's fund(s) of choice. The new options are as follows:

SPECIAL OLYMPICS KENTUCKY—KRS 141.443 allows an individual's refund to be contributed to Special Olympics Kentucky. Designated funds support health, education and athletic programs serving children and adults with intellectual disabilities in the Special Olympics Kentucky program.

PEDIATRIC CANCER RESEARCH TRUST FUND—KRS 141.445 allows an individual's refund to be contributed to the Pediatric Cancer Research Trust Fund. Designated funds support pediatric cancer research and treatment for Kentucky patients.

RAPE CRISIS CENTER TRUST FUND—KRS 141.447 allows an individual's refund to be contributed to the Rape Crisis Center Trust Fund. Designated funds support centers which serve victims of rape and their families by providing counseling and other support.

KENTUCKY ENERGY EFFICIENCY PRODUCTS TAX CREDIT (FORM 5695-K)—This nonrefundable credit was established by HB 2 in the 2008 General Assembly for tax periods beginning after Dec. 31, 2008, and before Jan. 1, 2016. The nonrefundable credit may be applied against tax imposed under KRS 141.020 or 141.040 and KRS 141.0401. Any unused credit may be carried forward one year. Thus, for tax year 2016 this credit has expired and the only allowable Kentucky Energy Efficiency Products Tax Credit will be any unused credit carryforward from 2015 income tax returns.

PREPAID DEBIT CARD AVAILABLE AS REFUND OPTION—Taxpayers may choose to receive their refund on a prepaid debit card issued by Bank of America by checking the appropriate box under Refund Options. Taxpayers also have the option of receiving the debit card disclosure material in Spanish.

FORM EPAY—This new form was created in order to authorize the Kentucky Department of Revenue and its designated Financial Agent to initiate an ACH electronic funds withdrawal to the financial institution account indicated by the taxpayer for payment of taxes and estimated tax other than at the time of filing the individual income tax return. If the request is being made at the time of filing the individual income tax return, Form 8879-K, Kentucky Individual Income Tax Declaration For Electronic Filing should be completed.

ANGEL INVESTOR TAX CREDIT—Effective for taxable years beginning on or after January 1, 2015, KRS 141.396 makes available a nonrefundable personal income tax credit under the Kentucky angel investment credit program to individuals who invest a minimum of \$10,000 in certain Kentucky small businesses with high-growth potential that are engaged in knowledge-based activities, such as bioscience, environmental and energy technology, health and human development, information technology and communications, and materials science and advanced manufacturing, that will further the establishment or expansion of small businesses, create additional jobs, and foster the development of new products and technologies.

General Information

Which form should I file?

File Form 740-EZ if you are a Kentucky resident for the entire year and:

- are filing federal Form 1040EZ.
- file as single.
- do not claim additional credits for being age 65 or over, blind, or a member of the Kentucky National Guard at the end of 2016.
- had only wages, salaries, tips, unemployment compensation, taxable scholarship or fellowship grants, and taxable interest was \$1,500 or less.

File Form 740 if you are a full-year Kentucky resident and:

- have farm, business, rental and/or capital gain income or losses.
- itemize deductions.
- have additions to or subtractions from federal adjusted gross income (see instructions). **Schedule M required.**
- report on an accrual basis.
- claim Kentucky estimated tax payments.
- have pension income.

File Form 740-NP if you are a nonresident and:

- had income from Kentucky sources.

or are a part-year Kentucky resident and:

- moved into or out of Kentucky during the taxable year.
- had income while a Kentucky resident.
- had income from Kentucky sources while a nonresident.

Computer-Generated Returns and 2-D Bar Code

Most software packages produce a 2-D bar code. The Department of Revenue scans the bar code that contains all of the information needed to process your return. The bar code is printed in the upper right-hand corner of the return when you prepare your return using an approved software package. **Last minute changes** should be entered into the program and the **entire** return printed again so that the bar code also contains the correct information. This bar code should not be covered up or marked through. Using the bar code reduces

data entry errors for the department and results in a faster refund for you.

Check to be sure your software generates an acceptable form. A list of vendors whose software has been approved is posted on the Internet at www.revenue.ky.gov, the Department of Revenue's Web site.

Where to Get Forms

Forms and instructions are available online from the Department of Revenue's Web site at www.revenue.ky.gov and at all Kentucky Taxpayer Service Centers. They may also be obtained by writing FORMS, Kentucky Department of Revenue, P. O. Box 518, Frankfort, KY 40602-0518, or by calling (502) 564-3658.

Address Change

If you move after you file your tax return, please notify the Kentucky Department of Revenue of your new address. This can be done by sending a change of address card (available at your local post office) to: Taxpayer Assistance Section, Kentucky Department of Revenue, P.O. Box 181, Station 56, Frankfort, KY 40602-0181. Notification can also be made to any Kentucky Taxpayer Service Center. A list of locations is included in your packet.

Refund Inquiries

You may check the status of your refund at www.revenue.ky.gov or by calling our automated line at (502) 564-1600. These systems are available 24 hours a day, 7 days a week, and are updated nightly. The following information from your return will be required:

- Your Social Security Number shown on the return.
- The **exact** whole-dollar amount to be refunded to you.

Information about electronically filed returns should be available within 72 hours of receipt. Information about other refund request filed on paper will be available after the return has completed initial processing (approximately 12 weeks).

Need a Copy of Your Tax Return?

If you need a copy of your tax return, you must send your request in writing to: Taxpayer Assistance Section, Kentucky Department of Revenue, P.O. Box 181, Station 56, Frankfort, KY 40602-0181. Please include your name(s) as it appeared on your return, Social Security number(s), your complete mailing address, and a photo ID. To ensure confidentiality, all requests must include your signature.

How Long Should Records be Kept?

Keep a copy of your tax return, worksheets and records of all items appearing on it (such as Forms W-2 and 1099 or other receipts) until the statute of limitations runs out for that return. Usually, this is four years from the date the return was due or filed (with extensions), or the date the tax was paid, whichever is later. You should keep some records longer. For example, keep property records (including those on your home) as long as they are needed to figure the basis of the original or replacement property.



Filing as an Injured Spouse on Your Federal Form 1040?

Kentucky does not recognize the federal injured spouse form. Income tax refunds may be withheld by the department if you owe money to the Kentucky Department of Revenue, another state agency or the Internal Revenue Service.

Kentucky law requires the offset of the entire refund if a joint return is filed. **If spouses want to keep their tax liabilities and/or refunds separate, each must file a separate tax form.** If you choose to file separately on a combined return, for agencies other than the Department of Revenue, the refund will be apportioned between spouses, based

on each spouse's income. The indebted spouse's refund will then be paid to the appropriate agency.

Death of a Taxpayer

If a taxpayer died before filing a return for 2016, the taxpayer's spouse or personal representative may have to file and sign a return for that taxpayer. A personal representative can be an executor, administrator or anyone who is in charge of the deceased taxpayer's property. If the deceased taxpayer did not have to file a return but had tax withheld, a return must be filed to get a refund. The person who files the return should enter "DECD" after the deceased taxpayer's name and write "DECEASED" and the date of death across the top of the return.

If your spouse died in 2016 and you did not remarry in 2016, you can file jointly or separately on a combined return. The return should show your spouse's 2016 income before death and your income for all of 2016. You can also file jointly or separately on a combined return if your spouse died in 2017 before filing a 2016 return. Write "Filing as surviving spouse" in the area where you sign the return. If someone else is the personal representative, he or she must also sign.

Death of Military Personnel Killed in Line of Duty

KRS 141.010(10)(t) exempts all income earned by soldiers killed in the line of duty from Kentucky tax for the year during which the death occurred and the year prior to the year during which the death occurred.

The exemption applies to tax years beginning after December 31, 2001. The income exclusion applies to all income from all sources of the decedent, not just military income. The exclusion includes all federal and state death benefits payable to the estate or any beneficiaries.

Amended returns may be filed for the year the soldier was killed in the line of duty and the year prior to the year of death. The amended returns must be filed within the statute of limitations period; four years from the due date, the extended due date or the date the tax was paid, whichever is later.

If a combined return was filed, the exclusion would apply to the income reported in Column A or Column B of the Kentucky return attributable to the military member. If a joint return was filed, the income must be separated accordingly. Refunds will be issued in the names on the original return. Beneficiaries or estates that received death benefits that were included in a Kentucky return may file an amended return to request a refund of taxes paid on the benefit.

The Department of Revenue will use the Veterans Administration definition for "in the line of duty," which states that a soldier is in the line of duty when he is in active military service, whether on active duty or authorized leave; unless the death was the result of the person's own willful misconduct.

Income Tax Withholding for 2017

If the amount you owe or the amount you overpaid is large, you may want to change the amount of income tax withheld from your 2017 pay. To do so you must file a new Form K-4 with your employer.

The Family Size Tax Credit is based on modified gross income and the size of the family. See instructions for Lines 20 and 21 for further explanation of these limitations. Changes have been made to the Special Withholding Exemption Certificate (Form K-4E) to reflect the Family Size Tax Credit. If you do not expect to have any tax liability for the current year and you meet the modified gross income requirements, you may be entitled to claim exemption from withholding of Kentucky income tax. The Special Withholding Exemption Certificate (Form K-4E) can be downloaded at <http://revenue.ky.gov/Withholding/Pages/Employer-Payroll-Withholding.aspx>, the Department of Revenue's Web site.

2017 Estimated Tax Payments

Persons who reasonably expect to have income in excess of \$5,000 from which no Kentucky income tax will be withheld may be required to make estimated tax payments on Form 740-ES. However, if the amount of estimated tax is \$500 or less, no estimated payments are

required. Persons who do not prepay at least 70 percent of the tax liability may be subject to a 10 percent penalty for underpayment of estimated tax. If you are required to make estimated tax payments you may also be subject to interest if the payments are not made timely. Prepayments for 2017 may be made through withholding, a credit forward of a 2016 overpayment or estimated tax installment payments.

Estimated tax installments may now be made electronically using Form EPAY, or when electronically filing your return using Form 8879-K, or through mailing a 740-ES with payment.

The instructions for Form 740-ES include a worksheet for calculating the amount of estimated tax due and for making installment payments. These forms may be obtained from the Kentucky Department of Revenue, P. O. Box 518, Frankfort, KY 40602-0518, or any Kentucky Taxpayer Service Center, or by calling (502) 564-3658.

Return Adjustments

If the Department of Revenue adjusts your return and you do not understand the adjustment, you may write to Taxpayer Assistance, Kentucky Department of Revenue, P.O. Box 181, Station 56, Frankfort, KY 40602-0181 or call (502) 564-4581. If you disagree with an adjustment made to your return, you may appeal that adjustment by submitting a written protest within 45 days of notification.

Amended Returns

If you discover that you omitted deductions or otherwise improperly prepared your return, you may obtain a refund by filing an amended return within four years of the due date of the original return. *You are required to file an amended return to report omitted income.* You may obtain Form 740-X by contacting a Kentucky Taxpayer Service Center or writing FORMS, Kentucky Department of Revenue, P. O. Box 518, Frankfort, KY 40602-0518. You may also download Form 740-X at www.revenue.ky.gov, the Department of Revenue's Web site.

Federal Audit Adjustments



Taxpayers who have received a final determination of an Internal Revenue Service audit must submit a copy to the department **within 30 days of its conclusion**. The information should be submitted to the Individual Governmental Program Section, Kentucky Department of Revenue, P.O. Box 1074, Station 68, Frankfort, KY 40602-1074.

Confidentiality


Kentucky Revised Statute 131.190 requires the Department of Revenue to maintain strict confidentiality of all taxpayer records. No employee of the Department of Revenue may divulge any information regarding the tax returns, schedules or reports required to be filed. However, the Department of Revenue is not prohibited from providing evidence to or testifying in any court of law concerning official tax records. **Also, Department of Revenue employees or any other person authorized to access confidential state information are prohibited from intentionally viewing such information without an official need to view.**

The department may provide official information on a confidential basis to the Internal Revenue Service or to any other governmental agency with which it has an exchange of information agreement whereby the department receives similar or useful information in return.

Extension of Time to File

Taxpayers who are unable to file a return by April 18 may request an extension. Taxpayers may elect to file this request electronically or by mailing the extension to the Department of Revenue on or before the due date of the return. The request must state a reasonable cause for the inability to file. Inability to pay is not an acceptable reason. Acceptable reasons include, but are not limited to, destruction of records by fire or flood and serious illness of the taxpayer. Extensions are limited to six months. **A copy of the Kentucky extension request must be attached to the return.**

Individuals who receive a federal extension are not required to request a separate Kentucky extension. They can meet the requirements by attaching a copy of the application for automatic federal extension to the Kentucky return.

IRS extensions by e-file (by personal computer or a tax professional)— Attach a  copy of Form 4868 with the confirmation number in the lower right-hand corner of the form or a copy of the electronic acknowledgment.

Military Personnel—Kentucky residents who are in the military are often granted extensions for tax filings when serving outside the United States. Any extension granted for federal income tax purposes will be honored for Kentucky income tax purposes.


Combat Zone Extension—Members of the Army, Navy, Marines, Air Force, or Public Health Service of the United States government who serve in an area designated as a combat zone by presidential proclamation shall not be required to file an income tax return and pay the taxes, which would otherwise become due during the period of service, until 12 months after the service is completed. Members of the National Guard or any branch of the Reserves called to active duty to serve in a combat zone are granted the same extension.

Interest and Penalties—Interest at the “tax interest rate” applies to any income tax paid after the original due date of the return. If the amount of tax paid by the original due date is less than 75 percent of the tax due, a **late payment penalty** may be assessed (minimum penalty is \$10).

Interest and penalty charges can be avoided or reduced by sending payment with your extension request by the due date. If you wish to make a payment prior to the due date of your return when using the:

- (1) *Kentucky Extension*—Complete Section II, Kentucky Extension Payment Voucher, of the Application for Extension of Time to File, Form 40A102, and send with payment. Write “KY Income Tax—2016” and your Social Security number(s) on the face of the check.
- (2) *Federal Automatic Extension*—Make a copy of the lower portion of the federal Application for Automatic Extension, Form 4868, and send with payment. Write “KY Income Tax—2016” and your Social Security number(s) on the face of the check.

Personal Property Forms

Kentucky business taxpayers are reminded to report all taxable personal property, except motor vehicles, owned on January 1 to either the property valuation administrator in the county of residence (or location of business) or the Office of Property Valuation in Frankfort. Tangible personal property is to be reported on the Tangible Personal Property Tax Return, Form 62A500. The due date  for this return is May 15.

Do not mail this return with your income tax return; use a separate envelope.

Kentucky Department of Revenue Mission Statement

As part of the Finance and Administration Cabinet, the mission of the Kentucky Department of Revenue is to administer tax laws, collect revenue, and provide services in a fair, courteous, and efficient manner for the benefit of the Commonwealth and its citizens.

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The Kentucky Department of Revenue does not discriminate on the basis of race, color, national origin, sex, age, religion, disability, sexual orientation, gender identity, veteran status, genetic information or ancestry in employment or the provision of services.

2016 FEDERAL/KENTUCKY INDIVIDUAL INCOME TAX DIFFERENCES

Kentucky income tax law is based on the federal income tax law in effect on December 31, 2013. The Department of Revenue generally follows the administrative regulations and rulings of the Internal Revenue Service in those areas where no specific Kentucky law exists.

The chart below provides a quick reference guide to the major federal/Kentucky differences. It is not intended to be all inclusive. Items not listed may be referred to the Department of Revenue to determine Kentucky tax treatment.

PROVISION	FEDERAL TAX TREATMENT	KENTUCKY TAX TREATMENT
1. Interest from Federal Obligations	Taxable	Exempt
2. Retirement Income from:		Partially exempt if retired after December 31, 1997; exempt if retired before January 1, 1998; Schedule P may be required
Commonwealth of Kentucky Retirement Systems	Taxable	
Kentucky Local Government Retirement Systems	Taxable	
Federal and Military Retirement Systems	Taxable	
3. Pensions and Annuities Starting After 7/1/86 and Before 1/1/90	3-year recovery rule eliminated	3-year recovery rule retained
4. Other Pension and Annuity Income	Taxable	100% excludable up to \$41,110 per taxpayer; Schedule P may be required
5. Benefits from U.S. Railroad Retirement Board	May be taxable	Exempt; Schedule P may be required
6. Social Security Benefits	May be taxable	Exempt
7. Capital Gains on Sale of Kentucky Turnpike Bonds	Taxable	Exempt
8. Other States' Municipal Bond Interest Income	Exempt	Taxable
9. Kentucky Local Government Lease Interest Payments	Taxable	Exempt
10. Long-Term Care Insurance Premiums Paid With After-Tax Dollars	Limited deduction as self-employed health insurance	100% adjustment to gross income
11. Medical and Dental Insurance Premiums Paid With After-Tax Dollars	Limited deduction as self-employed health insurance	100% adjustment to gross income
12. Capital Gains on Property Taken by Eminent Domain	Taxable	Exempt
13. Election Workers—Income for Training or Working at Election Booths	Taxable	Exempt
14. Artistic Contributions	Noncash contribution allowed as itemized deduction	Appraised value allowed as itemized deduction or adjustment to income
15. State Income Taxes	Deductible	Nondeductible
16. Leasehold Interest—Charitable Contribution	May be deductible	Deductible; Schedule HH required
17. Kentucky Unemployment Tax Credit	No credit allowed	\$100 per certified employee; Schedule UTC required
18. Work Opportunity Credit (federal Form 5884)	Tax credit allowed; wage expense reduced by amount of credit	No credit allowed; entire wage expense is deductible
19. Welfare to Work Credit (federal Form 8861)	Tax credit allowed; wage expense reduced by amount of credit	No credit allowed; wage expense reduced by amount of federal credit
20. Child and Dependent Care Credit	Tax credit based on expenses	20% of federal credit
21. Family Size Tax Credit	No credit allowed	Decreasing tax credit allowed
22. Education Tuition Tax Credit	Tax credit based on expenses	Credit allowed Form 8863-K required
23. Taxpayer Who May be Claimed as Dependent on Another's Return (i.e., full-time student)	May not claim self	May claim self
24. Child's Income Reported by Parent	Permitted; taxed at parent's rate	Not permitted
25. National Tobacco Settlement TLAP Income Quota Buyout (including imputed interest)	Taxable	Exempt
26. Domestic Production Activities Deduction	Deductible	Deductible; may be limited
27. Active Duty Military Pay	Taxable	Exempt
28. Certain Business Expenses of Reservists	Deductible	Nondeductible

INSTRUCTIONS

2016 FORM 740

Do You Have to File a Kentucky Return?

If you were a Kentucky resident for the entire year, your filing requirement depends upon your family size, modified gross income, Kentucky adjusted gross income and income from self-employment. You must file if your modified gross income exceeds the amount in Chart A and your Kentucky adjusted gross income exceeds the amount in Chart B.

Complete your federal tax return first. If you are not required to file a federal tax return, see instructions for Line 5.

MODIFIED GROSS INCOME AND FAMILY SIZE (Use With Chart A)

Family Size—Consists of yourself, your spouse if married and living in the same household and qualifying children. For the purposes of computing the Family Size Tax Credit, the maximum family size is four.

Qualifying Dependent Child—Means a qualifying child as defined in Internal Revenue Code Section 152(c), and includes a child who lives in the household but cannot be claimed as a dependent if the provisions of Internal Revenue Code Section 152(e)(2) and 152(e)(4) apply. In general, to be a taxpayer's qualifying child, a person must satisfy four tests:

- **Relationship**—The taxpayer's child or stepchild (whether by blood or adoption), foster child, sibling or stepsibling, or a descendant of one of these.
- **Residence**—Has the same principal residence as the taxpayer for more than half the tax year. A qualifying child is determined without regard to the exception for children of divorced or separated parents. Other federal exceptions apply.
- **Age**—Must be under the age of 19 at the end of the tax year, or under the age of 24 if a full-time student for at least five months of the year, or be permanently and totally disabled at any time during the year.
- **Support**—Did not provide more than one-half of his/her own support for the year.

Modified Gross Income—Modified gross income is the greater of federal adjusted gross income adjusted to include interest income derived from municipal bonds (non-Kentucky) and lump-sum pension distributions not included in federal adjusted gross income; **or** Kentucky adjusted gross income adjusted to include lump-sum pension distributions not included in federal adjusted gross income.

Chart A

If Your Family Size is:	Your Modified Gross Income is greater than:
One.....	and \$11,880
Two.....	and \$16,020
Three.....	and \$20,160
Four or More	and \$24,300

KENTUCKY ADJUSTED GROSS INCOME (Use Chart B if Modified Gross Income is Greater Than the Amounts in Chart A)

Kentucky Adjusted Gross Income—Consists of your federal adjusted gross income plus any additions and subtractions from Schedule M, Modifications to Federal Adjusted Gross Income.

Chart B

If Your Filing Status is:	Your Kentucky Adjusted Gross Income is greater than:
Single Person— Under age 65.....	and \$ 2,960
Single Person— Age 65 or over or blind.....	and \$ 4,960
Single Person— Age 65 or over and blind.....	and \$ 6,460
Taxpayer and Spouse— Both under age 65.....	and \$ 3,460
Taxpayer and Spouse— One age 65 or over	and \$ 5,460
Taxpayer and Spouse— Both age 65 or over	and \$ 6,760

TAXPAYERS WITH SELF-EMPLOYMENT INCOME—Must file a Kentucky individual income tax return regardless of the amount of Kentucky adjusted gross income used in the Chart B if you have gross receipts from self-employment in excess of modified gross income for your family size in Chart A.



TIP: Even though the filing requirements are not met, an income tax return must be filed to claim a refund of the Kentucky taxes withheld.

FILING REQUIREMENTS (Continued)

Part-time or part-year workers may have income taxes withheld from their paychecks even though the filing requirements are not met. An income tax return must be filed to claim a refund of the Kentucky taxes withheld.

A child meeting the filing requirements must file a return even though being claimed as a dependent by the parent. Kentucky income tax law contains no special provisions for taxing the income of a minor child at the parent’s tax rates nor the reporting of income of a child on the parent’s return.

Generally, all income of Kentucky residents, regardless of where it was earned, is subject to Kentucky income tax.

Nonresidents and part-year residents must report income on Form 740-NP.

Military Personnel—MILITARY PAY EXCLUSION—Effective for taxable years beginning on or after January 1, 2010, all military pay received by active duty members of the Armed Forces of the United States, members of reserve components of the Armed Forces of the United States, and members of the National Guard will be exempt from Kentucky income tax. KRS 141.010(10)(u)

Soldiers will claim the exemption by excluding military pay when filing a Kentucky individual income tax return starting with the 2010 return. Provided the military member has no income other than military pay, he or she would not be required to file a Kentucky income tax return. The military pay exemption applies to all Kentucky military members regardless of where the member is stationed. Kentucky income tax should no longer be withheld from checks received for military pay, beginning January 1, 2010. If Kentucky income tax is incorrectly withheld from a soldier’s military pay, the Department of Revenue will refund the tax withheld.

Kentucky residents who are in the military are often granted extensions for military service when serving outside the United States. Any extension granted for federal income tax purposes will be honored for Kentucky income tax purposes.

For Fiscal Year Filers Only—Most people pay taxes for a calendar year. However, if you file for a taxable year other than a calendar year or for part of a year, enter the beginning and ending dates of that year on the line at the top of the form.

When and Where to File

The income tax return for calendar year 2016 must be postmarked or submitted electronically no later than April 18, 2017, to avoid penalties and interest. Mail to:

Refund/Other Returns

Kentucky Department of Revenue
P. O. Box 856970
Louisville, KY 40285-6970

Pay Returns

Kentucky Department of Revenue
P. O. Box 856980
Louisville, KY 40285-6980

APRIL 2017						
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Taxpayers who expect refunds should file as early as possible to receive refunds promptly. If you have your tax return prepared by another person, you may wish to mail the return yourself in order to ensure prompt filing.

Social Security Number—You are required to provide your social security number per Section 405, Title 42, of the United States Code. This information will be used to establish your identity for tax purposes only.

Political Party Fund Designation

You may designate \$2 of your taxes to either the Democratic or Republican party if you have a tax liability of at least \$2 (\$4 for married persons filing joint returns). Fifty cents will be paid to the corresponding political organization in your county of residence and the remainder will be paid to the respective state political party. *This designation will not increase your tax or decrease your refund.* You may make this designation by checking the applicable box. A taxpayer and spouse may each make a designation. Persons making no designation should check the “No Designation” box.



Reporting Periods and Accounting Procedures

Kentucky law requires taxpayers to report income on the same calendar or fiscal year and to use the same methods of accounting as required for federal income tax purposes. Any federally approved change in accounting period or methods must be reported to the Kentucky Department of Revenue. Attach a copy of the federal approval.

Changes to federal income tax law made after the Internal Revenue Code reference date contained in KRS 141.010(3) shall not apply for purposes of Chapter 141 unless adopted by the General Assembly.

Filing Status

Legal liabilities are affected by the choice of filing status. Married persons who file joint or combined returns are jointly and severally liable for all income taxes due for the period covered by the return. That is, each spouse may be held legally responsible for payment of taxes on income earned by the other. If spouses want to credit the refund of one against the liability of the other or combine their tax liabilities or refunds, they must file a combined return. **If spouses want to keep their tax liabilities and/or refunds separate, each must file a separate tax form.**

Check the box that describes your filing status. If you are married, filed a joint federal return and both you and your spouse had income, you may be able to reduce your tax by using Filing Status 2 rather than Filing Status 3.

Filing Status 1, Single—Use this filing status if you are unmarried, divorced, widowed, legally separated by court decree, or if you filed as “Head of Household” or “Qualifying Widow(er)” on your federal return.

Filing Status 2, Married Filing Separately on This Combined Return—Use this filing status to report your incomes individually but on only one tax form. You do this by filling in both Columns A and B. You may file separately on this combined return regardless of whether you filed jointly or separately for federal purposes if both you and your spouse had income. This filing status usually results in a lower tax than Filing Status 3.

Each spouse must claim his or her own income and deductions. The total of Line 5, Columns A and B, must equal your and your spouse's federal adjusted gross income.

Filing Status 3, Married Filing Joint Return—Use this filing status if you and your spouse choose to file a joint return even if one spouse had no income. Jointly means that you and your spouse add your incomes together and report in Column B. If both you and your spouse have income, it may be to your benefit to use Filing Status 2.

Filing Status 4, Married Filing Separate Returns—If using this filing status, you and your spouse must file two separate tax forms. When filing separate returns, the name and Social Security number of each spouse must be entered on both returns. Enter the spouse's Social Security number in the block provided, and enter the name on Line 4.

Adjusted Gross Income

LINE 5, Federal Adjusted Gross Income

Enter the total amount of your federal adjusted gross income from your federal income tax return in Column B if Filing Status 1, 3 or 4 is used. Use Column A only when entering your spouse's income on a combined return (Filing Status 2). When using Filing Status 2, Columns A and B, Line 5, must equal your federal adjusted gross income. **(Do not confuse federal adjusted gross income with federal taxable income shown on the federal return.)**

Where taxpayer and spouse have filed a joint return for federal income tax purposes and have not elected to file a joint Kentucky income tax return, each spouse must claim his or her own income and deductions.

If you are not required to file a federal income tax return, enter on Line 5 the total of wages, salaries, tips, fees, commissions, bonuses, other payments for personal services, taxable scholarships and fellowships, taxable interest and dividends, trade or business income, unemployment compensation and all other income from sources within and without Kentucky including amounts not reported on attached wage and tax statements. If you have income not supported by a wage and tax statement, attach a supporting schedule showing the source and amount.

Determining Kentucky Adjusted Gross Income—Kentucky law requires that the individual income tax return begin with federal adjusted gross income and be adjusted for any differences to arrive at Kentucky adjusted gross income. Schedule M is designed to make "additions to" federal adjusted gross income and provides for "subtractions from"

federal adjusted gross income. For a list of differences, see the Federal/Kentucky Individual Income Tax Differences chart and the line-by-line instructions.

LINE 6—Additions to Federal Adjusted Gross Income—Enter amount from Schedule M, Part I, Line 8.

LINE 8—Subtractions from Federal Adjusted Gross Income—Enter amount from Schedule M, Part II, Line 20.

LINE 9—Kentucky Adjusted Gross Income—Subtract Line 8 from Line 7. This is your **Kentucky Adjusted Gross Income**.

Taxable Income

LINE 10, Deductions—Taxpayers may elect to itemize deductions or elect to use the standard deduction of \$2,460. *If one spouse itemizes deductions, the other must itemize.* See specific instructions for Schedule A.

Itemizers, complete Schedule A and enter allowable deductions on Line 10.

Nonitemizers, enter the standard deduction of \$2,460. If married filing separately on a combined return, enter \$2,460 in both Columns A and B. **If filing a joint return, only one \$2,460 standard deduction is allowed.**

LINE 11—Subtract Line 10 from Line 9. This is your **Taxable Income**.

Tax

LINE 12—Determining Your Tax

Tax Table or Computation—An optional tax table is located elsewhere in this publication for your convenience. You may use this table whether or not you itemize. Married taxpayers filing separately on a combined return may use the tax table or the tax rate schedule, or one spouse may use the tax table and the other the tax rate schedule. If you choose not to use the tax table, compute your tax using the tax rate schedule below.

Tax Rate Schedule

<i>If taxable amount is:</i>	<i>Tax is:</i>
\$3,000 or less	2% of taxable amount
over \$3,000 but not over \$4,000	\$60 plus 3% of amount over \$3,000
over \$4,000 but not over \$5,000	\$90 plus 4% of amount over \$4,000
over \$5,000 but not over \$8,000	\$130 plus 5% of amount over \$5,000
over \$8,000 but not over \$75,000 ..	\$280 plus 5.8% of amount over \$8,000
over \$75,000	\$4,166 plus 6% of amount over \$75,000

Farm Income Averaging, Schedule J—If you elect farm income averaging on your federal return, you may also use this method for Kentucky. The amount of income you may average is limited to the amount elected for federal purposes. Enter tax from Schedule J, Line 22, on Form 740, Line 12, and check the box for "Schedule J." Attach completed Schedule J.



LINE 13, Lump-sum Distribution—Special 10-Year Averaging— Kentucky allows a special 10-year averaging method for determining tax on lump-sum distributions received from certain retirement plans that qualify for federal 10-year averaging. If this special method is used for federal purposes, Form 4972-K, Kentucky Tax on Lump-Sum Distributions, and Schedule P, Pension Income Exclusion, must be filed with Form 740. Enter tax from Form 4972-K and check the box.

Recycling Composting Recapture—Enter amount from Schedule RC-R and check the box.

Distilled Spirits Recapture—Enter amount from Schedule DS-R and check the box.

Angel Investor Recapture—Enter amount of Angel investor income tax credit recapture and check the box.

If Form 4972-K, Schedule RC-R, Schedule DS-R and/or you had an angel investor recapture, add the amounts together and enter the total on Line 13.

LINE 15—Enter amounts from page 3, Section A. See instructions for Section A.

LINE 17—Enter amounts from page 3, Section B. See instructions for Section B.

LINE 19, Total Tax Liability—Married taxpayers filing a combined return must add the amounts on Line 18, Columns A and B, and enter the sum on Line 19. Other taxpayers should enter the amount from Line 18, Column B, on Line 19.

LINE 20 and LINE 21, Family Size Tax Credit—The Family Size Tax Credit is based on modified gross income (MGI) and the size of the family. If your total MGI is \$32,319 or less, you may qualify for Kentucky Family Size Tax Credit.

STEP ONE—Determine your family size. Check the box on Line 20 to the right of the number that represents your family size.

Family Size—Consists of yourself, your spouse if married and living in the same household and qualifying children.

Family Size 1 is an individual either single, or married living apart from his or her spouse for the entire year. You may qualify for the Family Size Tax Credit even if you are claimed as a dependent on your parent’s tax return.

Family Size 2 is an individual with one qualifying child or a married couple.

Family Size 3 is an individual with two qualifying children or a married couple with one qualifying child.

Family Size 4 is an individual with three or more qualifying children or a married couple with two or more qualifying children.

Qualifying Dependent Child—Means a qualifying child as defined in Internal Revenue Code Section 152(c), and includes a child who lives in the household but cannot be claimed as a dependent if the provisions of Internal Revenue Code Section 152(e)(2) and 152(e)(4) apply. In general, to be a taxpayer’s qualifying child, a person must satisfy four tests:

Relationship—Must be the taxpayer’s child or stepchild (whether by blood or adoption), foster child, sibling or stepsibling, or a descendant of one of these.

Residence—Has the same principal residence as the taxpayer for more than half the tax year. A qualifying child is determined without regard to the exception for children of divorced or separated parents.

Age—Must be under the age of 19 at the end of the tax year, or under the age of 24 if a full-time student for at least five months of the year, or be permanently and totally disabled at any time during the year.

Support—Did not provide more than one-half of his/her own support for the year.

STEP TWO—Determine modified gross income.

FORM 740 WORKSHEET FOR COMPUTATION OF MODIFIED GROSS INCOME FOR FAMILY SIZE TAX CREDIT

- (a) Enter your federal adjusted gross income from Line 5. **If zero or less, enter zero** (a) _____
- (b) If married filing separately on a combined return or married filing separate returns and living in the same household, enter your spouse’s federal adjusted gross income. **If zero or less, enter zero** (b) _____
- (c) Enter tax-exempt interest from municipal bonds (non-Kentucky)..... (c) _____
- (d) Enter amount of lump-sum distributions not included in federal adjusted gross income (federal Form 4972)..... (d) _____
- (e) Enter total of Lines (a), (b), (c) and (d)..... (e) _____
- (f) Enter your Kentucky adjusted gross income from Line 9. **If zero or less, enter zero** (f) _____
- (g) If married filing separately on a combined return or married filing separate returns and living in the same household, enter your spouse’s Kentucky adjusted gross income from Line 9. **If zero or less, enter zero** (g) _____
- (h) Enter amount of lump-sum distributions not included in adjusted gross income (Kentucky Form 4972-K) (h) _____
- (i) Enter total of Lines (f), (g) and (h)..... (i) _____
- (j) Enter the **greater** of Line (e) or (i). This is your **Modified Gross Income**.
Use this amount to determine if you qualify for the Family Size Tax Credit (j) _____

STEP THREE—Use the Family Size Table to look up the percentage of credit and enter in the space provided on Line 21.

Family Size	One		Two		Three		Four or More		Credit Percentage is
	is over	is not over	is over	is not over	is over	is not over	is over	is not over	
2016	\$ ---	\$ 11,880	\$ ---	\$ 16,020	\$ ---	\$ 20,160	\$ ---	\$ 24,300	100
	11,880	12,355	16,020	16,661	20,160	20,966	24,300	25,272	90
	12,355	12,830	16,661	17,302	20,966	21,773	25,272	26,244	80
	12,830	13,306	17,302	17,942	21,773	22,579	26,244	27,216	70
	13,306	13,781	17,942	18,583	22,579	23,386	27,216	28,188	60
	13,781	14,256	18,583	19,224	23,386	24,192	28,188	29,160	50
	14,256	14,731	19,224	19,865	24,192	24,998	29,160	30,132	40
	14,731	15,088	19,865	20,345	24,998	25,603	30,132	30,861	30
	15,088	15,444	20,345	20,826	25,603	26,208	30,861	31,590	20
	15,444	15,800	20,826	21,307	26,208	26,813	31,590	32,319	10
15,800	---	21,307	---	26,813	---	32,319	---	0	

STEP FOUR—Multiply tax from Line 19 by the percentage and enter on Line 21. This is your **Family Size Tax Credit**.

LINE 23, Education Tuition Tax Credit—Complete Form 8863-K to claim this credit. See form and instructions.

LINE 25, Child and Dependent Care Credit—Enter in the space provided the amount of credit calculated on federal Form 2441, Line 9, for child and dependent care expenses. Multiply this amount by 20 percent (.20), and enter result on Line 25.

If you do not meet the filing requirements to file a federal income tax return but would have been entitled to the federal child and dependent care credit, you may claim the child and dependent care credit for Kentucky purposes. Complete and attach federal Form 2441, state on the form “did not meet federal filing requirements” and follow instructions for Line 25.

LINE 27, Kentucky Use Tax

Important Reminder from the Department of Revenue About Out-of-State Purchases:

If you made untaxed purchases from out-of-state retailers, the use tax line on your return should contain a number.

Like every other state that has a sales tax, Kentucky has a use tax that requires that out-of-state purchases of tangible personal property or digital property for use in Kentucky be taxed at the same amount as if they had taken place in Kentucky and subjected to Kentucky’s sales tax. This ensures equality of treatment between in-state and out-of-state transactions. Although the use tax has been in the tax code since 1960, it is now more relevant than ever because of the increasing percentage of online sales. Pursuant to KRS 139.330, a 6 percent use tax is due if you make out-of-state purchases for storage, use or other consumption in Kentucky and did not pay at least 6 percent state sales tax to the seller at the time of purchase. **For example, if you order from catalogs, make purchases through the Internet, or shop outside Kentucky** for items such as clothing, shoes, jewelry, cleaning supplies, furniture, computer equipment, pre-written computer software, office supplies, books, souvenirs, exercise equipment or subscribe to magazines, you may owe use tax to Kentucky. It is important to remember that use tax applies **only** to items purchased from a retailer outside Kentucky, including another country, which would have been taxed if purchased in Kentucky.

For your convenience, a Use Tax Calculation Worksheet and Optional Use Tax Table are provided below. The Optional Use Tax Table is designed for those purchases of less than \$1,000. If you made untaxed out-of-state purchases in amounts under \$1,000, but do not have records readily available that show the amount of those purchases, you may use the Optional Use Tax Table below to estimate the compensating use tax based on your Kentucky Adjusted Gross Income (KYAGI). All untaxed purchases in the amount of \$1,000 or greater must be accounted for on an actual basis using the Use Tax Calculation Worksheet. Failure to timely report may result in assessment of penalty and interest in addition to the tax amount due.

Optional Use Tax Table

KY AGI* Tax	
\$0 - \$10,000	\$4
\$10,001 - \$20,000	\$12
\$20,001 - \$30,000	\$20
\$30,001 - \$40,000	\$28
\$40,001 - \$50,000	\$36
\$50,001 - \$75,000	\$50
\$75,001 - \$100,000	\$70
Above \$100,000	Multiply AGI by 0.08% (0.0008)

* AGI from Line 9 on KY Form 740 or KY Form 740-NP or Line 1 on KY Form 740-EZ.

Use Tax Calculation Worksheet

Call 502-564-5170 for assistance.

1. Purchases of \$0 to \$1,000 x 6 percent (.06) OR Use Tax Table Amount	\$
2. Purchases of \$1,000 or more x 6 percent (.06)	\$
3. Total Use Tax Due (add lines 1 and 2)	\$

Report this amount on Form 740 or 740-NP, Line 27; or 740-EZ, Line 9.

Credit Against the Kentucky Use Tax Due

You may reduce or eliminate the amount of Kentucky use tax due by the amount of state sales tax paid to the out-of-state seller on the same transaction. The reduction may not exceed the amount of Kentucky use tax due on the purchase. For example, if Georgia state sales tax of 4 percent is paid, only the additional 2 percent is due to Kentucky, or if Illinois state sales tax of 6.25 percent is paid, no additional Kentucky use tax is due. Sales tax paid to a city, county or another country cannot be used as a credit against Kentucky use tax due.

Need more information about use tax?

Visit our Web site at: www.revenue.ky.gov

Call or write:

Kentucky Department of Revenue
Attention: Use Tax
P.O. Box 181, Station 53
Frankfort, KY 40602-0181



Monday—Friday
8 a.m.—5:00 p.m., ET
(502) 564-5170

Voluntary Refund Contributions

LINE 30(a), Tax Withheld—Enter the amount of 2016 Kentucky income tax withheld by your employer(s). This amount is shown on wage and tax statements, including Forms 1099 and W-2G, which you must attach to Form 740 in the designated area.

You will not be given credit for Kentucky income tax withheld unless you attach the wage and tax statements or other supporting documents reflecting Kentucky withholding.

Employers are required to give these statements to employees no later than January 31, 2017. If by March 1 you are unable to obtain a wage and tax statement from an employer, contact the Department of Revenue for instructions.

You may not claim credit for tax **withheld** by another state. Within certain limitations, Kentucky residents may claim a credit for nonrefundable individual income tax **paid** to other states. See Section A, Line 5.

Local government occupational, license or income tax must not be included on Line 30(a).

LINE 30(b), Estimated Tax Paid—Enter Kentucky estimated tax payments made for 2016 and amounts credited from the 2015 return.

Also, include on Line 30(b) payments prepaid with extension requests. Identify as "prepaid with extension."

LINE 30(c), Refundable Certified Rehabilitation Credit—Enter 2016 approved refundable certified rehabilitation credit per KRS 141.382(1)(b).

LINE 30(d), Film Industry Tax Credit—Enter 2016 approved refundable film industry tax credit per KRS 141.383. Attach Schedule K-1, if applicable.

LINE 31—Total of amounts on Lines 30(a) through 30(d).

Compare the amounts on Lines 29 and 31. If Line 31 is larger than Line 29, subtract Line 29 from Line 31. Enter the difference on Line 32. This is the **AMOUNT OVERPAID**.

If Line 31 is smaller than Line 29, you owe additional tax. Subtract Line 31 from Line 29. Enter on Line 37. For instructions on payment, see Line 40, Amount You Owe.

LINE 32, Amount Overpaid—If you have an overpayment on Line 32 you may have all of this amount refunded to you. You also may contribute all or part of it to the Nature and Wildlife Fund, the Child Victims' Trust Fund, the Veterans' Program Trust Fund, the Breast Cancer Research and Education Trust Fund, the Farms to Food Banks Trust Fund, Local History Trust Fund, Special Olympics Kentucky, Pediatric Cancer Research Trust Fund, Rape Crisis Center Trust Fund and/or credit all or part of it toward your 2017 estimated tax.

Donations to the following funds are voluntary and amounts donated will reduce your refund. You may contribute all or a portion of your overpayment to one or more of the following funds. Enter the amount you wish to contribute on the appropriate lines.

LINE 33(a), Nature and Wildlife Fund—Contributions will purchase and protect Kentucky's finest natural areas as state nature preserves and for nongame species protection. The Kentucky Department of Fish and Wildlife Resources and the Kentucky State Nature Preserves Commission work together to protect Kentucky's rare plants and animals; and acquire the most naturally outstanding forests, wetlands and prairies in order to provide a home for Kentucky's unique and diverse wildlife. Your tax deductible contributions play a critical role in protecting the wildlands that make Kentucky famous. *Contributions may also be made directly to the Nature and Wildlife Fund, c/o the Kentucky State Nature Preserves Commission, or c/o the Kentucky Department of Fish and Wildlife Resources, Frankfort, KY 40601.*



Help keep the Bluegrass state green!

Kentucky Department of Fish and Wildlife Resources:
<http://www.fw.ky.gov>

Kentucky State Nature Preserves Commission:
<http://naturepreserves.ky.gov>

LINE 33(b), Child Victims' Trust Fund (CVTF)—Contributions to this fund finance regional and statewide prevention programs which utilize innovative strategies to provide children with personal safety skills, teach adults how to keep children safe from child sexual abuse and exploitation, and inform the public about mandatory reporting of suspected child abuse. The CVTF also provides partial reimbursement for child sexual abuse medical exams at Children's Advocacy Centers across the state. This fund is administered through the Attorney General's office and relies on tax-deductible contributions and private donations. *Contributions may be made directly to the Child Victims' Trust Fund, Office of Victims Advocacy, 1024 Capital Center Drive, Suite 200, Frankfort, KY 40601. For more information call (502) 696-5312.*



LINE 33(c), Veterans' Program Trust Fund—Contributions to this fund are administered by a Board of Directors. The Trust Fund is used to provide services to veterans that are not already resourced by state law or federal appropriation. In an effort to recognize the service and sacrifice of Kentucky's deserving veterans, the fund supports programs such as state veterans nursing homes, state veterans cemeteries, homeless veterans transition facilities, transportation for disabled veterans and other veteran related projects. *Contributions may also be made directly to the Kentucky Veterans' Program Trust Fund, 1111B Louisville Road, Frankfort, KY 40601.*



LINE 33(d), Breast Cancer Research and Education Trust Fund Contribution—Contributions will be used to fund breast cancer research, education, awareness, treatment and screening. Additional information may be obtained from the Division of Women’s Health, (502) 564-3236 or at <http://chfs.ky.gov/dph/info/dwh/>. Contributions may also be made directly to the state Department for Public Health, Division of Administration and Financial Management, 275 East Main Street, HS1GWA, Frankfort, KY 40621, (502) 564-6663.



LINE 33(e), Farms to Food Banks Trust Fund Contribution—Contributions to this fund are used to offset farmers’ costs for providing surplus Kentucky-grown fruits and vegetables to food banks. Cash flow for farmers is strengthened while access to healthy food among struggling Kentuckians is increased. This fund is administered by the Kentucky Department of Agriculture. Contributions can also be made directly to the Farms to Food Banks Trust Fund, c/o the Kentucky Department of Agriculture, 500 Mero Street, Capital Plaza Tower, 7th Floor, Frankfort, KY 40601, (502) 564-4696.



LINE 33(f), Local History Trust Fund—Contributions to this fund support grants for local history organizations—museums, cemetery preservation groups, educators, genealogical societies and more—that help preserve their communities’ heritage as well as share their role in Kentucky’s development and the lasting impact they have made on our commonwealth and nation. The fund is administered through the Kentucky Historical Society. Contributions may also be made directly to the Local History Trust Fund, Kentucky Historical Society, 100 W. Broadway, Frankfort, KY 40601.

LINE 33(g), Special Olympics Kentucky—Contributions will help Special Olympics Kentucky provide confidence and self-esteem building sports programs for more than 7,800 athletes with intellectual disabilities in Kentucky. They will also help Special Olympics Kentucky provide more than 1,000 free medical screenings through our Healthy Athletes Program and give small children with intellectual disabilities a head start through our Young Athletes program. Contributions will also support our school-based programs that help build bridges and foster understanding between students with intellectual disabilities and their peers. Contributions can also be made directly to Special Olympics Kentucky, 105 Lakeview Ct., Frankfort, KY 40601.



Help Special Olympics Kentucky Change Lives!

Special Olympics Kentucky
<http://www.soky.org>

LINE 33(h), Pediatric Cancer Research Trust Fund—Contributions will be used to fund pediatric cancer research and treatment for Kentucky patients. Additional information may be obtained from the Division of Prevention and Quality Improvement, (502) 564-7996 or at <http://chfs.ky.gov/dph/info/dpqi/cd>. Contributions may also be made directly to the Pediatric Cancer Research Trust Fund, Department



for Public Health, Division of Prevention and Quality Improvement, Chronic Disease Prevention Branch, 275 East Main Street, HS2WE, Frankfort, KY 40621.

LINE 33(i), Rape Crisis Center Trust Fund—Contributions to this fund are used to provide direct services to Kentucky citizens who have experienced sexual violence, sexual assault, or rape at any time in their lifetime as well as serving their family and friends. It is also used to provide programs to prevent perpetration of sexual assault against Kentucky’s youth. Services and programs are provided by Kentucky’s 13 regional rape crisis centers designated by the Cabinet for Health and Family Services, Department for Community Based Services. Contributions can also be made directly to Family Violence Prevention Branch, 275 East Main Street 3E-A, Frankfort, KY 40621, (502) 564-9433. Additional information on how to access services or programs can be viewed at www.kasap.org

LINE 35, Estimated Tax—You may credit all or part of the overpayment toward your estimated tax liability for 2017. Enter the amount you want credited on Line 35.

LINE 36—Subtract amounts entered on Lines 34 and 35 from Line 32. Enter the difference, if any, on Line 36. This amount will be refunded to you. If the total of Lines 34 and 35 equals the amount on Line 32, enter a zero on Line 36. Taxpayers may elect to receive their refund on a Bank of America Prepaid Debit Card.

Note: If the amount of Kentucky tax you overpaid is excessive, obtain a copy of Form K-4A from your employer. If you are entitled to additional allowances, file a new Form K-4 with your employer to reduce the amount of Kentucky tax withheld.

LINE 37—This is your additional tax due before penalties and interest.

Penalties and Interest

LINE 38(a), Underpayment of Estimated Tax and/or Interest—If the amount owed is more than \$500 and more than 30 percent of the income tax liability on Line 26, you may be subject to a penalty of 10 percent of the underpayment of estimated tax.

The amount of the penalty may be calculated on Form 2210-K. Form 2210-K may also be used by qualifying farmers and others to claim exemption to the penalty. If paying the penalty or claiming an exemption, complete Form 2210-K, attach it to your return and check the box beside Line 38(a). Enter the amount of the penalty on Line 38(a). The minimum penalty is \$25.

Failure to make four equal installment payments timely may result in interest due. See Form 2210-K and instructions.

If your return is filed after April 18, 2017, or any tax due on the return is paid after April 18, 2017, you may be subject to additional penalties and interest.

LINE 38(b), Interest—Interest will be assessed at the “tax interest rate” from the original due date of the return until the date of payment.

LINE 38(c), Late Payment Penalty—If the amount of tax due as shown on Line 37 is not paid by the original due date of the return, a penalty of 2 percent of the tax computed due may be assessed for each 30 days or fraction thereof that the tax is past due, not to exceed 20 percent. The minimum penalty is \$10. However, if the amount timely paid is 75 percent of the tax determined due by the Department of Revenue, no late payment penalty will be assessed.

LINE 38(d), Late Filing Penalty—If a return is not filed by the due date or the extended due date, a penalty of 2 percent of the total tax due for each 30 days or fraction thereof that a return is not filed may be assessed, not to exceed 20 percent. The minimum penalty is \$10.

Note: Penalties but not interest may be reduced or waived if reasonable cause for reduction or waiver can be shown.

LINE 40, Amount You Owe—When filing the return, you must pay any tax due shown on Line 40.

Your 2016 individual income tax liability may be paid using any of the following options:

- Form EPAY (42A740), if supported by your software vendor, may be used to make an electronic payment of tax due separately from filing your tax return. Refer to the Form EPAY (42A740) instructions for additional information.
- Form 8879-K, for use when simultaneously making an electronic payment and filing your return.
- Pay by Credit Card or ACH Debit through April 18, 2017. Kentucky accepts MasterCard, VISA, Discover or American Express. Access the Department of Revenue’s secure Web site (www.revenue.ky.gov) to make electronic payments.
- Pay by check using Form 740-V if you filed your return electronically. Make check payable to Kentucky State Treasurer, write “KY Income Tax-2016” and your Social Security number on the face of the check. Enclose the check and Form 740-V in the same envelope.

If you need assistance with payment options, you may call the Department of Revenue at (502) 564-4581.

Note: If you cannot pay your tax in full, file your return and pay as much as possible by April 18. Contact the Department of Revenue for additional payment information.

SECTION A—BUSINESS INCENTIVE AND OTHER TAX CREDITS

Line 1, Nonrefundable Limited Liability Entity Tax Credit (KRS 141.0401(2))

An individual that is a partner, member or shareholder of a limited liability pass-through entity is allowed a limited liability entity tax (LLET) credit against the income tax imposed by KRS 141.020 equal to the individual's proportionate share of LLET computed on the gross receipts or gross profits of the limited liability pass-through entity as provided by KRS 141.0401(2), after the LLET is reduced by the minimum tax of \$175 and by other tax credits which the limited liability pass-through entity may be allowed. The credit allowed an individual that is a partner, member, or shareholder of a limited liability pass-through entity against income tax shall be applied only to income tax assessed on the individual's proportionate share of distributive income from the limited liability pass-through entity as provided by KRS 141.0401(3) (b). Any remaining LLET credit shall be disallowed and shall not be carried forward to the next year.

Nonrefundable Kentucky limited liability entity tax credit (KRS 141.0401(2))—The credit amount is shown on Kentucky Schedule(s) K-1 from pass-through entities (PTEs) or Form(s) 725 for single member limited liability companies. **Copies of Kentucky Schedule(s) K-1 or Form(s) 725 must be attached to your return.**

Kentucky Limited Liability Entity Tax Credit Worksheet

Complete a separate worksheet for each LLE. Retain for your records.

Name _____

Address _____

FEIN _____

Percentage of Ownership %

1. Enter Kentucky taxable income from Form 740, Line 11..... _____
2. Enter LLE income **as shown on Kentucky Schedule K-1 or Form 725** _____
3. Subtract Line 2 from Line 1 and enter total here _____
4. Enter Kentucky tax on income amount on Line 1..... _____
5. Enter Kentucky tax on income amount on Line 3..... _____
6. Subtract Line 5 from Line 4. If Line 5 is larger than Line 4, enter zero. This is your tax savings if income is ignored _____
7. Enter nonrefundable limited liability entity tax credit (**from Kentucky Schedule K-1 or Form 725**) _____
8. Enter the lesser of Line 6 or Line 7. This is your credit. Enter here and on Form 740, Section A, Line 1 _____

Line 2, Kentucky Small Business Tax Credit—For taxable years beginning after December 31, 2010, a small business may be eligible for a nonrefundable credit of up to one hundred percent (100%) of the Kentucky income tax imposed under KRS 141.020 or 141.040, and the limited liability entity tax imposed under KRS 141.0401.

The small business development credit program authorized by KRS 154.60-020 and KRS 141.384 was amended to allow the credit to apply to taxable years beginning after December 31, 2010. The definition of base year for purposes of the credit computation was changed to the first full year of operation that begins on or after January 1, 2009 and before January 1, 2010.

Small businesses are eligible to apply for credits and receive final approval for these credits one (1) year after the small business:

- Creates and fills one (1) or more eligible positions over the base employment, and that position or positions are created and filled for twelve (12) months; and
- Invests five thousand dollars (\$5,000) or more in qualifying equipment or technology.

The small business shall submit all information necessary to the Kentucky Economic Development Finance Authority to determine credit eligibility for each year and the amount of credit for which the small business is approved.

A small business that is a pass-through entity not subject to the tax imposed by KRS 141.040 and that has tax credits approved under Subchapter 60 of KRS Chapter 154 shall apply the credits against the limited liability entity tax imposed by KRS 141.0401, and shall also distribute the amount of the approved tax credits to each partner, member, or shareholder based on the partner's, member's, or shareholder's distributive share of income as determined for the year during which the tax credits are approved.

The maximum amount of credits that may be committed in each fiscal year by the Kentucky Economic Development Finance Authority shall be capped at three million dollars (\$3,000,000).

The maximum amount of credit for each small business for each year shall not exceed twenty-five thousand dollars (\$25,000). The credit shall be claimed on the tax return for the year during which the credit was approved. As per KRS 141.0205, individuals entitled to this credit will claim the credit on Line 2, Section A – Business Incentive and Other Tax Credits.

Unused credits may be carried forward for up to five (5) years.

Line 3, Skills Training Investment Tax Credit—Enter the amount of credit certified by the Bluegrass State Skills Corporation. A copy of the Kentucky Schedule K-1 for the year the credit was approved must be attached to the return in the first year the credit is claimed. The excess credit over the income tax liability in the year approved may be carried forward for three successive taxable years. For information regarding the application and approval process for this credit, contact the Cabinet for Economic Development, Bluegrass State Skills Corporation at (502) 564-2021.

Line 4, Nonrefundable Certified Rehabilitation Credit— This credit is available to owner-occupied residential and commercial preservation projects for structures that are listed in the National Register of Historic Places, or in a National Register historic district, up to \$3 million annually. The credit is 30 percent of certified rehabilitation expenses for owner-occupied residential properties, not to exceed \$60,000 per project, and 20 percent for commercial and income-producing properties. To qualify, an owner must spend at least \$20,000 on rehabilitation.

Individuals or businesses can apply the credit against their state income tax liability, carry the credit forward up to seven years or transfer it to a banking institution to leverage financing. For applications submitted on or after **April 30, 2010**, the credit shall be refundable if the taxpayer makes an election under KRS 171.397(2)(b). For more information regarding this credit, visit the Kentucky Heritage Council's Web site at www.heritage.ky.gov, or call (502) 564-7005.

Line 5, Credit for Tax Paid to Another State— Kentucky residents are required to report all income received including income from sources outside Kentucky. Within certain limitations, a credit for income tax paid to another state may be claimed. The credit is **limited** to the amount of Kentucky tax savings had the income reported to the other state been omitted, or the amount of tax paid to the other state, **whichever is less.**

You may not claim credit for tax withheld by another state. You must file a return with the other state and pay tax on income also taxed by Kentucky in order to claim the credit. A copy of the other state's return including a schedule of income sources must be attached to verify this credit. **If you owe tax in more than one state, the credit for each state must be computed separately.**

Reciprocal States— Kentucky has reciprocal agreements with specific states. These agreements provide for taxpayers to be taxed by their state of residence, and not the state where income is earned. Persons who live in Kentucky for more than 183 days during the tax year are considered residents and reciprocity does not apply. The states and types of exemptions are as follows:

- Illinois, West Virginia—**wages and salaries
- Indiana—**wages, salaries and commissions
- Michigan, Wisconsin—**income from personal services (including salaries and wages)
- Ohio—**wages and salaries. **Note:** Wages which an S corporation pays to a shareholder-employee if the shareholder-employee is a "twenty (20) percent or greater" direct or indirect equity investor in the S corporation shall not be exempt under the reciprocity agreement.
- Virginia—**commuting daily, salaries and wages

Kentucky does not allow a credit for tax paid to a reciprocal state on the above income. If tax was withheld by a reciprocal state, you must file directly with the other state for a refund of those taxes.

Credit for Taxes Paid to Other State Worksheet

Kentucky residents/part-year residents only. Complete a separate worksheet for each state. See instructions for Form 740, Section A, Line 5.



TIP— Credit for taxes paid to another state may be reduced or eliminated if gambling losses are claimed on Schedule A.

Name of other state.....

1. List Kentucky taxable income from Form 740, Line 11..... _____
2. List any gambling losses from Schedule A, Line 32..... _____
3. Add Lines 1 and 2 and enter total here..... _____
4. List income reported to other state included on Kentucky return..... _____
5. Subtract Line 4 from Line 3 and enter total here..... _____
6. Adjusted gambling losses. Compute gambling losses allowed on Kentucky return if income from other state is ignored..... _____
7. Subtract Line 6 from Line 5 and enter total here..... _____
8. Enter Kentucky tax on income amount on Line 7..... _____
9. Enter Kentucky tax on income amount on Line 1..... _____
10. Subtract Line 8 from Line 9. This is the tax savings on return if other state's income is ignored..... _____
11. Enter tax paid to other state on income claimed on Kentucky return.... _____
12. Enter the lesser of Line 10 or Line 11. This is your credit for tax paid to other state. Carry this total to Form 740, Section A, Line 5..... _____

Line 6, Employer's Unemployment Tax Credit— If you hired unemployed Kentucky residents to work for you during the last six months of 2015 or during 2016, you may be eligible to claim the unemployment tax credit. In order to claim a credit, each person hired must meet specific criteria. For each qualified person, you may claim a tax credit of \$100. The period of unemployment must be certified by the Office of Employment and Training, Education Cabinet, 275 East Main Street, 2-WA, Frankfort, KY 40621-0001, and you must maintain a copy of the certification in your files. A copy of Schedule UTC must be attached to your return.

Line 7, Recycling and/or Composting Tax Credit— Individuals who purchase recycling or composting equipment to be used exclusively in Kentucky for recycling or composting postconsumer waste materials, are entitled to a credit against the tax equal to 50 percent of the installed cost of the equipment pursuant to KRS 141.390. Application for this credit must be made on Schedule RC, which may be obtained from the Department of Revenue. A copy of Schedule RC and/or Schedule RC (K-1) reflecting the amount of credit approved by the Department of Revenue must be attached to the return.

Line 8, Kentucky Investment Fund Tax Credit—Limits on Kentucky Investment Fund Act (KIFA) Credits— An investor whose cash contribution to an investment fund has been certified by the Kentucky Economic Development Finance Authority (KEDFA) is entitled to a nonrefundable credit

against Kentucky income tax equal to 40 percent of the cash contribution. For investments before July 1, 2002, the amount of credit that may be claimed in any given year is limited to 25 percent of the total amount certified by the Kentucky Economic Development Finance Authority (KEDFA). For investments after June 30, 2002, the credit is claimed on the tax return filed for the tax year following the year in which the credit is granted and is limited in any tax year to 50 percent of the initial aggregate credit apportioned to the investor. Attach a copy of the certification by KEDFA in the first year claimed. Any excess credit may be carried forward. No credit may extend beyond 15 years of the initial certification.

Line 9, Coal Incentive Tax Credit—A company that owns and operates an alternative fuel facility or a gasification facility as defined in KRS 154.27-010 may be entitled to a coal incentive tax credit. Application for this credit is made on Schedule CI, Application for Coal Incentive Tax Credit, and a copy of the credit certificate issued by the Kentucky Department of Revenue must be attached to the return on which the credit is claimed.

Line 10, Qualified Research Facility Tax Credit—A nonrefundable credit is allowed against individual and corporation income taxes equal to 5 percent of the cost of constructing and equipping new facilities or expanding or remodeling existing facilities in Kentucky for qualified research. “Qualified research” is defined to mean qualified research as defined in Section 41 of the IRC. Any unused credit may be carried forward 10 years. Complete and attach Schedule QR, Qualified Research Facility Tax Credit.

Line 11, Employer GED Incentive Tax Credit—KRS Chapter 164.0062 provides a nonrefundable income tax credit for employers who assist employees in completing a learning contract in which the employee agrees to obtain his or her high school equivalency diploma. The employer shall complete the lower portion of the GED-Incentive Program Final Report (Form DAEL-31) and attach a copy to the return to claim this credit. Shareholders and partners should attach a copy of Schedule K-1 showing the amount of credit distributed. For information regarding the program, contact the Education Cabinet, Kentucky Adult Education, Council on Postsecondary Education.

Line 12, Voluntary Environmental Remediation Credit—This line should be completed only if the taxpayers have an agreed order with the Environmental and Public Protection Cabinet under the provisions of KRS 224.01-518 and have been approved for the credit by the Department of Revenue. Maximum credit allowed to be claimed per taxable year is 25 percent of approved credit. For more information regarding credit for voluntary environmental remediation property, contact the Environmental and Public Protection Cabinet at (502) 564-3350. To claim this credit, Schedule VERB must be attached.

Line 13, Biodiesel and Renewable Diesel Credit—Producers and blenders of biodiesel and producers of renewable diesel are entitled to a tax credit against the taxes imposed by KRS 141.020, KRS 141.040 and KRS 141.0401. The taxpayer must file a claim for biodiesel and renewable diesel credit with the Department of Revenue by January 15 each year for biodiesel produced or blended and the renewable diesel produced in the previous calendar year. The department shall issue a credit

certification to the taxpayer by April 15. The credit certification must be attached to the tax return claiming this credit.

Line 14, Environmental Stewardship Tax Credit—An approved company may be permitted a credit against the Kentucky income tax imposed by KRS 141.020, KRS 141.040 or KRS 141.0401 on the income of the approved company generated by or arising out of a project as determined under KRS 154.48-020. An “environmental stewardship product” means any new manufactured product or substantially improved existing manufactured product that has a lesser or reduced adverse effect on human health and the environment or provides for improvement to human health and the environment when compared with existing products or competing products that serve the same purpose. A company must have eligible costs of at least \$5 million and within six months after the activation date, the approved company compensates a minimum of 90 percent of its full-time employees whose jobs were created or retained base hourly wages equal to either: (1) 75 percent of the average hourly wage for the Commonwealth; or (2) 75 percent of the average hourly wage for the county in which the project is to be undertaken. The maximum amount of negotiated inducement that can be claimed by a company for any single tax year may be up to 25 percent of the authorized inducement. The agreement shall expire on the earlier of the date the approved company has received inducements equal to the approved costs of its project, or 10 years from the activation date. For more information, contact the Cabinet for Economic Development, Old Capitol Annex, 300 West Broadway, Frankfort, KY 40601.

KRS 141.430 was amended to provide that for tax years beginning on or after June 4, 2010, the base tax year is reduced by fifty percent (50%). The base tax year is the combined income tax and LLET for the first taxable year after December 31, 2005, that ends immediately prior to the activation date. If the base year is for a taxable year beginning before January 1, 2007, the LLET will not apply.

Caution: An approved company under the Environmental Stewardship Act shall not be entitled to the recycling credit provided under the provisions of KRS 141.390 for equipment used in the production of an environmental stewardship project.

Line 15, Clean Coal Incentive Tax Credit—A nonrefundable, nontransferable credit against taxes imposed by KRS 136.120, KRS 141.020, KRS 141.040 or KRS 141.0401 shall be allowed for a clean coal facility. As provided by KRS 141.428, a clean coal facility means an electric generation facility beginning commercial operation on or after January 1, 2005, at a cost greater than \$150 million that is located in the Commonwealth of Kentucky and is certified by the Environmental and Public Protection Cabinet as reducing emissions of pollutants released during generation of electricity through the use of clean coal equipment and technologies. The amount of the credit shall be two dollars (\$2) per ton of eligible coal purchased that is used to generate electric power at a certified clean coal facility, except that no credit shall be allowed if the eligible coal has been used to generate a credit under KRS 141.0405 for the taxpayer, parent or a subsidiary.

Line 16, Ethanol Tax Credit—An ethanol producer shall be eligible for a nonrefundable tax credit against the taxes imposed by KRS 141.020 or 141.040 and 141.0401 in an amount

certified by the department. The credit rate shall be one dollar (\$1) per ethanol gallon produced, unless the total amount of approved credit for all ethanol producers exceeds the annual ethanol tax credit cap. If the total amount of approved credit for all ethanol producers exceeds the annual ethanol tax credit cap, the department shall determine the amount of credit each ethanol producer receives by multiplying the annual ethanol tax credit cap by a fraction, the numerator of which is the amount of approved credit for the ethanol producer and the denominator of which is the total approved credit for all ethanol producers. The credit allowed shall be applied both to the income tax imposed under KRS 141.020 or 141.040 and to the limited liability entity tax imposed under KRS 141.0401, with the ordering of credits as provided in KRS 141.0205. Any remaining ethanol credit shall be disallowed and shall not be carried forward to the next year. "Ethanol producer" is defined as an entity that uses corn, soybeans, or wheat to manufacture ethanol at a location in this Commonwealth.

Line 17, Cellulosic Ethanol Tax Credit—A cellulosic ethanol producer shall be eligible for a nonrefundable tax credit against the taxes imposed by KRS 141.020 or 141.040 and 141.0401 in an amount certified by the department. The credit rate shall be one dollar (\$1) per cellulosic ethanol gallon produced, unless the total amount of approved credit for all cellulosic ethanol producers exceeds the annual cellulosic ethanol tax credit cap. If the total amount of approved credit for all cellulosic ethanol producers exceeds the annual cellulosic ethanol tax credit cap, the department shall determine the amount of credit each cellulosic ethanol producer receives by multiplying the annual cellulosic ethanol tax credit cap by a fraction, the numerator of which is the amount of approved credit for the cellulosic ethanol producer and the denominator of which is the total approved credit for all cellulosic ethanol producers. The credit allowed shall be applied both to the income tax imposed under KRS 141.020 or 141.040 and to the limited liability entity tax imposed under KRS 141.0401, with the ordering of credits as provided in KRS 141.0205. Any remaining cellulosic ethanol credit shall be disallowed and shall not be carried forward to the next year. "Cellulosic ethanol producer" is defined as an entity that uses cellulosic biomass materials to manufacture cellulosic ethanol at a location in this Commonwealth.

Line 18, Energy Efficiency Products Tax Credits—Enter any unused credit from 2015.

Line 19, Railroad Maintenance and Improvement Credit—The railroad maintenance and improvement credit provided by KRS 141.385 is a nonrefundable credit that can be applied against the taxes imposed by KRS 141.020, KRS 141.040 and KRS 141.0401. The tax credit shall be used in the tax year of the qualified expenditures which generated the tax credit and cannot be carried forward to a return for any other period.

An *eligible taxpayer* means the owner of a Class II or Class III railroad located in Kentucky, the transporter of property using the rail facilities of a Class II or III railroad in Kentucky, or any person that furnishes railroad-related property or services to a Class II or Class III railroad located in Kentucky. A copy of Schedule RR-I must be attached to your return.

Line 20, Endow Kentucky Credit—Effective for taxable years beginning on or after January 1, 2011, the Endow Kentucky Tax Credit was created to encourage donations to community foundations across the Commonwealth. KRS 141.438 was created to allow a nonrefundable income tax and limited liability entity tax credit of 20 percent of the value of the endowment gift, not to exceed \$10,000.

A taxpayer shall attach a copy of the approved Schedule ENDOW to the tax return each year to claim the tax credit against the taxes imposed by KRS 141.020 or 141.040 and 141.0401.

A partner, member or shareholder of a pass-through entity shall attach a copy of Schedule K-1, Form 720S; Schedule K-1, Form 765; or Schedule K-1, Form 765-GP to the partner's, member's or shareholder's tax return each year to claim the tax credit.

Unused credit may be carried forward for use in a subsequent taxable year, for a period not to exceed five years.

Line 21, New Markets Development Program Tax Credit—A taxpayer that makes a qualified equity investment in a qualified community development entity may be eligible for a credit that may be taken against the corporation income tax, individual income tax, insurance premiums taxes and limited liability entity tax. The qualified community development entity must first submit an application to the Department of Revenue for approval. The person or entity actually making the loan or making the equity investment will be able to claim a credit, subject to a \$10 million credit cap each fiscal year, by completing Form 8874(K)-A.

Line 22, Food Donation Credit—For taxable years beginning on or after January 1, 2014, but before January 1, 2018, a qualified taxpayer shall be allowed a nonrefundable credit against the tax imposed by KRS 141.020, or 141.040 and 141.0401, with the ordering of credits as provided in KRS 141.0205, in an amount equal to ten percent (10%) of the value of donated edible agriculture products to a nonprofit organization operating a food program in Kentucky that is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code.

A qualified taxpayer means a person responsible for and deriving income from: (i) growing fruits, vegetables, or other edible agriculture products; or (ii) raising beef, poultry, pork, fish, or other edible agriculture products. Edible agriculture products means fruits, vegetables, beef, poultry, pork, fish, or any other edible product raised or grown in Kentucky that is intended for and fit for human consumption. For more information, see KRS 141.392.

Attach a copy of the Schedule(s) FD. If this credit cannot be taken in full in the year of the donation you may carry the credit forward four (4) years.

Line 23, Distilled Spirits Credit—Nonrefundable and nontransferable distilled spirits ad valorem tax credit may be claimed by income taxpayers who pay Kentucky property tax on distilled spirits. If the taxpayer is a pass-through entity, such as a partnership or limited liability company classified as a partnership for Kentucky income tax purposes, the taxpayer may apply the credit against the

LLET and pass the credit through to its members, partners, or shareholders in the same proportion as the distributive share of income or loss is passed through. For tax year 2016, the distilled spirits credit is equal to forty percent (40%) of the tax assessed under KRS 132.160 and paid under KRS 132.180 on a timely basis on or after January 1, 2016. For more information, see KRS 141.389.

Line 24, Angel Investor Credit—Effective for taxable years beginning on or after January 1, 2015, a nonrefundable personal income tax credit is available under the Kentucky angel investment credit program to individuals who invest a minimum of \$10,000 in certain Kentucky small businesses with high-growth potential that are engaged in knowledge-based activities, such as bioscience, environmental and energy technology, health and human development, information technology and communications, and materials science and advanced manufacturing, that will further the establishment or expansion of small businesses, create additional jobs, and foster the development of new products and technologies.

The maximum amount of credit that may be claimed by a taxpayer in any taxable year shall not exceed fifty percent (50%) of the total amount of credit awarded or transferred to the taxpayer.

Any amount of credit that a taxpayer is unable to utilize during a taxable year may be carried forward for use in a succeeding taxable year for a period not to exceed fifteen (15) years. Any amount of credit not used within fifteen (15) years shall be lost. No amount of credit may be carried back by any taxpayer. For more information, see KRS 141.396.



KENTUCKY INDIVIDUAL INCOME TAX RETURN Full-Year Residents Only



For calendar year or other taxable year beginning _____, 2016, and ending _____, 20_____.

A. Spouse's Social Security Number

B. Your Social Security Number

Grid for Spouse's Social Security Number

Grid for Your Social Security Number

Name—Last, First, Middle Initial (Joint or combined return, give both names and initials.)

Grid for Name

Mailing Address (Number and Street including Apartment Number or P.O. Box)

Grid for Mailing Address

City, Town or Post Office

State

ZIP Code

Grid for City, Town or Post Office

Grid for State

Grid for ZIP Code

FILING STATUS (see instructions)

- 1 Single
2 Married, filing separately on this combined return. (If both had income.)
3 Married, filing joint return.
4 Married, filing separate returns. Enter spouse's Social Security number above and full name here.

POLITICAL PARTY FUND

Designating \$2 will not change your refund or tax due.

- A. Spouse B. Yourself
Democratic (1) (4)
Republican (2) (5)
No Designation (3) (6)

INCOME/TAX

- 5 Enter amount from federal Form 1040, line 37; 1040A, line 21 or 1040EZ, line 4. (If total of Columns A and B is \$32,319 or less, you may qualify for the Family Size Tax Credit. See instructions.)
6 Additions from Schedule M, line 8
7 Add lines 5 and 6
8 Subtractions from Schedule M, line 20
9 Subtract line 8 from line 7. This is your Kentucky Adjusted Gross Income
10 Itemizers: Enter itemized deductions from Kentucky Schedule A. Nonitemizers: Enter \$2,460 in Columns A and/or B
11 Subtract line 10 from line 9. This is your Taxable Income
12 Enter tax from Tax Table, Computation or Schedule J. Check if from Schedule J
13 Enter tax from Form 4972-K; Schedule RC-R; Schedule DS-R; Angel Investor Recapture
14 Add lines 12 and 13 and enter total here
15 Enter amounts from page 3, Section A, lines 25A and 25B
16 Subtract line 15 from line 14. If line 15 is larger than line 14, enter zero
17 Enter personal tax credit amounts from page 3, Section B, lines 4A and 4B
18 Subtract line 17 from line 16. If line 17 is larger than line 16, enter zero
19 Add tax amount(s) in Columns A and B, line 18 and enter here
20 Check the box that represents your total family size (see instructions before completing lines 20 and 21)
21 Multiply line 19 by Family Size Tax Credit decimal amount
22 Subtract line 21 from line 19
23 Enter the Education Tuition Tax Credit from Form 8863-K
24 Subtract line 23 from line 22
25 Enter Child and Dependent Care Credit from federal Form 2441, line 9 x 20% (.20)
26 Income Tax Liability. Subtract line 25 from line 24. If line 25 is larger than line 24, enter zero
27 Enter KENTUCKY USE TAX due on Internet, mail order, or other out-of-state purchases (see instructions)
28 Add lines 26 and 27. Enter here and on page 2, line 29

A. Spouse (Use if Filing Status 2 is checked.)

B. Yourself (or Joint)

Table with 4 columns: Line number, Column A, Column B, and Total. Rows 5-28.

Attach Form W-2(s) and Other Supporting Statement(s) here. Enclose payment but Do Not Staple.



REFUND/TAX PAYMENT SUMMARY

29	Enter amount from page 1, line 28. This is your Total Tax Liability	29		00
30	(a) Enter Kentucky income tax withheld as shown on attached 2016 Form W-2(s) and other supporting statements	30(a)		00
	(b) Enter 2016 Kentucky estimated tax payments	30(b)		00
	(c) Enter 2016 refundable certified rehabilitation credit (KRS 141.382(1)(b)).....	30(c)		00
	(d) Enter 2016 film industry tax credit (KRS 141.383).....	30(d)		00
31	Add lines 30(a) through 30(d)	31		00
32	If line 31 is larger than line 29, enter AMOUNT OVERPAID (see instructions)	32		00
33	<i>Fund Contributions; See instructions.</i>			
(a)	Nature and Wildlife Fund		00	
(b)	Child Victims' Trust Fund		00	
(c)	Veterans' Program Trust Fund ..		00	
(d)	Breast Cancer Research/ Education Trust Fund		00	
(e)	Farms to Food Banks Trust Fund		00	
(f)	Local History Trust Fund		00	
(g)	Special Olympics Kentucky		00	
(h)	Pediatric Cancer Research Trust Fund ..		00	
(i)	Rape Crisis Center Trust Fund		00	
34	Add lines 33(a) through 33(i)	34		00
35	Amount of line 32 to be CREDITED TO YOUR 2017 ESTIMATED TAX	35	CREDIT FORWARD	00
36	Subtract lines 34 and 35 from line 32. Amount to be REFUNDED TO YOU	36	REFUND	00
	REFUND OPTIONS (Not available for amended returns) Check here if you would like your refund issued on a Bank of America Prepaid Debit Card <input type="checkbox"/> Check here if you would like to receive your Debit Card material in Spanish <input type="checkbox"/>			
37	If line 29 is larger than line 31, enter ADDITIONAL TAX DUE	37		00
38	(a) Estimated tax penalty and/or interest. <input type="checkbox"/> Check if Form 2210-K attached	38(a)		00
	(b) Interest	38(b)		00
	(c) Late payment penalty	38(c)		00
	(d) Late filing penalty.....	38(d)		00
39	Add lines 38(a) through 38(d). Enter here.....	39		00
40	Add lines 37 and 39 and enter here. This is the AMOUNT YOU OWE	40	OWE	00

- Visit www.revenue.ky.gov for electronic payment options; or
- Make check payable to **Kentucky State Treasurer**, include your Social Security number and "KY Income Tax—2016."

SECTION A—BUSINESS INCENTIVE AND OTHER TAX CREDITS

	A. Spouse		B. Yourself	
1 Enter nonrefundable limited liability entity credit (KRS 141.0401(2))	1	00	1	00
2 Enter Kentucky small business tax credit	2	00	2	00
3 Enter skills training investment credit (attach copy(ies) of certification).....	3	00	3	00
4 Enter nonrefundable certified rehabilitation credit (KRS 171.397(1)(a))	4	00	4	00
5 Enter credit for tax paid to another state (attach copy of other state's return(s))	5	00	5	00
6 Enter unemployment credit (attach Schedule UTC).....	6	00	6	00
7 Enter recycling and/or composting equipment credit (attach Schedule RC)	7	00	7	00
8 Enter Kentucky investment fund credit (attach copy(ies) of certification).....	8	00	8	00
9 Enter coal incentive credit.....	9	00	9	00
10 Enter qualified research facility credit (attach Schedule QR).....	10	00	10	00
11 Enter GED incentive credit (attach Form DAEL-31).....	11	00	11	00
12 Enter voluntary environmental remediation credit (attach Schedule VERB).....	12	00	12	00
13 Enter biodiesel and renewable diesel credit.....	13	00	13	00
14 Enter environmental stewardship credit.....	14	00	14	00
15 Enter clean coal incentive credit.....	15	00	15	00
16 Enter ethanol credit (attach Schedule ETH)	16	00	16	00
17 Enter cellulosic ethanol credit (attach Schedule CELL)	17	00	17	00
18 Enter energy efficiency products credit carryforward from 2015	18	00	18	00

Continue to page 3 to complete Section A



SECTION A—BUSINESS INCENTIVE AND OTHER TAX CREDITS (continued)		A. Spouse	B. Yourself
19	Enter railroad maintenance and improvement credit (attach Schedule RR-I).....	00	00
20	Enter Endow Kentucky credit (attach Schedule ENDOW)	00	00
21	Enter New Markets Development Program credit	00	00
22	Enter food donation credit (attach Schedule FD).....	00	00
23	Enter distilled spirits credit (attach Schedule DS)	00	00
24	Enter angel investor credit	00	00
25	Add lines 1 through 24, Columns A and B. Enter here and on page 1, line 15 ..	00	00

SECTION B—PERSONAL TAX CREDITS

	Check Regular	Check all four if 65 or over	Check all four if blind	Check both for Kentucky National Guard	
1 (a) Credits for yourself:	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	1 Enter number of boxes checked on line 1
(b) Credits for spouse:	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>

2 Dependents:

First and Last Name	Dependent's Social Security number	Dependent's relationship to you	Check if qualifying child for family size tax credit	
			<input type="checkbox"/>	• lived with you.....
			<input type="checkbox"/>	• did not live with you (see instructions).....
			<input type="checkbox"/>	• other dependents.....

3 Add total number of credits claimed on lines 1 and 2.
If married filing separately on a combined return (Filing Status 2), each taxpayer must claim his or her own credits from line 1, divide the credits on line 2, and enter the totals in Boxes 3A and 3B. All other filers enter the amount from line 3 in Box 3B

3 Enter total credits

	Spouse	Yourself
3A		3B
	x \$10	x \$10
4A		4B

4 Multiply credits on line 3A by \$10 and enter on line 4A. Multiply credits on line 3B by \$10 and enter on line 4B. **Enter here and on page 1, line 17, Columns A and B**

SECTION C—FAMILY SIZE TAX CREDIT

(List the name and Social Security number of qualifying children that are not claimed as dependents in Section B.)

First and Last Name	Social Security number	First and Last Name	Social Security number

Attach a complete copy of federal Form 1040 if you received farm, business, or rental income or loss. If not required, check here.

I, the undersigned, declare under penalties of perjury that I have examined this return, including all accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I also understand and agree that our election to file a combined return under the provisions of Regulation 103 KAR 17:020 will result in refunds being made payable to us jointly and in each of us being jointly and severally liable for all taxes accruing under this return.

Your Signature (If joint or combined return, both must sign.)	Driver's License/State Issued ID No.	Date Signed	() Telephone Number (daytime)
Spouse's Signature	Driver's License/State Issued ID No.	Date Signed	
Typed or Printed Name of Preparer Other than Taxpayer	I.D. Number of Preparer	Date	
Firm Name	EIN	Date	

MAIL TO:

REFUNDS

Kentucky Department of Revenue, P. O. Box 856970, Louisville, KY 40285-6970.



PAYMENTS

Kentucky Department of Revenue, P. O. Box 856980, Louisville, KY 40285-6980.



KENTUCKY INDIVIDUAL INCOME TAX RETURN Full-Year Residents Only



For calendar year or other taxable year beginning _____, 2016, and ending _____, 20_____.

A. Spouse's Social Security Number

B. Your Social Security Number

Grid for Spouse's Social Security Number

Grid for Your Social Security Number

Name—Last, First, Middle Initial (Joint or combined return, give both names and initials.)

Grid for Name

Mailing Address (Number and Street including Apartment Number or P.O. Box)

Grid for Mailing Address

City, Town or Post Office

State

ZIP Code

Grid for City, Town or Post Office

Grid for State

Grid for ZIP Code

FILING STATUS (see instructions)

- 1 Single
2 Married, filing separately on this combined return. (If both had income.)
3 Married, filing joint return.
4 Married, filing separate returns. Enter spouse's Social Security number above and full name here.

POLITICAL PARTY FUND

Designating \$2 will not change your refund or tax due.

- A. Spouse B. Yourself
Democratic (1) Republican (2) No Designation (3)
(4) (5) (6)

INCOME/TAX

- 5 Enter amount from federal Form 1040, line 37; 1040A, line 21 or 1040EZ, line 4. (If total of Columns A and B is \$32,319 or less, you may qualify for the Family Size Tax Credit. See instructions.)
6 Additions from Schedule M, line 8
7 Add lines 5 and 6
8 Subtractions from Schedule M, line 20
9 Subtract line 8 from line 7. This is your Kentucky Adjusted Gross Income
10 Itemizers: Enter itemized deductions from Kentucky Schedule A. Nonitemizers: Enter \$2,460 in Columns A and/or B
11 Subtract line 10 from line 9. This is your Taxable Income
12 Enter tax from Tax Table, Computation or Schedule J. Check if from Schedule J
13 Enter tax from Form 4972-K; Schedule RC-R; Schedule DS-R; Angel Investor Recapture
14 Add lines 12 and 13 and enter total here
15 Enter amounts from page 3, Section A, lines 25A and 25B
16 Subtract line 15 from line 14. If line 15 is larger than line 14, enter zero
17 Enter personal tax credit amounts from page 3, Section B, lines 4A and 4B
18 Subtract line 17 from line 16. If line 17 is larger than line 16, enter zero
19 Add tax amount(s) in Columns A and B, line 18 and enter here
20 Check the box that represents your total family size (see instructions before completing lines 20 and 21)
21 Multiply line 19 by Family Size Tax Credit decimal amount
22 Subtract line 21 from line 19
23 Enter the Education Tuition Tax Credit from Form 8863-K
24 Subtract line 23 from line 22
25 Enter Child and Dependent Care Credit from federal Form 2441, line 9 x 20% (.20)
26 Income Tax Liability. Subtract line 25 from line 24. If line 25 is larger than line 24, enter zero
27 Enter KENTUCKY USE TAX due on Internet, mail order, or other out-of-state purchases (see instructions)
28 Add lines 26 and 27. Enter here and on page 2, line 29

A. Spouse (Use if Filing Status 2 is checked.)

B. Yourself (or Joint)

Table with 4 columns: Line number, Column A, Column B, and Total. Rows 5-28.

Attach Form W-2(s) and Other Supporting Statement(s) here. Enclose payment but Do Not Staple.



REFUND/TAX PAYMENT SUMMARY

29	Enter amount from page 1, line 28. This is your Total Tax Liability	29		00
30	(a) Enter Kentucky income tax withheld as shown on attached 2016 Form W-2(s) and other supporting statements	30(a)		00
	(b) Enter 2016 Kentucky estimated tax payments	30(b)		00
	(c) Enter 2016 refundable certified rehabilitation credit (KRS 141.382(1)(b)).....	30(c)		00
	(d) Enter 2016 film industry tax credit (KRS 141.383).....	30(d)		00
31	Add lines 30(a) through 30(d)	31		00
32	If line 31 is larger than line 29, enter AMOUNT OVERPAID (see instructions)	32		00
33	<i>Fund Contributions; See instructions.</i>			
(a)	Nature and Wildlife Fund		00	
(b)	Child Victims' Trust Fund		00	
(c)	Veterans' Program Trust Fund ..		00	
(d)	Breast Cancer Research/ Education Trust Fund		00	
(e)	Farms to Food Banks Trust Fund		00	
(f)	Local History Trust Fund		00	
(g)	Special Olympics Kentucky		00	
(h)	Pediatric Cancer Research Trust Fund ..		00	
(i)	Rape Crisis Center Trust Fund		00	
34	Add lines 33(a) through 33(i)	34		00
35	Amount of line 32 to be CREDITED TO YOUR 2017 ESTIMATED TAX	35	CREDIT FORWARD	00
36	Subtract lines 34 and 35 from line 32. Amount to be REFUNDED TO YOU	36	REFUND	00
	REFUND OPTIONS (Not available for amended returns) Check here if you would like your refund issued on a Bank of America Prepaid Debit Card <input type="checkbox"/> Check here if you would like to receive your Debit Card material in Spanish <input type="checkbox"/>			
37	If line 29 is larger than line 31, enter ADDITIONAL TAX DUE	37		00
38	(a) Estimated tax penalty and/or interest. <input type="checkbox"/> Check if Form 2210-K attached	38(a)		00
	(b) Interest	38(b)		00
	(c) Late payment penalty	38(c)		00
	(d) Late filing penalty.....	38(d)		00
39	Add lines 38(a) through 38(d). Enter here.....	39		00
40	Add lines 37 and 39 and enter here. This is the AMOUNT YOU OWE	40	OWE	00

- Visit www.revenue.ky.gov for electronic payment options; or
- Make check payable to **Kentucky State Treasurer**, include your Social Security number and "KY Income Tax—2016."

SECTION A—BUSINESS INCENTIVE AND OTHER TAX CREDITS

	A. Spouse		B. Yourself	
1 Enter nonrefundable limited liability entity credit (KRS 141.0401(2))	1	00	1	00
2 Enter Kentucky small business tax credit	2	00	2	00
3 Enter skills training investment credit (attach copy(ies) of certification).....	3	00	3	00
4 Enter nonrefundable certified rehabilitation credit (KRS 171.397(1)(a))	4	00	4	00
5 Enter credit for tax paid to another state (attach copy of other state's return(s))	5	00	5	00
6 Enter unemployment credit (attach Schedule UTC).....	6	00	6	00
7 Enter recycling and/or composting equipment credit (attach Schedule RC)	7	00	7	00
8 Enter Kentucky investment fund credit (attach copy(ies) of certification).....	8	00	8	00
9 Enter coal incentive credit.....	9	00	9	00
10 Enter qualified research facility credit (attach Schedule QR).....	10	00	10	00
11 Enter GED incentive credit (attach Form DAEL-31).....	11	00	11	00
12 Enter voluntary environmental remediation credit (attach Schedule VERB).....	12	00	12	00
13 Enter biodiesel and renewable diesel credit.....	13	00	13	00
14 Enter environmental stewardship credit.....	14	00	14	00
15 Enter clean coal incentive credit.....	15	00	15	00
16 Enter ethanol credit (attach Schedule ETH)	16	00	16	00
17 Enter cellulosic ethanol credit (attach Schedule CELL)	17	00	17	00
18 Enter energy efficiency products credit carryforward from 2015	18	00	18	00

Continue to page 3 to complete Section A



SECTION A—BUSINESS INCENTIVE AND OTHER TAX CREDITS (continued)		A. Spouse		B. Yourself	
19	Enter railroad maintenance and improvement credit (attach Schedule RR-1).....	19	00	19	00
20	Enter Endow Kentucky credit (attach Schedule ENDOW)	20	00	20	00
21	Enter New Markets Development Program credit	21	00	21	00
22	Enter food donation credit (attach Schedule FD).....	22	00	22	00
23	Enter distilled spirits credit (attach Schedule DS)	23	00	23	00
24	Enter angel investor credit	24	00	24	00
25	Add lines 1 through 24, Columns A and B. Enter here and on page 1, line 15 ..	25	00	25	00

SECTION B—PERSONAL TAX CREDITS

	Check Regular	Check all four if 65 or over	Check all four if blind	Check both for Kentucky National Guard	
1 (a) Credits for yourself:	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	1 Enter number of boxes checked on line 1
(b) Credits for spouse:	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input style="width: 50px; height: 20px;" type="text"/>

2 Dependents:

First and Last Name	Dependent's Social Security number	Dependent's relationship to you	Check if qualifying child for family size tax credit	
			<input type="checkbox"/>	• lived with you.....
			<input type="checkbox"/>	• did not live with you (see instructions).....
			<input type="checkbox"/>	• other dependents.....

3 Add total number of credits claimed on lines 1 and 2.
If married filing separately on a combined return (Filing Status 2), each taxpayer must claim his or her own credits from line 1, divide the credits on line 2, and enter the totals in Boxes 3A and 3B. All other filers enter the amount from line 3 in Box 3B

3 Enter total credits

	Spouse	Yourself
3A	3B	
x \$10	x \$10	
4A	4B	

4 Multiply credits on line 3A by \$10 and enter on line 4A. Multiply credits on line 3B by \$10 and enter on line 4B. **Enter here and on page 1, line 17, Columns A and B**

SECTION C—FAMILY SIZE TAX CREDIT

(List the name and Social Security number of qualifying children that are not claimed as dependents in Section B.)

First and Last Name	Social Security number	First and Last Name	Social Security number

Attach a complete copy of federal Form 1040 if you received farm, business, or rental income or loss. If not required, check here.

I, the undersigned, declare under penalties of perjury that I have examined this return, including all accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I also understand and agree that our election to file a combined return under the provisions of Regulation 103 KAR 17:020 will result in refunds being made payable to us jointly and in each of us being jointly and severally liable for all taxes accruing under this return.

			()
Your Signature (If joint or combined return, both must sign.)	Driver's License/State Issued ID No.	Date Signed	Telephone Number (daytime)
Spouse's Signature	Driver's License/State Issued ID No.	Date Signed	
Typed or Printed Name of Preparer Other than Taxpayer	I.D. Number of Preparer	Date	
Firm Name	EIN	Date	

MAIL TO: **REFUNDS** Kentucky Department of Revenue, P. O. Box 856970, Louisville, KY 40285-6970.
PAYMENTS Kentucky Department of Revenue, P. O. Box 856980, Louisville, KY 40285-6980.



740-EZ

Single Persons With No Dependents

42A740-EZ
Department of Revenue



KENTUCKY
INDIVIDUAL INCOME TAX RETURN



Your Social Security Number

Grid for Social Security Number

Name—Last, First, Middle Initial (Joint or combined return, give both names and initials.)

Grid for Name

Mailing Address (Number and Street including Apartment Number or P.O. Box)

Grid for Mailing Address

City, Town or Post Office

State

ZIP Code

Grid for City, State, and ZIP Code

POLITICAL PARTY FUND

Designating \$2 will not change your refund or tax due. Mark an X in Box 1 for Democratic, Box 2 for Republican, or Box 3 for No Designation.

Boxes 1, 2, 3 for Political Party Fund

Table with 3 columns: Line number, Description, Amount. Lines 1-12 including Federal Adjusted Gross Income, Standard deduction, Taxable Income, Tax, and Total Tax Liability.

Table with 3 columns: Line number, Description, Amount. Lines 13(a)-(i) for various fund contributions.

Table with 3 columns: Line number, Description, Amount. Lines 14-16 including refund options and amount owed.

I, the undersigned, declare under penalties of perjury that I have examined this return, including any accompanying statements, and to the best of my knowledge and belief, it is true, correct and complete.

Your Signature, Driver's License/State Issued ID No., Date Signed, Telephone Number (daytime)

Typed or Printed Name of Preparer Other Than Taxpayer, I.D. Number of Preparer, Date

Mail to: REFUNDS Kentucky Department of Revenue, P. O. Box 856970, Louisville, KY 40285-6970. PAYMENTS Kentucky Department of Revenue, P. O. Box 856980, Louisville, KY 40285-6980

Attach Form W-2, Wage and Tax Statement(s), here. Enclose payment but Do Not Staple.

Who May Use Form 740-EZ—You may use Form 740-EZ if all five of the following apply:

- ✓ you were a Kentucky resident for the entire year;
- ✓ you are filing federal Form 1040EZ;
- ✓ your filing status is single;
- ✓ you do not claim additional credits for being age 65 or over, blind, or a member of the Kentucky National Guard at the end of 2016; and
- ✓ you had only wages, salaries, tips, unemployment compensation, taxable scholarship or fellowship grants, and your taxable interest was \$1,500 or less.

If you do not meet all five of the above requirements, see Form 740 instructions.

When to File—The 2016 Form 740-EZ must be postmarked no later than April 18, 2017, to avoid penalties and interest.

Social Security Number—You are required to provide your social security number per Section 405, Title 42, of the United States Code. This information will be used to establish your identity for tax purposes only.

COMPLETING FORM 740-EZ—For more information, see the General Instructions. You may also contact the Department of Revenue in Frankfort at (502) 564-4581 or a Kentucky Taxpayer Service Center.

Please print your numbers inside the boxes with black ink. Do not use dollar signs.

Political Party Fund Designation—You may designate \$2 of your taxes to either the Democratic or Republican party if you have a tax liability of at least \$2.

LINE-BY-LINE INSTRUCTIONS

Line 1—Enter federal adjusted gross income from Form 1040EZ, Line 4. **(Do not confuse federal adjusted gross income with federal taxable income shown on the federal return.)** If \$15,800 or less, see instructions for Line 7 and enter the decimal amount on Line 7.

If you are not required to file a federal income tax return, enter the total income from sources within and without Kentucky.

Line 2—The standard deduction of \$2,460 has been preprinted. If your itemized deductions exceed \$2,460, it will benefit you to file Form 740 and itemize your deductions on Schedule A.

Line 4—Compute your tax using the following tax rate schedule.

<i>If taxable income is:</i>	<i>Tax before credit is:</i>
\$ 0 — \$3,000	2% of taxable income
\$3,001 — \$4,000	3% of taxable income minus \$30
\$4,001 — \$5,000	4% of taxable income minus \$70
\$5,001 — \$8,000	5% of taxable income minus \$120
\$8,001 — \$75,000	5.8% of taxable income minus \$184
\$75,001 and up	6% of taxable income minus \$334

Example: (Taxable income) \$8,500 x 5.8% - \$184 = \$309

Note: An optional tax table is available online at www.revenue.ky.gov or by calling the Department of Revenue, (502) 564-4581.

Line 7—Family Size Tax Credit—For single persons eligible to file Form 740-EZ, Kentucky family size is one and Kentucky modified gross income is equal to federal adjusted gross income. A family size tax credit is allowed for single persons whose **Kentucky modified gross income** is not over \$15,800. If over \$15,800, you do not qualify for this tax credit. Skip Line 7.

Enter in the space provided the decimal amount from the following table.

Family Size One		Percent of Tax as Family Size Tax Credit	
If the Kentucky modified gross income (Line 1) is:		Enter decimal amount on Line 7	
over	but not over		
\$ 0	\$11,880	1.00	(100%)
\$11,880	\$12,355	0.90	(90%)
\$12,355	\$12,830	0.80	(80%)
\$12,830	\$13,306	0.70	(70%)
\$13,306	\$13,781	0.60	(60%)
\$13,781	\$14,256	0.50	(50%)
\$14,256	\$14,731	0.40	(40%)
\$14,731	\$15,088	0.30	(30%)
\$15,088	\$15,444	0.20	(20%)
\$15,444	\$15,800	0.10	(10%)

Multiply amount on Line 6 by decimal amount. Enter result on Line 7. This is your Family Size Tax Credit.

Line 9, Kentucky Use Tax—Enter 6 percent of out-of-state purchases for use in Kentucky on which sales tax was not charged. Include Internet and catalog purchases, subscriptions, furniture, carpet, boats, etc.

Line 11, Kentucky Tax Withheld—Enter the amount of Kentucky income tax withheld as shown on your 2016 wage and tax statements. **These statements must be attached to your return.** Make sure you file the copy designated to be filed with your state return. Do not include amounts withheld by your employer for other states. Amounts withheld in other states cannot be credited to your Kentucky income tax. Local government occupational, license or income taxes must not be included on Line 11.

Line 12—If the amount on Line 11 (Kentucky Tax Withheld) is more than the amount on Line 10 (Total Tax Liability), you have an overpayment and are due a refund. Subtract Line 10 from Line 11, and enter the difference on Line 12 as an overpayment. However, if your Total Tax Liability on Line 10 is larger than Line 11, you owe additional tax. Subtract Line 11 from Line 10 and enter on Line 16.

Line 13—If you show an overpayment on Line 12, you may contribute to: (a) the **Nature and Wildlife Fund**, (b) the **Child Victims' Trust Fund**, (c) the **Veterans' Program Trust Fund**, (d) the **Breast Cancer Research and Education Trust Fund**, (e) the **Farms to Food Banks Trust Fund**, (f) the **Local History Trust Fund**, (g) **Special Olympics Kentucky**, (h) the **Pediatric Cancer Research Trust Fund**, and/or (i) the **Rape Crisis Center Trust Fund**. *Donations are voluntary and amounts donated will be deducted from your refund.*

Enter the amount(s) you wish to contribute on Lines 13(a) through 13(i). The total of these amounts cannot exceed the amount of the overpayment.

Line 16—You must pay any tax due shown on Line 16. Make check payable to **Kentucky State Treasurer**, and attach it to your return. On the face of the check, please write "KY Income Tax-2016" and your Social Security number.

Underpayment of Estimated Tax—If the amount owed is more than 30 percent of the income tax liability on Line 8, you may be subject to a penalty of 10 percent of the underpayment of estimated tax. The minimum penalty is \$25. The amount of the penalty may be calculated on Form 2210-K, which may be obtained from the Department of Revenue.

Interest and Penalties—File your return and pay any additional tax due by April 18, 2017 to avoid interest and penalties. See the General Instructions or contact the Department of Revenue for additional information.

Note: Penalties but not interest may be reduced or waived if reasonable cause can be shown.

740-EZ

Single Persons With No Dependents

42A740-EZ
Department of Revenue



KENTUCKY
INDIVIDUAL INCOME TAX RETURN



Your Social Security Number

Grid for Social Security Number

Name—Last, First, Middle Initial (Joint or combined return, give both names and initials.)

Grid for Name

Mailing Address (Number and Street including Apartment Number or P.O. Box)

Grid for Mailing Address

City, Town or Post Office

State

ZIP Code

Grid for City, State, and ZIP Code

POLITICAL PARTY FUND

Designating \$2 will not change your refund or tax due. Mark an X in Box 1 for Democratic, Box 2 for Republican, or Box 3 for No Designation.

Boxes 1, 2, 3 for Political Party Fund

Table with 3 columns: Line number, Description, Amount. Lines 1-12 including Federal Adjusted Gross Income, Standard deduction, Taxable Income, Tax, and Total Tax Liability.

Table with 3 columns: Line number, Description, Amount. Lines 13(a)-(i) for various fund contributions.

Table with 3 columns: Line number, Description, Amount. Lines 14-16 including refund options and amount owed.

I, the undersigned, declare under penalties of perjury that I have examined this return, including any accompanying statements, and to the best of my knowledge and belief, it is true, correct and complete.

Your Signature, Driver's License/State Issued ID No., Date Signed, Telephone Number (daytime)

Typed or Printed Name of Preparer Other Than Taxpayer, I.D. Number of Preparer, Date

Mail to: REFUNDS Kentucky Department of Revenue, P. O. Box 856970, Louisville, KY 40285-6970. PAYMENTS Kentucky Department of Revenue, P. O. Box 856980, Louisville, KY 40285-6980

Attach Form W-2, Wage and Tax Statement(s), here. Enclose payment but Do Not Staple.

Who May Use Form 740-EZ—You may use Form 740-EZ if all five of the following apply:

- ✓ you were a Kentucky resident for the entire year;
- ✓ you are filing federal Form 1040EZ;
- ✓ your filing status is single;
- ✓ you do not claim additional credits for being age 65 or over, blind, or a member of the Kentucky National Guard at the end of 2016; and
- ✓ you had only wages, salaries, tips, unemployment compensation, taxable scholarship or fellowship grants, and your taxable interest was \$1,500 or less.

If you do not meet all five of the above requirements, see Form 740 instructions.

When to File—The 2016 Form 740-EZ must be postmarked no later than April 18, 2017, to avoid penalties and interest.

Social Security Number—You are required to provide your social security number per Section 405, Title 42, of the United States Code. This information will be used to establish your identity for tax purposes only.

COMPLETING FORM 740-EZ—For more information, see the General Instructions. You may also contact the Department of Revenue in Frankfort at (502) 564-4581 or a Kentucky Taxpayer Service Center.

Please print your numbers inside the boxes with black ink. Do not use dollar signs.

Political Party Fund Designation—You may designate \$2 of your taxes to either the Democratic or Republican party if you have a tax liability of at least \$2.

LINE-BY-LINE INSTRUCTIONS

Line 1—Enter federal adjusted gross income from Form 1040EZ, Line 4. **(Do not confuse federal adjusted gross income with federal taxable income shown on the federal return.)** If \$15,800 or less, see instructions for Line 7 and enter the decimal amount on Line 7.

If you are not required to file a federal income tax return, enter the total income from sources within and without Kentucky.

Line 2—The standard deduction of \$2,460 has been preprinted. If your itemized deductions exceed \$2,460, it will benefit you to file Form 740 and itemize your deductions on Schedule A.

Line 4—Compute your tax using the following tax rate schedule.

<i>If taxable income is:</i>	<i>Tax before credit is:</i>
\$ 0 — \$3,000	2% of taxable income
\$3,001 — \$4,000	3% of taxable income minus \$30
\$4,001 — \$5,000	4% of taxable income minus \$70
\$5,001 — \$8,000	5% of taxable income minus \$120
\$8,001 — \$75,000	5.8% of taxable income minus \$184
\$75,001 and up	6% of taxable income minus \$334

Example: (Taxable income) \$8,500 x 5.8% - \$184 = \$309

Note: An optional tax table is available online at www.revenue.ky.gov or by calling the Department of Revenue, (502) 564-4581.

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Enter in the space provided the decimal amount from the following table.

Family Size One		Percent of Tax as Family Size Tax Credit	
If the Kentucky modified gross income (Line 1) is:		Enter decimal amount on Line 7	
over	but not over		
\$ 0	\$11,880	1.00	(100%)
\$11,880	\$12,355	0.90	(90%)
\$12,355	\$12,830	0.80	(80%)
\$12,830	\$13,306	0.70	(70%)
\$13,306	\$13,781	0.60	(60%)
\$13,781	\$14,256	0.50	(50%)
\$14,256	\$14,731	0.40	(40%)
\$14,731	\$15,088	0.30	(30%)
\$15,088	\$15,444	0.20	(20%)
\$15,444	\$15,800	0.10	(10%)

Multiply amount on Line 6 by decimal amount. Enter result on Line 7. This is your Family Size Tax Credit.

Line 9, Kentucky Use Tax—Enter 6 percent of out-of-state purchases for use in Kentucky on which sales tax was not charged. Include Internet and catalog purchases, subscriptions, furniture, carpet, boats, etc.

Line 11, Kentucky Tax Withheld—Enter the amount of Kentucky income tax withheld as shown on your 2016 wage and tax statements. **These statements must be attached to your return.** Make sure you file the copy designated to be filed with your state return. Do not include amounts withheld by your employer for other states. Amounts withheld in other states cannot be credited to your Kentucky income tax. Local government occupational, license or income taxes must not be included on Line 11.

Line 12—If the amount on Line 11 (Kentucky Tax Withheld) is more than the amount on Line 10 (Total Tax Liability), you have an overpayment and are due a refund. Subtract Line 10 from Line 11, and enter the difference on Line 12 as an overpayment. However, if your Total Tax Liability on Line 10 is larger than Line 11, you owe additional tax. Subtract Line 11 from Line 10 and enter on Line 16.

Line 13—If you show an overpayment on Line 12, you may contribute to: (a) the **Nature and Wildlife Fund**, (b) the **Child Victims' Trust Fund**, (c) the **Veterans' Program Trust Fund**, (d) the **Breast Cancer Research and Education Trust Fund**, (e) the **Farms to Food Banks Trust Fund**, (f) the **Local History Trust Fund**, (g) **Special Olympics Kentucky**, (h) the **Pediatric Cancer Research Trust Fund**, and/or (i) the **Rape Crisis Center Trust Fund**. *Donations are voluntary and amounts donated will be deducted from your refund.*

Enter the amount(s) you wish to contribute on Lines 13(a) through 13(i). The total of these amounts cannot exceed the amount of the overpayment.

Line 16—You must pay any tax due shown on Line 16. Make check payable to **Kentucky State Treasurer**, and attach it to your return. On the face of the check, please write "KY Income Tax-2016" and your Social Security number.

Underpayment of Estimated Tax—If the amount owed is more than 30 percent of the income tax liability on Line 8, you may be subject to a penalty of 10 percent of the underpayment of estimated tax. The minimum penalty is \$25. The amount of the penalty may be calculated on Form 2210-K, which may be obtained from the Department of Revenue.

Interest and Penalties—File your return and pay any additional tax due by April 18, 2017 to avoid interest and penalties. See the General Instructions or contact the Department of Revenue for additional information.

Note: Penalties but not interest may be reduced or waived if reasonable cause can be shown.

SCHEDULE A

Form 740

42A740-A

Department of Revenue



KENTUCKY ITEMIZED DEDUCTIONS

➤ See instructions.
➤ Attach to Form 740.

2016

Enter name(s) as shown on Form 740, page 1.

Your Social Security Number

Medical and Dental Expenses	Do not include expenses reimbursed or paid by others.				
	1. Medical and dental expenses.....	1		00	
	2. Enter combined totals from Form 740, line 9.....	2		00	
	3. Multiply line 2 by 10% (.10). But if either you or your spouse was born before January 2, 1952, multiply line 2 by 7.5% (.075) instead.....	3		00	
	4. Total medical and dental. Subtract line 3 from line 1. If zero or less, enter -0-.....	➤ 4			00
Taxes <i>Note: Sales and use taxes and new motor vehicle taxes are not deductible.</i>	5. Local income taxes (do not include state income tax).....	5		00	
	6. Real estate taxes.....	6		00	
	7. Personal property taxes.....	7		00	
	8. Other taxes (list) _____	8		00	
	9. Total taxes. Add lines 5 through 8. Enter here.....	➤ 9			00
Interest Expense <i>Note: Personal interest is not deductible.</i>	10. Home mortgage interest and points reported to you on federal Form 1098.....	10		00	
	11. Home mortgage interest not reported to you on federal Form 1098 (if paid to an individual, show that person's name, identifying number and address) _____	11		00	
	See instructions for lines 12 and 13.				
	12. Points not reported to you on federal Form 1098.....	12		00	
	13. Qualified mortgage insurance premiums	13		00	
	14. Investment interest (attach federal Form 4952 if required)	14		00	
	15. Total interest. Add lines 10 through 14. Enter here	➤ 15			00
Contributions <i>Note: For any contribution of \$250 or more, see instructions.</i>	16. Contributions by cash or check	16		00	
	17. Other than cash or check (attach federal Form 8283 if over \$500)	17		00	
	18. Artistic charitable contributions deduction (attach copy of appraisal)	18		00	
	19. Carryover from prior year.....	19		00	
	20. Total contributions. Add lines 16 through 19. Enter here	➤ 20			00
Casualty and Theft Losses	21. Enter amount from attached federal Form 4684, Section A, line 16.....	21		00	
	22. Enter combined totals from Form 740, line 9.....	22		00	
	23. Multiply line 22 by 10% (.10).....	23		00	
	24. Total casualty or theft loss(es). Subtract line 23 from line 21. If zero or less, enter -0-.....	➤ 24			00
Job Expenses and Most Other Miscellaneous Deductions	25. Unreimbursed employee expenses—job travel, union dues, job education, etc. (attach Form 2106 or 2106-EZ if applicable) list _____	25		00	
	26. Tax preparation fees.....	26		00	
	27. Other (investment, safe deposit box, etc.) list _____	27		00	
	28. Add the amounts on lines 25, 26 and 27. Enter here	28		00	
	29. Enter combined totals from Form 740, line 9	29		00	
	30. Multiply line 29 by 2% (.02)	30		00	
	31. Total. Subtract line 30 from line 28. If zero or less, enter -0-	➤ 31			00
Other Miscellaneous Deductions	32. Other (see instructions) _____	➤ 32			00
Total Itemized Deductions	33. Add lines 4, 9, 15, 20, 24, 31 and 32. Enter here	➤ 33			00

- ★ If single or married filing jointly and your income for Form 740, line 9, column B does not exceed \$184,850, enter total itemized deductions on Form 740, line 10, column B.
- ★ All others go to page 2.



If the combined totals on Form 740, line 9, exceeds \$184,850 (\$92,425 if married filing separately on a combined return or separate returns), skip Part I and complete Part II.

PART I—DIVIDING DEDUCTIONS BETWEEN SPOUSES

Use this schedule if married filing separately on a combined return.

1. Total itemized deductions from page 1, line 33.....	_____	.00
2. Percent of income (Form 740, line 9, Column A) to total income (Form 740, total of line 9, Columns A and B).....	_____	%
3. Percent of income (Form 740, line 9, Column B) to total income (Form 740, total of line 9, Columns A and B).....	_____	%
4. Percent on line 2 times total deductions entered on line 1 (enter here and on Form 740, line 10, Column A)	_____	.00
5. Percent on line 3 times total deductions entered on line 1 (enter here and on Form 740, line 10, Column B)	_____	.00

PART II—ITEMIZED DEDUCTIONS LIMITATION SCHEDULE

Use this schedule if the adjusted gross income on Form 740, line 9, exceeds \$184,850 (\$92,425 if married filing separately on a combined return or separate returns).

	A. Spouse	B. Yourself (or Joint)
<ul style="list-style-type: none"> If married filing separately on a combined return, enter in Column A the percent of income (Form 740, line 9, Column A) to total income (Form 740, total of line 9, Columns A and B); enter in Column B the percent of income (Form 740, line 9, Column B) to total income (Form 740, total of line 9, Columns A and B). If single, married filing a joint return or married filing separate returns, enter 100% in Column B. 	_____ %	_____ %
1. Multiply the amount on Schedule A, line 33, by the percent of income shown in Columns A and/or B	1. _____ .00	1. _____ .00
2. Add the amounts on Schedule A, lines 4, 14 and 24, plus any gambling losses included on line 32 and multiply by the percent of income shown in Columns A and/or B.....	2. _____ .00	2. _____ .00
<i>Note: Be sure your total gambling losses are clearly identified on line 32.</i>		
3. Subtract the amount on line 2 from the amount on line 1. If the result is zero or less, enter -0-	3. _____ .00	3. _____ .00
4. Multiply the amount on line 3 above by 80% (.80)....	4. _____ .00	4. _____ .00
5. Enter the amount from Form 740, line 9	5. _____ .00	5. _____ .00
6. Enter \$184,850 (\$92,425 if married filing separately on a combined return or separate returns)	6. _____ .00	6. _____ .00
7. Subtract the amount on line 6 from the amount on line 5. If the result is zero or less, enter -0-	7. _____ .00	7. _____ .00
8. Multiply the amount on line 7 above by 3% (.03).....	8. _____ .00	8. _____ .00
9. Compare the amounts on lines 4 and 8 above. Enter the smaller of the two amounts here	9. _____ .00	9. _____ .00
10. Total itemized deductions. Subtract the amount on line 9 from the amount on line 1. Enter the result here and on Form 740, line 10	10. _____ .00	10. _____ .00

SCHEDULE A

Form 740

42A740-A

Department of Revenue



KENTUCKY ITEMIZED DEDUCTIONS

➤ See instructions.
➤ Attach to Form 740.

2016

Enter name(s) as shown on Form 740, page 1.

Your Social Security Number

Medical and Dental Expenses	Do not include expenses reimbursed or paid by others.				
	1. Medical and dental expenses.....	1		00	
	2. Enter combined totals from Form 740, line 9.....	2		00	
	3. Multiply line 2 by 10% (.10). But if either you or your spouse was born before January 2, 1952, multiply line 2 by 7.5% (.075) instead.....	3		00	
	4. Total medical and dental. Subtract line 3 from line 1. If zero or less, enter -0-.....	➤ 4			00
Taxes <i>Note: Sales and use taxes and new motor vehicle taxes are not deductible.</i>	5. Local income taxes (do not include state income tax).....	5		00	
	6. Real estate taxes.....	6		00	
	7. Personal property taxes.....	7		00	
	8. Other taxes (list) _____	8		00	
	9. Total taxes. Add lines 5 through 8. Enter here.....	➤ 9			00
Interest Expense <i>Note: Personal interest is not deductible.</i>	10. Home mortgage interest and points reported to you on federal Form 1098.....	10		00	
	11. Home mortgage interest not reported to you on federal Form 1098 (if paid to an individual, show that person's name, identifying number and address) _____	11		00	
	See instructions for lines 12 and 13.				
	12. Points not reported to you on federal Form 1098.....	12		00	
	13. Qualified mortgage insurance premiums	13		00	
	14. Investment interest (attach federal Form 4952 if required)	14		00	
	15. Total interest. Add lines 10 through 14. Enter here	➤ 15			00
Contributions <i>Note: For any contribution of \$250 or more, see instructions.</i>	16. Contributions by cash or check	16		00	
	17. Other than cash or check (attach federal Form 8283 if over \$500)	17		00	
	18. Artistic charitable contributions deduction (attach copy of appraisal)	18		00	
	19. Carryover from prior year.....	19		00	
	20. Total contributions. Add lines 16 through 19. Enter here	➤ 20			00
Casualty and Theft Losses	21. Enter amount from attached federal Form 4684, Section A, line 16.....	21		00	
	22. Enter combined totals from Form 740, line 9.....	22		00	
	23. Multiply line 22 by 10% (.10).....	23		00	
	24. Total casualty or theft loss(es). Subtract line 23 from line 21. If zero or less, enter -0-.....	➤ 24			00
Job Expenses and Most Other Miscellaneous Deductions	25. Unreimbursed employee expenses—job travel, union dues, job education, etc. (attach Form 2106 or 2106-EZ if applicable) list _____	25		00	
	26. Tax preparation fees.....	26		00	
	27. Other (investment, safe deposit box, etc.) list _____	27		00	
	28. Add the amounts on lines 25, 26 and 27. Enter here	28		00	
	29. Enter combined totals from Form 740, line 9	29		00	
	30. Multiply line 29 by 2% (.02)	30		00	
	31. Total. Subtract line 30 from line 28. If zero or less, enter -0-	➤ 31			00
Other Miscellaneous Deductions	32. Other (see instructions) _____	➤ 32			00
Total Itemized Deductions	33. Add lines 4, 9, 15, 20, 24, 31 and 32. Enter here	➤ 33			00

- ★ If single or married filing jointly and your income for Form 740, line 9, column B does not exceed \$184,850, enter total itemized deductions on Form 740, line 10, column B.
- ★ All others go to page 2.



If the combined totals on Form 740, line 9, exceeds \$184,850 (\$92,425 if married filing separately on a combined return or separate returns), skip Part I and complete Part II.

PART I—DIVIDING DEDUCTIONS BETWEEN SPOUSES

Use this schedule if married filing separately on a combined return.

1. Total itemized deductions from page 1, line 33.....	_____	.00
2. Percent of income (Form 740, line 9, Column A) to total income (Form 740, total of line 9, Columns A and B).....	_____	%
3. Percent of income (Form 740, line 9, Column B) to total income (Form 740, total of line 9, Columns A and B).....	_____	%
4. Percent on line 2 times total deductions entered on line 1 (enter here and on Form 740, line 10, Column A)	_____	.00
5. Percent on line 3 times total deductions entered on line 1 (enter here and on Form 740, line 10, Column B)	_____	.00

PART II—ITEMIZED DEDUCTIONS LIMITATION SCHEDULE

Use this schedule if the adjusted gross income on Form 740, line 9, exceeds **\$184,850 (\$92,425 if married filing separately on a combined return or separate returns)**.

	A. Spouse	B. Yourself (or Joint)
<ul style="list-style-type: none"> If married filing separately on a combined return, enter in Column A the percent of income (Form 740, line 9, Column A) to total income (Form 740, total of line 9, Columns A and B); enter in Column B the percent of income (Form 740, line 9, Column B) to total income (Form 740, total of line 9, Columns A and B). If single, married filing a joint return or married filing separate returns, enter 100% in Column B. 	_____ %	_____ %
1. Multiply the amount on Schedule A, line 33, by the percent of income shown in Columns A and/or B	1. _____ .00	1. _____ .00
2. Add the amounts on Schedule A, lines 4, 14 and 24, plus any gambling losses included on line 32 and multiply by the percent of income shown in Columns A and/or B.....	2. _____ .00	2. _____ .00
<i>Note: Be sure your total gambling losses are clearly identified on line 32.</i>		
3. Subtract the amount on line 2 from the amount on line 1. If the result is zero or less, enter -0-	3. _____ .00	3. _____ .00
4. Multiply the amount on line 3 above by 80% (.80)....	4. _____ .00	4. _____ .00
5. Enter the amount from Form 740, line 9	5. _____ .00	5. _____ .00
6. Enter \$184,850 (\$92,425 if married filing separately on a combined return or separate returns)	6. _____ .00	6. _____ .00
7. Subtract the amount on line 6 from the amount on line 5. If the result is zero or less, enter -0-	7. _____ .00	7. _____ .00
8. Multiply the amount on line 7 above by 3% (.03).....	8. _____ .00	8. _____ .00
9. Compare the amounts on lines 4 and 8 above. Enter the smaller of the two amounts here	9. _____ .00	9. _____ .00
10. Total itemized deductions. Subtract the amount on line 9 from the amount on line 1. Enter the result here and on Form 740, line 10	10. _____ .00	10. _____ .00

SCHEDULE M



2016

Form 740
42A740-M

**KENTUCKY
FEDERAL ADJUSTED GROSS INCOME
MODIFICATIONS**

Department of Revenue

► Attach to Form 740.

Enter name(s) as shown on tax return.	Your Social Security Number : : :
---------------------------------------	--

PART I ADDITIONS TO FEDERAL ADJUSTED GROSS INCOME

- 1 Enter interest income from bonds issued by other states and their political subdivisions.....
- 2 Enter self-employed health insurance deduction from federal Form 1040, line 29.....
- 3 Enter resident adjustment from partnerships, fiduciaries and S corporations, Schedule K-1.....
- 4 Enter federal depreciation from Form 4562.....
- 5 Enter federal Net Operating Loss
- 6 Enter federal domestic production activities deduction from federal Form 8903, line 25.....
- 7 Other additions (list and enter total):
(a) _____
(b) _____
(c) _____
- 8 Total Additions. Enter here and on Form 740, page 1, line 6

A. Spouse
(Use if Filing Status 2 is checked.)

B. Yourself
(or Joint)

1		00	1		00
2		00	2		00
3		00	3		00
4		00	4		00
5		00	5		00
6		00	6		00
7		00	7		00
8		00	8		00
9		00	9		00
10		00	10		00
11		00	11		00
12		00	12		00
13		00	13		00
14		00	14		00
15		00	15		00
16		00	16		00
17		00	17		00
18		00	18		00
19		00	19		00
20		00	20		00

PART II SUBTRACTIONS FROM FEDERAL ADJUSTED GROSS INCOME

- 9 Enter state income tax refund or credit reported as income on federal Form 1040.....
- 10 Enter interest income from U.S. government bonds and securities.....
- 11 Enter excludable amount of retirement income (attach Schedule P if more than \$41,110 per taxpayer).....
- 12 Enter taxable amount of Social Security and Railroad Retirement Board benefits from federal Form 1040, line 20(b) (1040A, line 14(b))
- 13 Enter long-term care insurance premiums.....
- 14 Enter health insurance premiums not previously deducted from income. Do not include premiums paid with pretax dollars (cafeteria plan).....
- 15 Enter resident adjustment from partnerships, fiduciaries and S corporations, Schedule K-1
- 16 Enter Kentucky depreciation from revised Form 4562
- 17 Enter Kentucky Net Operating Loss
- 18 Enter Kentucky domestic production activities deduction (see instructions).....
- 19 Other subtractions (list and enter total):
(a) _____
(b) _____
(c) _____
- 20 Total Subtractions. Enter here and on Form 740, page 1, line 8

SCHEDULE P



2016

42A740-P

Department of Revenue

Use this form to calculate
excludable retirement income.

KENTUCKY
PENSION INCOME EXCLUSION

Attach to Form 740, 740-NP or 741.

Enter name(s) as shown on tax return. Your Social Security Number

Complete this schedule and file with Form 740, 740-NP, or 741 if:

- 1. taxable pension and retirement income from all sources is greater than \$41,110 per taxpayer; and
(a) you are retired from the federal government, the Commonwealth of Kentucky or a Kentucky local government; or
(b) you receive supplemental (Tier 2) U.S. Railroad Retirement Board benefits.
2. you file Form 4972-K, Tax on Lump-Sum Distributions.

All others, STOP, you do not need to complete Schedule P. See instructions for Schedule M, line 11.

PART I—EXEMPT RETIREMENT INCOME (Do Not Include Income From Deferred Compensation Plans)

- 1. Enter on line (a) or (b) the amount of federal, Kentucky state and Kentucky local government pension income attributable to service credit earned before January 1, 1998, and supplemental (Tier 2) U.S. Railroad Retirement Board benefits included on federal Form 1040, line 16(b) (Form 1040A, line 12(b)). Also include federal or Kentucky disability retirement income attributable to service credit earned before January 1, 1998.

(a) If date of retirement is before January 1, 1998, enter here.

Table with 4 columns: Names of Payers, Date of Retirement, A. Spouse, B. Yourself. Includes a Total row.

(b) If date of retirement is after December 31, 1997, see the instructions.

Table with 6 columns: Names of Payers, Date of Retirement, Taxable Pension, Exempt Percentage, A. Spouse, B. Yourself. Includes a Total row.

(c) Add lines 1(a) and 1(b) (c) 00 00

PART II—OTHER RETIREMENT INCOME (Amounts Not Included in Line 1(c))

Table with 4 columns for entering other retirement income amounts. Line 2 total: 00 00

PART III—TOTAL TO BE EXCLUDED THIS YEAR

Table with 4 columns for totaling excluded income. Line 3: 00 00. Line 4: 00 00.

Joint filers—Combine lines 4(a) and 4(b) and enter on appropriate form.

STOP Stop here unless you have a lump-sum distribution reported on Form 4972-K.

Form 4972-K Filers—If line 3 is less than \$41,110, enter the amount on Form 4972-K, Part II, line 2.

INSTRUCTIONS—SCHEDULE P

Types of Income Subject to Exclusion—All pension and retirement income paid under a written retirement plan is eligible for exclusion. This includes pensions, annuities, IRA accounts, 401(k) and similar deferred compensation plans, death benefits, and other similar accounts or plans. As a general rule, if the income is reported on the federal income tax return, Form 1040, line 15(b) or 16(b); Form 1040A, line 11(b) or 12(b); Form 4972; or is a disability retirement benefit or deferred compensation distribution reported on Form 1040, line 7 or 1040A, line 7, then it qualifies for the exclusion.

Form 740-NP filers report only pension income received while a resident of Kentucky.

LINE-BY-LINE INSTRUCTIONS

Column A, Column B—This exclusion is for each taxpayer. A taxpayer and spouse must compute and claim their own exclusion, regardless of filing status.

PART I—Exempt Retirement Income—Enter the federally taxable portion of pension income paid by the federal government, by the Commonwealth of Kentucky, or by any Kentucky local government. Also include supplemental (Tier 2) U.S. Railroad Retirement Board benefits reported on Form 1040, line 16(b) (Form 1040A, line 12(b)) and federal or Kentucky disability retirement income included on federal Form 1040, line 7 (Form 1040A, line 7). Do not include income from deferred compensation plans in Part I.

Use Line 1(a) if retired before January 1, 1998, to report fully exempt pension benefits.

Use Line 1(b) if retired after December 31, 1997, to compute the amount of pension income attributable to service credits earned before January 1, 1998. Multiply the taxable pension

by the exempt percentage, enter the result (exempt amount) in Column A or Column B. **Use the worksheet below to compute the exempt percentage in the year of retirement.**

Note: Subtract the exempt amount from the taxable pension amount and include the difference with other retirement income in Part II.

PART II—Other Retirement Income, Line 2—Enter the amount reported on federal Form 1040 or 1040A of non-lump-sum pension and retirement income not reported on line 1(c). Also include amounts from Schedule M, line 7 (Form 740-NP, page 4, line 16) that reflect pension and IRA bases differences.

PART III—Total to Be Excluded This Year, Line 3—Enter the lesser of the amount on line 2 or \$41,110.

Line 4—Enter the total of lines 1(c) and 3. This is your pension income exclusion. Enter on line 4 and as follows: Schedule M, line 11; Form 740-NP, page 4, line 10(b); or Form 741, page 1, line 11.

DEFINITIONS—For use with Schedule P and the worksheet below.

Service Credit—Number of months (years) used by your retirement system to determine retirement benefits.

Purchased Service Credit—Voluntary purchases of service credit as allowed by your retirement system (i.e., military service or prior service with the same or similar system). **Note:** Purchased time is credited based on the dates of service.

Purchased Service Credit (Air-time)—Certain retirement plans allow for the purchase of up to five years of service credit unrelated to prior work history. These purchases are commonly known as air-time. Air-time is not included in total service earned after December 31, 1997, regardless of when purchased.

Worksheet for Federal, Kentucky State and Kentucky Local Government Retirees Who Retired After 12/31/97



Complete this worksheet only if you retired in 2016 or have not computed your exempt percentage in prior years. Keep this worksheet in your records. The percentage will be used this year and in future years to determine the amount of exempt retirement income.

Complete this worksheet to determine what percentage of your pension income is exempt. This percentage must be calculated for each pension.

If your retirement system has computed the exempt amount (earned before January 1, 1998), enter the amount on page 1, line 1(b), column A or B. If your retirement system has computed the exempt percentage, **enter the exempt percentage on page 1, line 1(b) in the exempt percentage column.** Use a separate worksheet for each governmental pension. Retain this worksheet with your tax records. **Use the percentage on line 4 to compute the exempt portion of your pension in future years.**

1. Enter total months of service credit including purchased service.....
2. Enter months of service credit earned after 12/31/97. Include sick leave credited at date of retirement, and service credit from purchase of military and other service earned after 12/31/97. Do not include purchased credit unrelated to prior work history (air-time)
3. Subtract line 2 from line 1. Total months of service before January 1, 1998.....
4. Divide line 3 by line 1. Enter here and on page 1, line 1(b), in the exempt percentage column.....
Use this percentage to determine the amount of pension attributable to service earned before 1/1/98.

SCHEDULE P



2016

42A740-P

Department of Revenue

Use this form to calculate
excludable retirement income.

KENTUCKY
PENSION INCOME EXCLUSION

Attach to Form 740, 740-NP or 741.

Enter name(s) as shown on tax return. Your Social Security Number

Complete this schedule and file with Form 740, 740-NP, or 741 if:

- 1. taxable pension and retirement income from all sources is greater than \$41,110 per taxpayer; and
(a) you are retired from the federal government, the Commonwealth of Kentucky or a Kentucky local government; or
(b) you receive supplemental (Tier 2) U.S. Railroad Retirement Board benefits.
2. you file Form 4972-K, Tax on Lump-Sum Distributions.

All others, STOP, you do not need to complete Schedule P. See instructions for Schedule M, line 11.

PART I—EXEMPT RETIREMENT INCOME (Do Not Include Income From Deferred Compensation Plans)

- 1. Enter on line (a) or (b) the amount of federal, Kentucky state and Kentucky local government pension income attributable to service credit earned before January 1, 1998, and supplemental (Tier 2) U.S. Railroad Retirement Board benefits included on federal Form 1040, line 16(b) (Form 1040A, line 12(b)). Also include federal or Kentucky disability retirement income attributable to service credit earned before January 1, 1998.

(a) If date of retirement is before January 1, 1998, enter here.

Table with 4 columns: Names of Payers, Date of Retirement, A. Spouse, B. Yourself. Includes a Total row.

(b) If date of retirement is after December 31, 1997, see the instructions.

Table with 6 columns: Names of Payers, Date of Retirement, Taxable Pension, Exempt Percentage, A. Spouse, B. Yourself. Includes a Total row.

(c) Add lines 1(a) and 1(b) (c) 00 00

PART II—OTHER RETIREMENT INCOME (Amounts Not Included in Line 1(c))

Table with 4 columns for line 2: Description, 2, 00, 00

PART III—TOTAL TO BE EXCLUDED THIS YEAR

Table with 4 columns for lines 3 and 4: Description, 3, 00, 00; Description, 4, 00, 00

Joint filers—Combine lines 4(a) and 4(b) and enter on appropriate form.

STOP Stop here unless you have a lump-sum distribution reported on Form 4972-K.

INSTRUCTIONS—SCHEDULE P

Types of Income Subject to Exclusion—All pension and retirement income paid under a written retirement plan is eligible for exclusion. This includes pensions, annuities, IRA accounts, 401(k) and similar deferred compensation plans, death benefits, and other similar accounts or plans. As a general rule, if the income is reported on the federal income tax return, Form 1040, line 15(b) or 16(b); Form 1040A, line 11(b) or 12(b); Form 4972; or is a disability retirement benefit or deferred compensation distribution reported on Form 1040, line 7 or 1040A, line 7, then it qualifies for the exclusion.

Form 740-NP filers report only pension income received while a resident of Kentucky.

LINE-BY-LINE INSTRUCTIONS

Column A, Column B—This exclusion is for each taxpayer. A taxpayer and spouse must compute and claim their own exclusion, regardless of filing status.

PART I—Exempt Retirement Income—Enter the federally taxable portion of pension income paid by the federal government, by the Commonwealth of Kentucky, or by any Kentucky local government. Also include supplemental (Tier 2) U.S. Railroad Retirement Board benefits reported on Form 1040, line 16(b) (Form 1040A, line 12(b)) and federal or Kentucky disability retirement income included on federal Form 1040, line 7 (Form 1040A, line 7). Do not include income from deferred compensation plans in Part I.

Use Line 1(a) if retired before January 1, 1998, to report fully exempt pension benefits.

Use Line 1(b) if retired after December 31, 1997, to compute the amount of pension income attributable to service credits earned before January 1, 1998. Multiply the taxable pension

by the exempt percentage, enter the result (exempt amount) in Column A or Column B. **Use the worksheet below to compute the exempt percentage in the year of retirement.**

Note: Subtract the exempt amount from the taxable pension amount and include the difference with other retirement income in Part II.

PART II—Other Retirement Income, Line 2—Enter the amount reported on federal Form 1040 or 1040A of non-lump-sum pension and retirement income not reported on line 1(c). Also include amounts from Schedule M, line 7 (Form 740-NP, page 4, line 16) that reflect pension and IRA bases differences.

PART III—Total to Be Excluded This Year, Line 3—Enter the lesser of the amount on line 2 or \$41,110.

Line 4—Enter the total of lines 1(c) and 3. This is your pension income exclusion. Enter on line 4 and as follows: Schedule M, line 11; Form 740-NP, page 4, line 10(b); or Form 741, page 1, line 11.

DEFINITIONS—For use with Schedule P and the worksheet below.

Service Credit—Number of months (years) used by your retirement system to determine retirement benefits.

Purchased Service Credit—Voluntary purchases of service credit as allowed by your retirement system (i.e., military service or prior service with the same or similar system). **Note:** Purchased time is credited based on the dates of service.

Purchased Service Credit (Air-time)—Certain retirement plans allow for the purchase of up to five years of service credit unrelated to prior work history. These purchases are commonly known as air-time. Air-time is not included in total service earned after December 31, 1997, regardless of when purchased.

Worksheet for Federal, Kentucky State and Kentucky Local Government Retirees Who Retired After 12/31/97



Complete this worksheet only if you retired in 2016 or have not computed your exempt percentage in prior years. Keep this worksheet in your records. The percentage will be used this year and in future years to determine the amount of exempt retirement income.

Complete this worksheet to determine what percentage of your pension income is exempt. This percentage must be calculated for each pension.

If your retirement system has computed the exempt amount (earned before January 1, 1998), enter the amount on page 1, line 1(b), column A or B. If your retirement system has computed the exempt percentage, **enter the exempt percentage on page 1, line 1(b) in the exempt percentage column.** Use a separate worksheet for each governmental pension. Retain this worksheet with your tax records. **Use the percentage on line 4 to compute the exempt portion of your pension in future years.**

1. Enter total months of service credit including purchased service.....
2. Enter months of service credit earned after 12/31/97. Include sick leave credited at date of retirement, and service credit from purchase of military and other service earned after 12/31/97. Do not include purchased credit unrelated to prior work history (air-time)
3. Subtract line 2 from line 1. Total months of service before January 1, 1998.....
4. Divide line 3 by line 1. Enter here and on page 1, line 1(b), in the exempt percentage column.....
Use this percentage to determine the amount of pension attributable to service earned before 1/1/98.



42A740-S1

Commonwealth of Kentucky
DEPARTMENT OF REVENUE

UNDERPAYMENT OF ESTIMATED TAX
BY INDIVIDUALS

Attach to Form 740 or 740-NP.

Enter name(s) as shown on page 1, Form 740 or 740-NP. Your Social Security Number

PART I—EXCEPTIONS AND EXCLUSIONS

The penalty shall not apply if one of the following exceptions is met. If one or more of the following applies to you, check the appropriate box(es), complete any necessary blank(s) and check the "Form 2210-K attached" box on Form 740, line 38a (Form 740-NP, line 38a). If none of the exceptions apply, go to Part II.

Check applicable box(es).

- 1. The taxpayer died during the taxable year.
2. The declaration was not required until after September 1, 2016, and the taxpayer files a return and pays the full amount of the tax computed on the return on or before February 1, 2017.
3. Two-thirds (2/3) or more of the gross income was from farming; this return is being filed on or before March 1, 2017; and the total tax due is being paid in full. Fiscal year taxpayers must file a return and pay the tax due on or before the first day of the third month following the close of the tax year.

Table with 2 columns: Description and Amount. Rows include: a. Enter total gross income, b. Multiply by 2/3 (.67), c. Enter gross income from farming.

- 4. Prepaid tax equals or exceeds last year's income tax liability.
a. Enter the liability from the 2015 return, Form 740 or Form 740-NP, page 1, line 26.
b. Enter amount from the 2016 Form 740, line 31 (Form 740-NP, page 2, line 31)*.

Table with 2 columns: Description and Amount. Rows include: a. Enter the liability from the 2015 return, b. Enter amount from the 2016 Form 740.

PART II—FIGURING THE UNDERPAYMENT AND PENALTY (Complete Part II only if the additional tax due exceeds \$500; otherwise, proceed to page 2, Part III.)

Table with 2 columns: Description and Amount. Rows include: 1. a. Enter 2016 income tax liability, b. Enter credit for taxes paid to another state, c. Total, 2. Percentage of liability required to be prepaid is 70%, 3. Multiply line 1c by line 2, 4. a. Enter the amount from Form 740, line 31, b. Enter credit for taxes paid to another state, c. Total, 5. Subtract line 4c from line 3, 6. Penalty percentage is 10%, 7. Multiply line 5 by line 6, 8. Enter interest amount due, 9. Add lines 7 and 8.

To Avoid Underpayment Penalty in the Future, Obtain and File Form 740-ES.

*Do not include amounts prepaid with extension after the due date of the fourth declaration installment.



NOTE: Use this page to calculate interest amount due on underpaid or untimely required estimated payments. See instructions for list of exclusions.

PART III—REQUIRED ANNUAL PAYMENT

1. Enter 2016 income tax liability: (Form 740 or Form 740-NP, page 1, line 26).....	1		00
2. Enter 2016 income tax withheld and refundable credits: (Form 740 or Form 740-NP, page 2, line 30a, 30c and 30d)	2		00
3. Enter 2016 nonresident withholding: (Form 740-NP, page 2, line 30e)	3		00
4. Add lines 2 and 3. Enter total here	4		00
5. Subtract line 4 from line 1. (If the result is \$500 or less, stop here. Do not compute this schedule.).....	5		00
6. Enter 2015 income tax liability: (2015 Form 740 or Form 740-NP, page 1, line 26).....	6		00
7. Required annual payment. Enter the smaller of line 1 or line 6.....	7		00

Note: If line 4 is equal to or greater than line 7, stop here. You do not owe interest.

PAYMENT DUE DATES

	A 4-15-16	B 6-15-16	C 9-15-16	D 1-15-17
8. Required Installments. Enter 1/4 (.25) of line 7 in each column..... 8	00	00	00	00
9. Estimated tax paid and tax withheld. For column A only, enter the amount from line 9 on line 13. If line 9 is equal to or greater than line 8 for all payment periods (columns A through D), stop here. You do not owe interest. Complete lines 10 through 17 of each column before going to the next column 9	00	00	00	00
10. Enter amount, if any, from line 17 of previous column 10		00	00	00
11. Add lines 9 and 10. Enter here 11		00	00	00
12. Enter the amount from line 16 of previous column. 12		00	00	00
13. Subtract line 12 from line 11. If zero or less, enter -0-. For column A only, enter the amount from line 9..... 13	00	00	00	00
14. If the amount on line 13 is zero, subtract line 11 from line 12. Otherwise, enter zero..... 14		00	00	00
15. Underpayment. If line 8 is equal to or greater than line 13, subtract line 13 from line 8. Otherwise, go to line 17 15	00	00	00	00
16. Add lines 14 and 15. Enter here. If line 8 is equal to or greater than line 13, then go to line 10 of the next column 16	00	00	00	00
17. Overpayment. If line 13 is more than line 8, subtract line 8 from line 13, then go to line 10 of the next column 17	00	00	00	00

FIGURING THE INTEREST

	A 6-15-16	B 9-15-16	C 1-15-17	D 4-15-17
18. Interest calculation payment date 18				
19. Number of days from the payment due date shown at the top of the column above line 8 to the date the amount on line 16 was paid, or the date shown for that column on line 18, whichever is earlier 19				
20. Annual Percentage Rate (APR)..... 20	.06	.06	.06	.05
21. Underpayment Number of from line 16 X <u>days from line 19</u> X APR on line 20 365 21	00	00	00	00
22. INTEREST DUE: Add amounts on line 21 columns A through D. Enter the total here and on Form 2210-K, page 1, line 8 22				00



42A740-S1

Commonwealth of Kentucky
DEPARTMENT OF REVENUE

**UNDERPAYMENT OF ESTIMATED TAX
BY INDIVIDUALS**

► Attach to Form 740 or 740-NP.

Enter name(s) as shown on page 1, Form 740 or 740-NP.	Your Social Security Number

PART I—EXCEPTIONS AND EXCLUSIONS

The penalty shall not apply if one of the following exceptions is met. If one or more of the following applies to you, check the appropriate box(es), complete any necessary blank(s) and check the "Form 2210-K attached" box on Form 740, line 38a (Form 740-NP, line 38a). **If none of the exceptions apply, go to Part II.**

Check applicable box(es).

1. The taxpayer died during the taxable year.
2. The declaration was not required until after September 1, 2016, and the taxpayer files a return and pays the full amount of the tax computed on the return on or before February 1, 2017.
3. Two-thirds ($\frac{2}{3}$) or more of the gross income was from farming; this return is being filed on or before March 1, 2017; **and** the total tax due is being paid in full. Fiscal year taxpayers must file a return and pay the tax due on or before the first day of the third month following the close of the tax year.

a. Enter total gross income.....	00
b. Multiply by $\frac{2}{3}$ (.67)	00
c. Enter gross income from farming.....	00

Line (c) must **equal or exceed** line (b) to qualify for the exception.

4. Prepaid tax **equals or exceeds** last year's income tax liability.
 - a. Enter the liability from the 2015 return, Form 740 or Form 740-NP, page 1, line 26.....
 - b. Enter amount from the 2016 Form 740, line 31 (Form 740-NP, page 2, line 31)*.....

	00
	00

Line (b) must **equal or exceed** line (a) to claim the exception.

PART II—FIGURING THE UNDERPAYMENT AND PENALTY (Complete Part II only if the **additional** tax due exceeds \$500; otherwise, proceed to page 2, Part III.)

1. a. Enter 2016 income tax liability from Form 740, line 26 (Form 740-NP, page 1, line 26) ... 1a		00
b. Enter credit for taxes paid to another state from Form 740, Section A, line 5 (Form 740-NP, Section A, line 5)..... 1b		00
c. Total (add lines 1a and 1b) 1c		00
2. Percentage of liability required to be prepaid is 70% 2	x .7	
3. Multiply line 1c by line 2..... 3		00
4. a. Enter the amount from Form 740, line 31 (Form 740-NP, page 2, line 31)* 4a		00
b. Enter credit for taxes paid to another state from Form 740, Section A, line 5 (Form 740-NP, Section A, line 5)..... 4b		00
c. Total (add lines 4a and 4b) 4c		00
5. Subtract line 4c from line 3 (If line 4c exceeds line 3, no penalty applies.)..... 5		00
6. Penalty percentage is 10%..... 6	x .1	
7. Multiply line 5 by line 6. This is the amount of the penalty for underpayment of estimated tax (minimum penalty \$25) 7		00
8. Enter interest amount due from Form 2210-K, page 2, line 22..... 8		00
9. Add lines 7 and 8. Enter here and on Form 740 or Form 740-NP, line 38(a). Also check the "Form 2210-K attached" box 9		00

➡ To Avoid Underpayment Penalty in the Future, Obtain and File Form 740-ES.

*Do not include amounts prepaid with extension after the due date of the fourth declaration installment.



NOTE: Use this page to calculate interest amount due on underpaid or untimely required estimated payments. See instructions for list of exclusions.

PART III—REQUIRED ANNUAL PAYMENT

1. Enter 2016 income tax liability: (Form 740 or Form 740-NP, page 1, line 26).....	1		00
2. Enter 2016 income tax withheld and refundable credits: (Form 740 or Form 740-NP, page 2, line 30a, 30c and 30d)	2		00
3. Enter 2016 nonresident withholding: (Form 740-NP, page 2, line 30e)	3		00
4. Add lines 2 and 3. Enter total here	4		00
5. Subtract line 4 from line 1. (If the result is \$500 or less, stop here. Do not compute this schedule.).....	5		00
6. Enter 2015 income tax liability: (2015 Form 740 or Form 740-NP, page 1, line 26).....	6		00
7. Required annual payment. Enter the smaller of line 1 or line 6.....	7		00

Note: If line 4 is equal to or greater than line 7, stop here. You do not owe interest.

PAYMENT DUE DATES

	A 4-15-16	B 6-15-16	C 9-15-16	D 1-15-17
8. Required Installments. Enter 1/4 (.25) of line 7 in each column..... 8	00	00	00	00
9. Estimated tax paid and tax withheld. For column A only, enter the amount from line 9 on line 13. If line 9 is equal to or greater than line 8 for all payment periods (columns A through D), stop here. You do not owe interest. Complete lines 10 through 17 of each column before going to the next column 9	00	00	00	00
10. Enter amount, if any, from line 17 of previous column 10		00	00	00
11. Add lines 9 and 10. Enter here 11		00	00	00
12. Enter the amount from line 16 of previous column. 12		00	00	00
13. Subtract line 12 from line 11. If zero or less, enter -0-. For column A only, enter the amount from line 9..... 13	00	00	00	00
14. If the amount on line 13 is zero, subtract line 11 from line 12. Otherwise, enter zero..... 14		00	00	00
15. Underpayment. If line 8 is equal to or greater than line 13, subtract line 13 from line 8. Otherwise, go to line 17 15	00	00	00	00
16. Add lines 14 and 15. Enter here. If line 8 is equal to or greater than line 13, then go to line 10 of the next column 16	00	00	00	00
17. Overpayment. If line 13 is more than line 8, subtract line 8 from line 13, then go to line 10 of the next column 17	00	00	00	00

FIGURING THE INTEREST

	A 6-15-16	B 9-15-16	C 1-15-17	D 4-15-17
18. Interest calculation payment date 18				
19. Number of days from the payment due date shown at the top of the column above line 8 to the date the amount on line 16 was paid, or the date shown for that column on line 18, whichever is earlier 19				
20. Annual Percentage Rate (APR)..... 20	.06	.06	.06	.05
21. Underpayment Number of from line 16 X $\frac{\text{days from line 19}}{365}$ X APR on line 20 21	00	00	00	00
22. INTEREST DUE: Add amounts on line 21 columns A through D. Enter the total here and on Form 2210-K, page 1, line 8 22				00

8863-K

42A740-S24

Department of Revenue



2016

Attach to Form 740 or Form 740-NP.

KENTUCKY EDUCATION TUITION TAX CREDIT

Enter name(s) as shown on Form 740 or Form 740-NP, page 1.

Your Social Security Number

Caution: You cannot take the 2016 Kentucky Education Tuition Tax Credit if you are not eligible for the Federal Education Credits. You must attach the federal Form 8863.

Carryforward Information: If you have an unused credit from prior year(s), complete Page 2, Part V to determine your carryforward amount. You must have completed Form 8863-K in prior years to claim any allowable unused credit carryforward.

PART I - Qualifications

Table with 2 columns: Question, Yes, No. Contains 3 qualification questions regarding expenses and filing status.

If you answered "No" to any of these questions above, STOP, you do not qualify for this credit. If you answered "Yes" to all questions above, go to Part II.

PART II - American Opportunity Credit (List only expenses for undergraduate studies from Kentucky institutions)

Table with 5 columns: (a) Student Name SSN, (b) Institution Name and Address, (c) Qualified Expenses, (d) Subtract \$2,000, (e) Multiply column (d) by 25%, (f) If column (d) is zero. Includes two rows for student data.

Summary table with 2 columns: Description, Amount. Includes lines 2, 3, and 4 for calculating the tentative American opportunity credit.



PART III—Lifetime Learning Credit (List only expenses for undergraduate studies from Kentucky institutions)

5.	(a) Student Name	(b) Student SSN	(c) Name and Address of Kentucky Institution	(d) Qualified Expenses (See instructions)
			-----	.00
			-----	.00
6.	Add the amounts on line 5, column (d) and enter total here.....			6 .00
7.	Enter the smaller of line 6 or \$10,000			7 .00
8.	Multiply line 7 by 20% (.20) and enter here.....			8 .00
9.	Enter the decimal amount from line 17 of the federal Form 8863. If this line is blank, enter -0- and go to line 10; you cannot take any Lifetime Learning Credit.....			9 .00
10.	Tentative Lifetime Learning Credit. Multiply line 8 by line 9 and enter here (Note: The result on line 10 cannot exceed the amount of the federal Form 8863, line 18)			10 .00
11.	Total Tentative Kentucky Education Tuition Tax Credits. Add lines 4 and 10.			11 .00

PART IV—Allowable Education Credits

12.	Multiply the amount on line 11 by 25% (.25) and enter total here	12	.00
13.	Enter tentative tax from Form 740 or Form 740-NP, page 1, line 22	13	.00
14.	Enter amount from Part V, line 34. If Part V, line 34 is blank, enter -0-.....	14	.00
15.	Subtract line 14 from line 13.....	15	.00
16.	Enter the smaller of line 15 or line 12	16	.00
17.	Add lines 14 and 16. Enter here and on Form 740 or Form 740-NP, line 23. This is your allowable 2016 Kentucky Education Tuition Tax Credit	17	.00
18.	If line 15 is smaller than line 12, subtract line 15 from line 12. This is the amount of unused credit carryforward from 2016 to 2017 . Enter here and on the 2016 Carryforward Worksheet, Line E, provided below	18	.00

PART V—Credit Carryforward from Prior Years

19.	Enter tentative tax from Form 740 or Form 740-NP, page 1, line 22	19	.00
20.	Enter your credit carryforward from 2011.....	20	.00
21.	Enter your credit carryforward from 2012	21	.00
22.	Enter your credit carryforward from 2013	22	.00
23.	Enter your credit carryforward from 2014	23	.00
24.	Enter your credit carryforward from 2015	24	.00
25.	Add lines 20 through 24 and enter total here	25	.00
26.	Subtract line 20 from line 19. If zero or less, enter -0-.....	26	.00
27.	Enter 2012 credit carryforward to 2017. Subtract line 26 from line 21. If zero or less, enter -0-.....	27	.00
28.	Subtract line 21 from line 26. If zero or less, enter -0-.....	28	.00
29.	Enter 2013 credit carryforward to 2017. Subtract line 28 from line 22. If zero or less, enter -0-.....	29	.00
30.	Subtract line 22 from line 28. If zero or less, enter -0-.....	30	.00
31.	Enter 2014 credit carryforward to 2017. Subtract line 30 from line 23. If zero or less, enter -0-.....	31	.00
32.	Subtract line 23 from line 30. If zero or less, enter -0-.....	32	.00
33.	Enter 2015 credit carryforward to 2017. Subtract line 32 from line 24. If zero or less, enter -0-.....	33	.00
34.	Enter the smaller of line 19 or line 25	34	.00

2016 Carryforward Worksheet

A.	From Part V, Line 27, 2012 to 2017	.00
B.	From Part V, Line 29, 2013 to 2017	.00
C.	From Part V, Line 31, 2014 to 2017	.00
D.	From Part V, Line 33, 2015 to 2017	.00
E.	From Part IV, Line 18, 2016 to 2017	.00

If you have a carryforward of credit, maintain a copy of this worksheet or Form 8863-K for your records. This information will be needed to prepare future returns.



➤ Attach to Form 740 or Form 740-NP.

KENTUCKY
EDUCATION TUITION TAX CREDIT

Enter name(s) as shown on Form 740 or Form 740-NP, page 1.

Your Social Security Number

Caution: You **cannot** take the 2016 Kentucky Education Tuition Tax Credit if you are not eligible for the Federal Education Credits. You must attach the federal Form 8863.

Carryforward Information: If you have an unused credit from prior year(s), complete Page 2, Part V to determine your carryforward amount. You must have completed Form 8863-K in prior years to claim any allowable unused credit carryforward.

PART I—Qualifications

	Yes	No
• Are all expenses claimed on this form for an eligible educational institution located within the Commonwealth of Kentucky (Kentucky institution)?.....		
• Are all of the expenses claimed on this form for undergraduate studies?.....		
• Is your Kentucky filing status single; married filing separately on a combined return; or married filing a joint return?		

If you answered "No" to any of these questions above, **STOP**, you do not qualify for this credit.
If you answered "Yes" to all questions above, go to Part II.

PART II—American Opportunity Credit (List only expenses for undergraduate studies from Kentucky institutions)

1.	(a) Student Name SSN	(c) Qualified Expenses (see instructions). Do not enter more than \$4,000 for each student.	(d) Subtract \$2,000 from column (c); if zero or less enter -0-	(e) Multiply column (d) by 25% (.25)	(f) If column (d) is zero enter the amount from column (c); otherwise, add \$2,000 to column (e) and enter result
		.00	.00	.00	.00
	(b) Institution Name and Address				
		.00	.00	.00	.00
	(b) Institution Name and Address				
		.00	.00	.00	.00

2. Add the amounts on line 1, column (f)	2	.00
3. Enter the decimal amount from line 6 of the federal Form 8863. If this line is blank, enter -0- and go to line 4; you cannot take any American Opportunity Credit	3	— • — — —
4. Tentative American Opportunity Credit. Multiply line 2 by line 3 and enter here (Note: The result on line 4 cannot exceed the amount of the federal Form 8863, line 7). If you are taking the Lifetime Learning Credit for another student, complete Part III; otherwise, enter amount from line 4 on line 11	4	.00



PART III—Lifetime Learning Credit (List only expenses for undergraduate studies from Kentucky institutions)

5.	(a) Student Name	(b) Student SSN	(c) Name and Address of Kentucky Institution	(d) Qualified Expenses (See instructions)
			-----	.00
			-----	.00
6.	Add the amounts on line 5, column (d) and enter total here.....			6 .00
7.	Enter the smaller of line 6 or \$10,000			7 .00
8.	Multiply line 7 by 20% (.20) and enter here.....			8 .00
9.	Enter the decimal amount from line 17 of the federal Form 8863. If this line is blank, enter -0- and go to line 10; you cannot take any Lifetime Learning Credit.....			9 .00
10.	Tentative Lifetime Learning Credit. Multiply line 8 by line 9 and enter here (Note: The result on line 10 cannot exceed the amount of the federal Form 8863, line 18)			10 .00
11.	Total Tentative Kentucky Education Tuition Tax Credits. Add lines 4 and 10.			11 .00

PART IV—Allowable Education Credits

12.	Multiply the amount on line 11 by 25% (.25) and enter total here	12	.00
13.	Enter tentative tax from Form 740 or Form 740-NP, page 1, line 22	13	.00
14.	Enter amount from Part V, line 34. If Part V, line 34 is blank, enter -0-.....	14	.00
15.	Subtract line 14 from line 13.....	15	.00
16.	Enter the smaller of line 15 or line 12	16	.00
17.	Add lines 14 and 16. Enter here and on Form 740 or Form 740-NP, line 23. This is your allowable 2016 Kentucky Education Tuition Tax Credit	17	.00
18.	If line 15 is smaller than line 12, subtract line 15 from line 12. This is the amount of unused credit carryforward from 2016 to 2017. Enter here and on the 2016 Carryforward Worksheet, Line E, provided below	18	.00

PART V—Credit Carryforward from Prior Years

19.	Enter tentative tax from Form 740 or Form 740-NP, page 1, line 22	19	.00
20.	Enter your credit carryforward from 2011.....	20	.00
21.	Enter your credit carryforward from 2012	21	.00
22.	Enter your credit carryforward from 2013	22	.00
23.	Enter your credit carryforward from 2014	23	.00
24.	Enter your credit carryforward from 2015	24	.00
25.	Add lines 20 through 24 and enter total here	25	.00
26.	Subtract line 20 from line 19. If zero or less, enter -0-.....	26	.00
27.	Enter 2012 credit carryforward to 2017. Subtract line 26 from line 21. If zero or less, enter -0-.....	27	.00
28.	Subtract line 21 from line 26. If zero or less, enter -0-.....	28	.00
29.	Enter 2013 credit carryforward to 2017. Subtract line 28 from line 22. If zero or less, enter -0-.....	29	.00
30.	Subtract line 22 from line 28. If zero or less, enter -0-.....	30	.00
31.	Enter 2014 credit carryforward to 2017. Subtract line 30 from line 23. If zero or less, enter -0-.....	31	.00
32.	Subtract line 23 from line 30. If zero or less, enter -0-.....	32	.00
33.	Enter 2015 credit carryforward to 2017. Subtract line 32 from line 24. If zero or less, enter -0-.....	33	.00
34.	Enter the smaller of line 19 or line 25	34	.00

2016 Carryforward Worksheet

A.	From Part V, Line 27, 2012 to 2017	.00
B.	From Part V, Line 29, 2013 to 2017	.00
C.	From Part V, Line 31, 2014 to 2017	.00
D.	From Part V, Line 33, 2015 to 2017	.00
E.	From Part IV, Line 18, 2016 to 2017	.00

If you have a carryforward of credit, maintain a copy of this worksheet or Form 8863-K for your records. This information will be needed to prepare future returns.

SECTION B—PERSONAL TAX CREDITS

Line 1(a), Yourself—You are always allowed to claim a tax credit for yourself (even if your parent(s) can claim a credit for you on their return). On Line 1(a), there are eleven boxes under four separate headings. Always check the box under “Check Regular” to claim a tax credit for yourself. *If 65 or older*, also check the next four boxes on the line. *If legally blind*, also check the next four boxes on the line.

If you’re a member of the Kentucky National Guard on December 31, 2016, also check the last two boxes on Line 1(a). Kentucky law specifically restricts this credit to Kentucky National Guard members; military reserve members are not eligible.

Line 1(b), Your Spouse—Do not fill in Line 1(b) if (1) you are single; (2) you are married and you and your spouse are filing two separate returns; or (3) your spouse received more than half of his or her support from another taxpayer.

Fill in Line 1(b) if you are married and (1) you and your spouse are filing a joint or combined return, or (2) if your spouse had no income or is not required to file a return. If you meet these criteria, check the first box on Line 1(b) for your spouse. *If your spouse is 65 or older*, also check the next four boxes. *If your spouse was legally blind at the end of the taxable year*, also check the next four boxes on Line 1(b). If your spouse was a member of the Kentucky National Guard on December 31, 2016, also check the last two boxes on Line 1(b).

Dependents—You are allowed to claim a tax credit for each person defined as a dependent in the Internal Revenue Code. Generally, dependents who qualify for federal purposes also qualify for Kentucky.

Line 2, Dependents Who Live With You

Use to claim tax credits for your dependent children, including stepchildren and legally adopted children, who lived with you during the taxable year. **If the dependent meets the requirements for a qualifying child under the provisions of IRC 152(c), check the box; this child qualifies to be counted to determine the family size.**

Dependents Who Did Not Live With You

Also use Line 2 to claim tax credits for your dependent children who did not live with you and to claim tax credits for other persons who qualify as dependents. **These dependents do not qualify to be counted to determine the family size.**

Children of Divorced or Separated Parents—Attach a copy of federal Form 8332 filed with your federal return. Children may only be counted for family size by the custodial parent.

Tax Credits for Individuals Supported by More Than One Taxpayer—Attach a copy of federal Form 2120 filed with your federal return.

Lines 3A and 3B, Dividing the Credits—Each taxpayer must claim all of his or her own tax credits including the credits for age and blindness. *Therefore, if married, each spouse must claim at least one credit. However, spouses may divide tax*

credits for dependents, or one spouse may claim all dependent credits and the other none.

Example I—A taxpayer who is 65 and a spouse who is 60 are filing separately on a combined return. The taxpayer must claim five credits (one regular and four for being 65 or older), and the spouse must claim one.

Example II—A taxpayer and spouse have two dependents. The taxpayer must claim his/her regular credit, and the spouse must claim his/hers. However, the two dependent credits may be claimed by either spouse, or each spouse may claim one.

For married taxpayers, each spouse must claim all of his or her own credits. Therefore, each spouse must claim at least one credit. Credits for dependents may be divided between the spouses, or one spouse may claim all the credits for dependents and the other none.



TIP—Multiply credits by \$10 and subtract from tax on page 1. The tax table and the tax rate schedule do not deduct for tax credits.

Remember to carry amounts from page 3, Line 4A and/or 4B, to page 1, Line 17.

SECTION C—FAMILY SIZE TAX CREDIT

Children may only be counted for family size by the custodial parent. Even if you have signed federal Form 8332 and may not claim the child as a dependent, you may count children who otherwise meet the requirements for the Family Size Tax Credit.

You must include in Section C the names and Social Security numbers of the qualifying children that are not claimed as dependents in Section B in order to count them in your total family size.

COPY OF FEDERAL RETURN

You must attach a complete copy of your federal return if you received farm, business, or rental income or loss.

The Kentucky Department of Revenue does not require copies if you filed Form 1040EZ or 1040A. Check the box on Form 740, page 3 if you are not required to attach a copy of your federal return.

SIGN RETURN

Be sure to sign on page 3 after completion of pages 1, 2 and 3 of your return. Each return must be signed by the taxpayer. Joint and combined returns must be signed by both taxpayer and spouse. Returns that are not signed may be returned to you for signature.

Enter Driver’s License/State issued ID number.

Enter a daytime telephone number where you can be reached. You may be contacted for additional information needed to complete processing your tax return.

Instructions for Schedule M—Modifications to Federal Adjusted Gross Income

Additions to Federal Adjusted Gross Income

Line 1—Interest on securities issued by other states and their political subdivisions is taxed by Kentucky and must be reported. Also report dividends received from regulated investment companies (mutual funds) that are taxable for Kentucky income tax purposes. **Note:** *Interest from securities of Kentucky and its political subdivisions is exempt.*

Line 2—Enter the self-employed health insurance deduction from federal Form 1040, Line 29.

Line 3—Enter resident adjustment from Kentucky Schedule K-1. Partners, beneficiaries of estates and trusts and S corporation shareholders, see Kentucky Schedule K-1 instructions.

Line 4—Enter total depreciation from federal Form 4562 if you have elected to take the 30 percent or 50 percent special depreciation allowance or the increased Section 179 deduction for property placed in service after September 10, 2001. See Line 16 for additional instructions.

Line 5—Enter federal net operating loss reported on Line 21 of 2016 federal Form 1040.

Line 6—Enter federal domestic production activities deduction from federal Form 8903, line 25.

Line 7—Enter other additions to federal adjusted gross income not listed above (attach detailed schedule).

Include:

- Reservists and National Guard expenses reported on federal Form 1040, line 24;
- the portion of a lump-sum distribution on which you have

elected the 20 percent capital gains rate for federal income tax purposes (Schedule P and Form 4972-K required);

- the passive activity loss adjustment (see Form 8582-K and instructions);
- differences in pension (3-year recovery rule) and IRA bases;
- differences in gains (losses) from the sale of intangible assets amortized under the provisions of the Revenue Reconciliation Act of 1993; and
- differences in gains (losses) from the sale of depreciable property placed in service after September 10, 2001.

Note: Before entering the difference on Line 7 you must take into account any addition or subtraction affecting the at-risk limitations. See instructions for Line 19.

Line 8, Total Additions—Add Lines 1 through 7. Enter on Line 8 and on Form 740, page 1, Line 6.

Subtractions from Federal Adjusted Gross Income

Line 9—Enter the amount of taxable state income tax refund or credit **reported on your federal return** and included as income on Form 740, page 1, Line 5.

Line 10—Enter interest income from U.S. government bonds and securities. Do not include taxable interest from securities, such as FNMA (Fannie Mae), GNMA (Ginnie Mae) and FHLMC (Freddie Mac), which are merely guaranteed by the U.S. government.

Line 11, Pension Income Exclusion—The 2016 exclusion amount is 100 percent of taxable retirement benefits or \$41,110, whichever is less. All pension and retirement income paid under a written retirement plan (qualified or unqualified) is eligible for exclusion. This includes pensions, annuities, IRA accounts, 401(k) and similar deferred compensation plans, income received from converting a regular IRA to a Roth IRA, death benefits, disability retirement benefits and other similar accounts or plans.

This exclusion is for each taxpayer and must be computed independently of your spouse who may be filing on the same return. A taxpayer and spouse must complete and claim their own exclusion, regardless of filing status. *Joint filers—Combine the separately computed pension exclusion amounts and enter on Schedule M, Line 11, Column B.*

Pension Income Exclusion Worksheet

	Column A Spouse	Column B Yourself
Step 1.		
a. Enter taxable pension income reported on your federal Form 1040, Line 15(b) or 16(b); Form 1040A, Line 11(b) or 12(b)..... a		
b. Enter disability retirement benefits on Form 1040, Line 7 or Form 1040A, Line 7 b		
c. Enter deferred compensation reported on Form 1040, Line 7 or Form 1040A, Line 7 c		
d. Add Lines a, b and c d		
Step 2. Line d is \$41,110 or less. Enter the amount from Line d on Schedule M, Line 11.		
Step 3. Line d is more than \$41,110. Do you have retirement income from the federal government, the Commonwealth of Kentucky or a Kentucky local government; or supplemental U.S. Railroad Retirement Board benefits?.....	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered no, enter \$41,110 on Schedule M, Line 11.		
If you answered yes, you must complete Schedule P to determine your pension exclusion.		

Line 12—Enter Social Security and Social Security equivalent U.S. Railroad Retirement Board benefits included on Form 740, page 1, Line 5. These amounts are reported on federal Form 1040, Line 20(b) (Form 1040A, Line 14(b)).

Line 13, Long-term Care Insurance Premiums—Enter long-term care insurance premiums paid in 2016. Do not claim as an itemized deduction.

Line 14, Health Insurance Premiums—Enter medical and dental insurance premiums paid for yourself, your spouse and your dependents. This deduction applies to premiums paid with after-tax dollars. **Note:** You **cannot** deduct on Line 14 insurance premiums paid with pretax dollars (cafeteria plans and vouchers already excluded from wage income) because the premiums are not included in box 1 of your W-2 form(s). Do not include long-term care insurance premiums included on Schedule M, Line 13. You may not deduct premiums paid on your behalf (advance payments) and you must reduce the amount you paid by the amount of health coverage tax credit. (See federal Form 8885.)

Line 15—Enter resident adjustment from Kentucky Schedule K-1. Partners, beneficiaries of estates and trusts and S corporation shareholders, see Kentucky Schedule K-1 instructions. Subtract the distributive share of net income from an S corporation subject to the franchise tax imposed under KRS 136.505 or the capital stock tax imposed under KRS 136.300.

Line 16—Depreciation, Section 179 Deduction and Gains/Losses From Disposition of Assets—*Important: Use Schedule M, Lines 4 and 16 only if you have elected for federal income tax purposes to take the 30 percent or the 50 percent special depreciation allowance or the increased Section 179 deduction for property placed in service after September 10, 2001. A copy of the federal Form 4562 if filed for federal income tax purposes must be submitted with Form 740 to verify that no adjustments are required.*

Reporting Depreciation and Section 179 Deduction Differences for Property Placed in Service After September 10, 2001

Create a Kentucky Form 4562 by entering **Kentucky** at the top center of a federal Form 4562 above Depreciation and Amortization. In Part I, Line 1 enter the Kentucky limit of \$25,000 and in Part I, Line 3 enter the Kentucky phase-out amount of \$200,000. In Part II, strike through and ignore Line 14, Special depreciation allowance for qualified property placed in service during the tax year.

Use the created Kentucky Form 4562 to compute Kentucky depreciation and Section 179 deduction in accordance with the IRC in effect on December 31, 2001. **Note:** In determining the Section 179 deduction for Kentucky the income limitation on Line 11 is Kentucky net income before the Section 179 deduction instead of federal taxable income. **Attach the created Kentucky Form 4562** to Form 740 and enter the amount of Kentucky depreciation from Line 22 on Line 16.

Line 17—Enter Kentucky net operating loss calculated from prior years. Keep worksheet detailing the net operating loss claimed with your records.

Note: If your net operating loss occurred in 2016, complete Kentucky Schedule KNOL to determine the amount of your loss to be carried forward in future years. Any carry forward of a prior year loss claimed on Line 17 of Schedule M should be calculated using a worksheet. Keep a copy for your records and attach a copy to your return.

Line 18—Enter Kentucky domestic productions activities

deduction. Beginning on or after January 1, 2010 limit the federal domestic productions activity by the six percent in lieu of the rate provided by IRC§ 199(a).

Line 19—Enter other subtractions from federal adjusted gross income not listed above (attach detailed schedule). Include:

- income of active duty military pay;
- income received from tobacco quota buyout;
- income received as a result of the MasterTobacco Settlement Agreement, the secondary settlement fund referred to as “Phase II”;
- income received from the Tobacco Loss Assistance Program (TLAP);
- income of precinct workers for election training or working at election booths;
- capital gains on property taken by eminent domain;
- passive activity loss adjustment (see Form 8582-K and instructions);
- income of a child reported on the parent’s return;
- artistic charitable contributions (if you do not itemize deductions);
- the federal work opportunity credit used to reduce wages;
- at-risk limitations (see instructions below);
- qualified farm networking project differences per KRS 141.0101(15);
- differences in the gains (losses) from the sale of intangible assets amortized under the provisions of the Revenue Reconciliation Act of 1993;
- differences in gains (losses) from assets purchased after September 10, 2001; and
- income of military personnel killed in the line of duty.

Note: All income earned by soldiers killed in the line of duty is exempt from Kentucky tax for the year during which the death occurred and the year preceding the death. Federal and state death benefits payable to the estate or any beneficiaries may also be excluded. Additional information may be found in the General Information section of the instructions for Form 740.

Determining and Reporting Differences in Gain or Loss From Disposition of Assets

—If during the year you dispose of assets placed in service after September 10, 2001, on which the 30 percent or the 50 percent special depreciation allowance or the increased Section 179 deduction was taken for federal income tax purposes, you will need to determine and report the difference in the amount of gain or loss on the assets as follows:

Create a Kentucky form by entering **Kentucky** at the top center of a federal Schedule D, federal Form 4797 and other applicable federal forms. Compute Kentucky gain or loss from the disposed assets using the Kentucky basis. Enter the difference in federal gain or loss and the Kentucky gain or loss on the appropriate line. **Attach the created Kentucky Schedule D, Kentucky Form 4797 and other forms or schedules to support the deduction.**

At-Risk Limitations—Federal/Kentucky income (loss) differences may create different allowable losses due to at-risk limitations. If you have amounts invested in an activity for which you are not at risk and used federal Form 6198, At-Risk Limitations, complete federal Form 6198 using Kentucky amounts to determine if the Kentucky allowable loss differs from the federal allowable loss. For a passive activity, use the Kentucky allowable loss to complete Form 8582-K. For all other activities (nonpassive), enter the difference as an “other addition” or “other subtraction” on Line 7 or Line 19.

Line 20, Total Subtractions—Add Lines 9 through 19. Enter on Line 20 and on Form 740, page 1, Line 8.

Instructions for Schedule A

Do not include on Schedule A items deducted elsewhere, such as on Schedule C, C-EZ, E, F or Kentucky Schedule M.

You may itemize your deductions for Kentucky even if you do not itemize for federal purposes. Generally, if your deductions exceed \$2,460, it will benefit you to itemize. If you do not itemize, you may elect to take the standard deduction of \$2,460.

Special Rules for Married Couples—If one spouse itemizes deductions, the other must also itemize. Married couples filing a joint federal return and who wish to file separate returns or a combined return for Kentucky may: (a) file separate Schedules A showing the specific deductions claimed by each, or (b) file one Schedule A and divide the total deductions between them based on the percentage of each spouse's income to total income.

Limitations on Itemized Deductions for High-Income Taxpayers—If your adjusted gross income on Form 740, Line 9, exceeds \$184,850 (\$92,425 if married filing separately on a combined return or separate returns), your itemized deductions are reduced by the lesser of:

- (a) 3 percent of the amount by which your adjusted gross income exceeds \$184,850 (\$92,425 if married filing separately on a combined return or separate returns), or
- (b) 80 percent of your total itemized deductions except medical and dental expenses, casualty and theft losses, gambling losses and investment interest.

The limitations are computed on page 2, Part II, Schedule A (Form 740).

Lines 1 through 4—Medical and Dental Expenses

You may deduct only your medical and dental expenses that exceed 10 percent of Line 9, Form 740, but if you or your spouse was born before January 2, 1952, then you may only deduct your medical and dental expenses that exceed 7.5 percent of Line 9, Form 740. Include all amounts you paid during 2016 but **do not** include amounts which have been previously deducted; paid by hospital, health or accident insurance; or paid by your employer. Federal rules apply for reimbursement.

When you compute your deduction, you may include medical and dental bills you paid for:

Yourself.

All dependents you claim on your return.

Your child whom you do not claim as a dependent because of the rules for Children of Divorced or Separated Parents.

Any person that you could have claimed as a dependent on your return if that person had not received \$4,050 or more of gross income or had not filed a joint return.

Examples of Medical and Dental Payments

You MAY Deduct

To the extent you were not reimbursed, you may deduct what you paid for:

Medicines and drugs that required a prescription, or insulin.

Medical doctors, dentists, eye doctors, chiropractors, osteopaths, podiatrists, psychiatrists, psychologists, physical therapists, acupuncturists and psychoanalysts (medical care only).

Medical examinations, X-ray and laboratory services, insulin treatment and whirlpool baths your doctor ordered.

Nursing help. If you paid someone to do both nursing and housework, you may deduct only the cost of the nursing help.

Hospital care (including meals and lodging), clinic costs and lab fees.

Medical treatment at a center for drug or alcohol addiction.

Medical aids such as hearing aids (and batteries), false teeth, eyeglasses, contact lenses, braces, crutches, wheelchairs, guide dogs and the cost of maintaining them.

Lodging expenses (but not meals) paid while away from home to receive medical care in a hospital or a medical care facility that is related to a hospital. Do not include more than \$50 a night for each eligible person.

Ambulance service and other travel costs to get medical care. If you used your own car, you may claim what you spent for gas and oil to go to and from the place you received the care; or you may claim mileage. The mileage rate is 19 cents per mile. Add parking and tolls to the amount you claim under either method.

The supplemental part of Medicare insurance (Medicare B). To claim these expenses, see instructions for Schedule M, Line 14.

Surgery to improve vision including radial keratotomy or other laser eye surgery.

Examples of Medical and Dental Payments

You MAY NOT Deduct

You may not deduct payments for the following:

Elective cosmetic surgery.

Hospital, medical and extra Medicare B insurance. To claim these expenses, see instructions for Schedule M, Line 14.

The basic cost of Medicare insurance (Medicare A). (**Note:** If you are 65 or over and not entitled to Social Security benefits, you may deduct premiums you voluntarily paid for Medicare A coverage.)

Life insurance or income protection policies.

Long-term care insurance premiums. To claim, see instructions for Schedule M, Line 13.

The hospital insurance benefits (Medicare) tax withheld from your pay as part of the Social Security tax or paid as part of Social Security self-employment tax.

Nursing care for a healthy baby.

Illegal operations or drugs.

Medicines or drugs you bought without a prescription.

Travel your doctor told you to take for rest or change.

Funeral, burial or cremation costs.

See federal Publication 502 for more information on allowable medical and dental expenses including deductions for capital expenditures and special care for persons with disabilities.

Lines 5 through 9—Taxes

Taxes You MAY Deduct

Line 5, Local Income Taxes—Enter the total amount of local occupational (payroll) tax paid. **Do not include state or federal income taxes paid or withheld; they are not deductible.**

Line 6, Real Estate Taxes—Enter the amount of local and state property taxes you paid on real estate owned by you. Do not report real estate taxes here that were paid in connection with a business or profession and have been deducted on Schedule C, E or F.

Line 7, Personal Property Taxes—Enter property taxes paid on automobiles, intangible property (accounts receivable, bonds, etc.) or other personal property.

Line 8, Other Taxes—Enter other taxes that are deductible. Do not deduct on Schedule A taxes paid in connection with a business or profession which are deductible on Schedule C, E or F.

Taxes You MAY NOT Deduct

Foreign income taxes paid.

Sales and use taxes.

New motor vehicle taxes.

Usage taxes on motor vehicles.

State or federal income taxes.

State or federal inheritance or estate taxes.

State gasoline taxes.

Federal excise taxes on your personal expenditures, such as taxes on theater admissions, furs, jewelry, cosmetics, tires, telephone service, airplane tickets, etc.

Federal Social Security taxes.

Hunting, fishing or dog licenses.

Auto inspection fees.

Auto license fees.

Cigarette or liquor taxes.

Taxes paid by you for another person.

Motorboat registration fees.

Drivers' license fees.

Sewer assessments.

School taxes based on electric, water, sewer, gas and telephone bills.

Local or state insurance premiums taxes or surcharges.

Lines 10 through 15—Interest Expense

You may deduct interest that you have paid during the taxable year on a home mortgage. You may not deduct interest paid on credit or charge card accounts, a life insurance loan, an automobile or other consumer loan, delinquent taxes or on a personal note held by a bank or individual.

Interest paid on business debts should be deducted as a business expense on the appropriate business income schedule.

You may not deduct interest on an indebtedness of another person when you are not legally liable for payment of the interest. Nor may you deduct interest paid on a gambling debt or any other nonenforceable obligation. Interest paid on money borrowed to buy tax-exempt securities or single premium life insurance is not deductible.

Line 10—List the interest and points (including "seller-paid points") paid on your home mortgage to financial institutions and reported to you on federal Form 1098.

Line 11—List other interest paid on your home mortgage and not reported to you on federal Form 1098. Show name and address of individual to whom interest was paid.

Line 12—List points (including "seller-paid points") not reported to you on federal Form 1098. Points (including loan origination fees) charged only for the use of money and paid with funds other than those obtained from the lender are deductible over the life of the mortgage. However, points may be deducted in the year paid if all three of the following apply: (1) the loan was used to **buy, build or improve your main home**, and was secured by that home, (2) the points did not exceed the points usually charged in the area where the loan was made, and were figured as a percentage of the loan amount, and (3) if the loan was used to **buy or build** the home, you must have provided funds (see below) at least equal to the points charged. If the loan was used to **improve** the home, you must have paid the points with funds other than those obtained from the lender.

Funds provided by you include down payments, escrow deposits, earnest money applied at closing, and other amounts actually paid at closing. They do not include amounts you borrowed as part of the overall transaction.

Seller-Paid Points—If you are the buyer, you may be able to deduct points the seller paid in 2016. You can do this if the loan was used to buy your main home and the points meet item 2 above. You must reduce your basis in the home by those points, even if you do not deduct them.

If you are the seller, you **cannot** deduct the points as interest. Instead, include them as an expense of the sale.

This generally does not apply to points paid to refinance your mortgage. Federal rules apply. See federal Publication 936 for more information.

Line 13, Qualified Mortgage Insurance Premiums— Premiums that you pay or accrue for “qualified mortgage insurance” during 2016 in connection with home acquisition debt on your qualified home are deductible as home mortgage insurance premiums. Qualified mortgage insurance is mortgage insurance provided by the Veterans Administration, the Federal Housing Administration, or the Rural Housing Administration, and private mortgage insurance. Mortgage insurance premiums you paid or accrued on any mortgage insurance contract issued before

January 1, 2007, are not deductible.

Limit on amount you can deduct. You cannot deduct your mortgage insurance premiums if the amount on Form 740, line 9, is more than \$109,000 (\$54,500 if married filing separately on a combined return or separate returns). If the amount on Form 740, line 9, is more than \$100,000 (\$50,000 if married filing separately on a combined return or separate returns), your deduction is limited and you must use the worksheet below to figure your deduction.

Qualified Mortgage Insurance Premiums Deduction Worksheet

See the instructions for Line 13 above to see if you must use this worksheet to figure your deduction.

	A. Spouse	B. Yourself (or Joint)
1. Enter the total premiums you paid in 2016 for qualified mortgage insurance for a contract entered into on or after January 1, 2007.....	1. _____	1. _____
2. Enter the amount from Form 740, Line 9	2. _____	2. _____
3. Enter \$100,000 (\$50,000 if married filing separately on a combined return or separate returns).....	3. _____	3. _____
4. Is the amount on Line 2 more than the amount on Line 3? <input type="checkbox"/> No. Your deduction is not limited. Enter the amount from Line 1 above on Schedule A, Line 13. <input type="checkbox"/> Yes. Subtract Line 3 from Line 2. If the result is not a multiple of \$1,000 (\$500 if married filing separately on a combined return or separate returns), increase it to the next multiple of \$1,000 (\$500 if married filing separately on a combined return or separate returns). For example, increase \$425 to \$1,000, increase \$2,025 to \$3,000; or if married filing separately on a combined return or separate returns, increase \$425 to \$500, increase \$2,025 to \$2,500, etc.....	4. _____	4. _____
5. Divide Line 4 by \$10,000 (\$5,000 if married filing separately on a combined return or separate returns). Enter the result as a decimal. If the result is 1.0 or more, enter 1.0	5. _____	5. _____
6. Multiply Line 1 by Line 5	6. _____	6. _____
7. Qualified mortgage insurance premiums deduction. Subtract Line 6 from Line 1.....	7. _____	7. _____
8. Add Line 7, Columns A and B. Enter here and on Schedule A, Line 13	8. _____	8. _____

Line 14, Interest on Investment Property— Investment interest is interest paid on money you borrowed that is allocable to property held for investment. It does not include any interest allocable to a passive activity or to securities that generate tax-exempt income.

(c) you have no disallowed investment interest expense from 2015.

Complete and attach federal Form 4952, Investment Interest Expense Deduction, to figure your deduction.

For more details, see federal Publication 550, Investment Income and Expenses.

Exception. You do not have to file federal Form 4952 if all three of the following apply:

Lines 16 through 20—Contributions

- (a) your investment interest is not more than your investment income from interest and ordinary dividends,
- (b) you have no other deductible investment expenses, and

You may deduct what you actually gave to organizations that are religious, charitable, educational, scientific or literary in purpose. You may also deduct what you gave to organizations that work to prevent cruelty to children or animals. In general, contributions deductible for federal income tax purposes are also deductible for Kentucky.

Examples of qualifying organizations are:

Churches, temples, synagogues, Salvation Army, Red Cross, CARE, Goodwill Industries, United Way, Boy Scouts, Girl Scouts, Boys and Girls Clubs of America, etc.

Fraternal orders if the gifts will be used for the purposes listed above.

Veterans' and certain cultural groups.

Nonprofit schools, hospitals and organizations whose purpose is to find a cure for, or help people who have arthritis, asthma, birth defects, cancer, cerebral palsy, cystic fibrosis, diabetes, heart disease, hemophilia, mental illness or retardation, multiple sclerosis, muscular dystrophy, tuberculosis, etc.

Federal, state and local governments if the gifts are solely for public purposes.

If you contributed to a qualifying charitable organization and also received a benefit from it, you may deduct only the amount that is more than the value of the benefit you received.

Contributions You MAY Deduct

Contributions may be in cash, property or out-of-pocket expenses you paid to do volunteer work for the kinds of organizations described above. If you drove to and from the volunteer work, you may take 14 cents a mile or the actual cost of gas and oil. Add parking and tolls to the amount you claim under either method. (Do not deduct any amounts that were repaid to you.)

Note: You are required to maintain receipts, cancelled checks or other reliable written documentation showing the name of the organization and the date and amount given to support claimed deductions for charitable contributions.

Separate contributions of \$250 or more require written substantiation from the donee organization in addition to your proof of payment. It is your responsibility to secure substantiation. A letter or other documentation from the qualifying charitable organization that acknowledges receipt of the contribution and shows the date and amount constitutes a receipt. **This substantiation should be kept in your files. Do not send it with your return.**

See federal Publication 526 for special rules that apply if:

your total contributions exceed 50 percent of Line 9, Form 740,

your total deduction for gifts of property is over \$500, you gave less than your entire interest in the property, your cash contributions or contributions of ordinary income property are more than 30 percent of Line 9, Form 740,

your gifts of capital gain property to certain organizations are more than 20 percent of Line 9, Form 740, or

you gave gifts of property that increased in value, made bargain sales to charity, or gave gifts of the use of property.

You MAY NOT Deduct as Contributions

Travel expenses (including meals and lodging) while away from home unless there was no significant element of personal pleasure, recreation or vacation in the travel.

Political contributions.

Dues, fees or bills paid to country clubs, lodges, fraternal orders or similar groups.

Value of any benefit, such as food, entertainment or merchandise that you received in connection with a contribution to a charitable organization.

Cost of raffle, bingo or lottery tickets.

Cost of tuition.

Value of your time or service.

Value of blood given to a blood bank.

The transfer of a future interest in tangible personal property (generally, until the entire interest has been transferred).

Gifts to:

Individuals.

Foreign organizations.

Groups that are run for personal profit.

Groups whose purpose is to lobby for changes in the laws.

Civic leagues, social and sports clubs, labor unions and chambers of commerce.

Line 16—Enter all of your contributions paid by cash or check (including out-of-pocket expenses).

Line 17—Enter your contributions of property. If you gave used items, such as clothing or furniture, deduct their fair market value at the time you gave them. Fair market value is what a willing buyer would pay a willing seller when neither has to buy or sell and both are aware of the conditions of the sale. If your total deduction for gifts of property is more than \$500, you must complete and attach federal Form 8283, Noncash Charitable Contributions. If your total deduction is over \$5,000, you may also have to obtain appraisals of the values of the donated property. See federal Form 8283 and its instructions for details.

Also include the value of a leasehold interest property contributed to a charitable organization to provide temporary housing for the homeless. Attach Schedule HH.

Recordkeeping—If you gave property, you should keep a receipt or written statement from the organization you gave the property to, or a reliable written record, that shows the organization's name and address, the date and location of the gift and a description of the property. You should also keep reliable written records for each gift of property that include the following information:

(a) How you figured the property's value at the time you gave it. (If the value was determined by an appraisal, you should also keep a signed copy of the appraisal.)

(b) The cost or other basis of the property if you must reduce it by any ordinary income or capital gain that would have resulted if the property had been sold at its fair market value.

(c) How you figured your deduction if you chose to reduce your deduction for gifts of capital gain property.

(d) Any conditions attached to the gift.

(e) If the gift was a "qualified conservation contribution" under IRC Section 170(h), the fair market value of the underlying property before and after the gift, the type of legal interest donated and the conservation purpose furthered by the gift.

Line 18—Enter artistic charitable contributions. A deduction is allowed for “qualified artistic charitable contributions” of any literary, musical, artistic or scholarly composition, letter or memorandum, or similar property.

An amount equal to the fair market value of the property on the date contributed is allowable as a deduction. However, the deduction is limited to the amount of the taxpayer’s artistic adjusted gross income for the taxable year.

The following requirements for a deduction must be met:

- (a) The property must have been created by the personal efforts of the taxpayer at least one year prior to the date contributed. The creation of this property cannot be related to the performance of duties while an officer or employee of the United States, any state or political subdivision thereof.
- (b) A written appraisal of the fair market value of the contributed property must be made by a qualified independent appraiser within one year of the date of the contribution. A copy of the appraisal must be attached to the tax return.
- (c) The contribution must be made to a qualified organization as described in this section.

Line 19—Enter any carryover of contributions that you were not able to deduct in an earlier year because they exceeded your adjusted gross income limit. See federal Publication 526 for details on how to figure your carryover.

Line 21 through 24—Casualty and Theft Losses

Line 21—Enter casualty or theft losses of property that is not trade, business, rent or royalty property. Attach federal Form 4684, Casualties and Thefts, or a similar statement to figure your loss.

Losses You MAY Deduct

You may be able to deduct all or part of each loss caused by theft, vandalism, fire, storm, and car, boat and other accidents or similar causes. You may also be able to deduct money you had in a financial institution but lost because of the insolvency or bankruptcy of the institution.

You may deduct nonbusiness casualty or theft losses only to the extent that:

- (a) the amount of **each** separate casualty or theft loss is more than \$100, and
- (b) the total amount of **all** losses during the year is more than 10 percent of Line 9, Form 740.

Special rules apply if you had both gains and losses from nonbusiness casualties or thefts. See federal Form 4684 for details.

Losses You MAY NOT Deduct

- Money or property misplaced or lost.
- Breakage of china, glassware, furniture and similar items under normal conditions.
- Progressive damage to property (buildings, clothes, trees, etc.) caused by termites, moths, other insects or disease.

Deduct the costs of proving you had a property loss as a miscellaneous deduction on Line 27, Schedule A. (Examples of these costs are appraisal fees and photographs used to establish the amount of your loss.)

For more details, see federal Publication 547, Nonbusiness Disasters, Casualties, and Thefts. It also gives information about federal disaster area losses.

Lines 25 through 31—Miscellaneous Deductions

Most miscellaneous deductions cannot be deducted in full. You must subtract 2 percent of your adjusted gross income from the total. Compute the 2 percent limit on Line 30.

Generally, the 2 percent limit applies to job-related expenses you paid for which you were not reimbursed (Line 25). The limit also applies to certain expenses you paid to produce or collect taxable income (Line 27). See the instructions for Lines 25 and 27 for examples of expenses to claim on these lines.

The 2 percent limit does not apply to certain other miscellaneous expenses that you may deduct. These expenses can be deducted in full on Line 32. The Line 32 instructions describe these expenses. Included are deductible gambling losses (to the extent of winnings) and certain job expenses of disabled employees. See federal Publication 529, Miscellaneous Deductions, for more information.

Expenses You MAY NOT Deduct

- Political contributions.
- Personal legal expenses.
- Lost or misplaced cash or property (but see casualty and theft losses).
- Expenses for meals during regular or extra work hours.
- The cost of entertaining friends.
- Expenses of going to or from your regular workplace.
- Education needed to meet minimum requirements for your job or that will qualify you for a new occupation.
- Travel expenses for employment away from home if that period of employment exceeds one year.
- Expenses of:
 - (a) Travel as a form of education.
 - (b) Attending a seminar, convention or similar meeting unless it is related to your employment.
 - (c) Adopting a child, including a child with special needs.
- Fines and penalties.
- Expenses of producing tax-exempt income.
- Amounts paid to organizations or establishments which have been found to practice discrimination.

Expenses Subject to the 2 Percent Limit

Important: The increase in first-year luxury automobile depreciation caps, the 30 percent and **the 50 percent** special depreciation allowance, the additional New York Liberty Zone Section 179 deduction for property placed in service after September 10, 2001, and **the increased Section 179 deduction limits and thresholds for property placed in service after December 31, 2002**, are not allowable for Kentucky tax purposes. For passenger automobiles purchased after September 10, 2001, you must compute Kentucky depreciation in accordance with the IRC in effect on December 31, 2001. **Create a Kentucky Form 2106** by entering **Kentucky** at the top center of a federal Form 2106, Employee Business Expenses. Complete Section D—Depreciation of Vehicles in accordance with the IRC in effect on December 31, 2001. **Attach a copy of the federal Form 2106 filed for federal income tax purposes if no adjustments are required.**

Line 25—Use this line to report job-related expenses you paid for which you were not reimbursed. You **MUST** first fill out Form 2106, Employee Business Expenses, or Form 2106-EZ, Unreimbursed Employee Business Expenses, if you claim any unreimbursed travel, transportation, meal or entertainment expenses for your job; or your employer paid you for any of your job-related expenses reportable on Line 25.

Enter the amount of unreimbursed employee business expense from Form 2106 or 2106-EZ on Line 25 of Schedule A.

If you do not have to fill out Form 2106 or 2106-EZ, list the type and amount of your expenses in the space provided. If you need more space, attach a statement showing the type and amount of the expense. Enter one total on Line 25.

Examples of expenses to include on Line 25 are:

Travel, transportation, meal or entertainment expense.
(**Note:** If you have any of these expenses, you must use Form 2106 or 2106-EZ for all of your job-related expenses.)

Union dues.

Safety equipment, small tools and supplies required for your job.

Uniforms required by your employer, which you may not usually wear away from work.

Protective clothing, required in your work, such as hard hats and safety shoes and glasses.

Physical examinations required by your employer.

Dues to professional organizations and chambers of commerce.

Subscriptions to professional journals.

Fees to employment agencies and other costs to look for a new job in your present occupation, even if you do not get a new job.

Business use of part of your home but only if you use that part exclusively and on a regular basis in your work and for the convenience of your employer. For details, including limits that apply, see federal Publication 587, Business Use of Your Home.

Education expenses you paid that were required by your employer, or by law or regulations, to keep your salary or job. In general, you may also include the cost of keeping or improving skills you must have in your job. For more details, see federal Publication 508, Educational Expenses. Some education expenses are not deductible. See "Expenses You MAY NOT Deduct."

Line 26—Use this line to report tax return preparation fees paid during the taxable year including fees paid for filing your return electronically.

Line 27—Use this line for amounts you paid to produce or collect taxable income and manage or protect property held for earning income. List the type and amount of each expense in the space provided. If you need more space, attach a statement showing the type and amount of each expense. Enter one total on Line 27. Examples of these expenses are:

Safe deposit box rental.

Certain legal and accounting fees.

Clerical help and office rent.

Custodial (e.g., trust account) fees.

Your share of the investment expenses of a regulated investment company.

Certain losses on nonfederally insured deposits in an insolvent or bankrupt financial institution. For more information (including limits on the amount you can deduct), see federal Publication 529.

Deduction for repayment of amounts under a claim of right if \$3,000 or less.

Expenses related to an activity not engaged in for profit. These expenses are limited to the income from the activity that you reported on federal Form 1040, Line 21. See Not-for-Profit Activities in federal Publication 535, Business Expenses, for details on how to figure the amount to deduct.

Line 32—Other Miscellaneous Deductions

Use this line to report miscellaneous deductions that are NOT subject to the 2 percent adjusted gross income limit. Only the expenses listed below can be deducted on Line 32.

Expenses NOT Subject to the 2 Percent Limit

Gambling losses to the extent of gambling winnings. Gambling winnings must be included in federal adjusted gross income (Form 740, Line 5). (**Note:** Gambling losses must be verified by supplemental records. These include a diary and unredeemed tickets, payment slips and winning statements.)

Federal estate tax on income in respect of a decedent.

Amortizable bond premium on bonds acquired before October 23, 1986.

Deduction for repayment of amounts under a claim of right if more than \$3,000. See federal Publication 525.

Unrecovered investment in a pension.

Impairment-related work expenses of a disabled person.

Casualty and theft losses of income-producing property.

List the type and amount of each expense. Enter one total on Line 32. For more information on these expenses, see federal Publication 529.

Note: A credit for tax paid to another state on gambling income may be allowed if the income is taxed by **both** Kentucky and the other state. However, if you have paid tax on gambling income in another state **and** you claimed an itemized deduction on your Kentucky Schedule A for losses, the allowable credit may be reduced or eliminated.

Line 33—Total Itemized Deductions

If the amount on Form 740, Line 9, exceeds \$184,850 (\$92,425 if married filing separately on a combined return or separate returns), skip Part I and complete Part II on page 2.

Dividing Deductions Between Spouses—Married taxpayers who are filing separate returns or a combined return but using only one Schedule A must divide the itemized deductions. Complete page 2, Part I, Lines 1 through 5. If one spouse is not required to file a Kentucky return, total deductions may be divided between them based on the percentage of each spouse's income to total income or separate Schedules A may be filed.

Instructions for Form 2210-K

Purpose of Form—Use this form to determine if you owe an underpayment of estimated tax penalty for failing to prepay 70% of your tax liability and/or interest for failing to make four equal estimated tax installments timely. You may be subject to one or both even if you are due a refund when you file your tax return.

Underpayment of Estimated Tax Penalty—You may be charged an underpayment of estimated tax penalty if you did not prepay 70% of your tax liability and you did not meet one of the exceptions listed in Part I.

Estimated Tax Interest—You may also be charged interest if you failed to make four equal installments timely pursuant to KRS 141.305. These payments are due by April 15, June 15, September 15 of the taxable year, and on January 15 of the succeeding taxable year. Failure to make these equal installments timely may result in interest due pursuant to KRS 141.985. The interest is computed separately for each due date.

Part I—Exceptions and Exclusions—The underpayment of estimated tax penalty may not apply if one of the exceptions listed in Part I is met. If you meet one or more of the exceptions, check the appropriate box(es), complete the lines associated with the exception and check the “Form 2210-K attached” box on Form 740, line 38a (Form 740-NP, line 38a). If none of the exceptions apply, go to Part II.

Part II—Figuring the Underpayment and Penalty—Only complete this section if the additional tax due exceeds \$500 and you do not meet one of the exceptions listed in Part I. Do not include amounts that were prepaid with extension or payments made after the due date of the fourth declaration installment. To avoid this penalty in the future, obtain and file Form 740-ES.

Part III—Required Annual Payment and Interest Calculation—This section is used to calculate your required annual payment. The required annual payment is used to calculate the amount of payment that you should have made each quarter. If you do not pay the required amount in each quarter, you will be subject to interest until that payment is made. You may not be required to pay estimated tax payments if you meet one of the following exceptions:

- Taxpayer died during the taxable year
- Declaration was not required until after September 1, 2016, and the taxpayer files a return and pays the full amount of the tax computed on the return on or before February 1, 2017.
- Two-thirds (2/3) or more of the gross income was from farming; this return is being filed on or before March 1, 2017; and the total tax due is being paid in full.
- Prepaid your last years tax liability with timely payments.

Lines 1–7—Calculates your required annual payment which is the lesser of your current years income tax liability or your previous years tax liability. If you have paid withholding that exceeds the lesser of the two, you do not owe interest and you do not need to complete the rest of the form.

Line 8—Multiply line 7, page 2, by 25 percent (.25) and enter amount in columns A through D. However, if your source(s) of income changed unexpectedly throughout the year or your income was received later in the year, the required number of installments may be fewer.

A taxpayer who is not required to pay estimated tax in four equal installments at the beginning of the year may be required to make installment payments during the remainder

of the year. Refer to the payment due dates at the top of columns A – D to determine how many installments you are required to make based on when your income changed or was received.

If you are required to make 3 installments, multiply line 7 by 34 percent (.34) and enter in column B then multiply line 7 by 33 percent (.33) and enter in columns C and D.

If you are required to make 2 installments, multiply line 7 by 50 percent (.50) and enter in columns C and D.

If you are required to only make 1 installment, multiply line 7 by 100 percent (1.00) and enter in column D.

Line 9—Enter the sum of estimated tax payments made and Kentucky withholding for each quarter. If you have Kentucky income tax withheld, multiply the total by 25 percent (.25) and enter in columns A through D. If you had a credit forward from a prior year return, enter the total amount in Column A only.

Note: Complete lines 10 through 17 for Column A before going to Column B, etc.

Line 10—Enter amount from line 17 of the previous column. This amount should be the overpayment if any from the previous column.

Line 12—Enter amount from line 16 of the previous column. This amount should be the underpayment amount from the previous column that will be carried over to each column until the payment is made.

Line 16—This is the underpayment amount for that column and any underpayment from the previous columns. The underpayment will continue to carryover to the next column until the payment is made or the due date, whichever is earlier.

Figuring the Interest—Interest will be calculated on each underpayment in each column from the payment due date written above line 8 to the date on line 18 or the date the payment was made, whichever is earlier. The underpayments will carryover to the next column and be added to that column's underpayment to calculate interest on that balance.

Line 18—Use this date to calculate the number of days that the current interest amount will be based upon, unless the underpayment was paid prior to this date.

Line 19—This is the number of days from the payment due date shown above line 8 to the date the amount on line 16 was paid or the date shown on line 18 for the column in which you are calculating interest.

For example, if your underpayment on line 16 for column A is \$1,000, you would calculate the interest from 4–15–16 to 6–15–16 and enter 61 days on line 19. If this \$1,000 remains unpaid, it will be added to any underpayment in column B and you would calculate interest from 6–15–16 until 9–15–16 which would be 92 days for that period, etc.

Line 20—The annual interest rate is established by the Department of Revenue for each calendar year. The interest rate for calendar years 2016 is 6 percent and 2017 is 5 percent. The interest calculation for the required third installment payment may be calculated using two different interest rates.

Instructions for Form 8863-K

Purpose of Form—Use Form 8863-K to calculate and claim your 2016 education tuition tax credits. The education credits are: the American Opportunity Credit and the Lifetime Learning Credit. These credits are based on qualified undergraduate education expenses paid to an eligible postsecondary educational institution located in Kentucky. If you elected to claim the education credit for federal purposes rather than the tuition and fees deduction, you must make that same election for Kentucky purposes.

Part I, Qualifications—All questions in Part I must be answered “Yes” to be eligible to claim the Kentucky education tuition tax credit.

Qualified Education Expenses—See the federal instructions to determine the qualified expenses for the American Opportunity Credit and the Lifetime Learning Credit. The allowable expenses may be different for each credit.

Eligible Educational Institution located in Kentucky—An eligible educational institution is generally any accredited public, nonprofit, or private college, university, vocational school, or other postsecondary institution. The institution must be eligible to participate in a student aid program administered by the Department of Education. **The institution attended must be physically located in Kentucky to qualify.**

Part II, American Opportunity Credit—You must enter the student’s name and Social Security number, the name and address of the Kentucky institution, and the qualified expenses. Use the federal instructions to determine if each student meets the qualifications. **For Kentucky, the credit is limited to 25% of the allowable federal credit with a maximum amount allowed of \$625 for each qualifying student.**

Part III, Lifetime Learning Credit—You must enter the student’s name and Social Security number, the name and address of the Kentucky institution, and the qualified expenses. Use the federal instructions to determine if each student meets the qualifications. **For Kentucky, the credit is limited to 25% of the allowable federal credit with a maximum allowed of \$500 per return.**

Part IV, Allowable Education Credits—

Line 12—Multiply Line 11 by 25% (.25). This is your tentative Kentucky allowable credit.

Line 13—Enter the tentative tax from Form 740 or Form 740-NP, page 1, Line 22.

Line 14—Enter the amount from page 2, Part V, Line 34. This is the allowable credit carryforward from prior year(s). If there is no carryforward, enter zero.

Line 15—Subtract Line 14 from Line 13.

Line 16—Enter the smaller of Line 15 or Line 12.

Line 17—Add Lines 14 and 16. **Enter here and on Form 740 or Form 740-NP, Line 23.** This is your allowable 2016 education credit.

Line 18—If Line 15 is smaller than Line 12, subtract Line 15 from Line 12. This is the amount of unused credit carryforward from 2016 to 2017. Maintain records for following years.

Part V, Credit Carryforward from Prior Years—The Kentucky education tuition tax credit can be carried forward for up to 5 years if unused during the preceding tax year(s). You must have completed Form 8863-K for any prior year(s) in which you are claiming a credit carryforward.

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TAX TABLE—2016 KENTUCKY INDIVIDUAL INCOME TAX

Read down the taxable income columns below until you find the bracket for the Taxable Income entered on Form 740-EZ, Line 3; Form 740, Line 11; or Form 740-NP, Line 13. Enter the tax on Form 740-EZ, Line 4; Form 740, Line 12, Column A and/or B; or Form 740-NP, Line 14.

If Taxable Income But Not Tax			If Taxable Income But Not Tax			If Taxable Income But Not Tax			If Taxable Income But Not Tax		
Is Over	Over	Tax	Is Over	Over	Tax	Is Over	Over	Tax	Is Over	Over	Tax
\$ 0	\$ 100	\$ 1	\$ 6,500	\$ 6,600	\$208	\$13,000	\$13,100	\$573	\$19,500	\$19,600	\$ 950
100	200	3	6,600	6,700	213	13,100	13,200	579	19,600	19,700	956
200	300	5	6,700	6,800	218	13,200	13,300	585	19,700	19,800	962
300	400	7	6,800	6,900	223	13,300	13,400	590	19,800	19,900	967
400	500	9	6,900	7,000	228	13,400	13,500	596	19,900	20,000	973
500	600	11	7,000	7,100	233	13,500	13,600	602	20,000	20,100	979
600	700	13	7,100	7,200	238	13,600	13,700	608	20,100	20,200	985
700	800	15	7,200	7,300	243	13,700	13,800	614	20,200	20,300	991
800	900	17	7,300	7,400	248	13,800	13,900	619	20,300	20,400	996
900	1,000	19	7,400	7,500	253	13,900	14,000	625	20,400	20,500	1,002
1,000	1,100	21	7,500	7,600	258	14,000	14,100	631	20,500	20,600	1,008
1,100	1,200	23	7,600	7,700	263	14,100	14,200	637	20,600	20,700	1,014
1,200	1,300	25	7,700	7,800	268	14,200	14,300	643	20,700	20,800	1,020
1,300	1,400	27	7,800	7,900	273	14,300	14,400	648	20,800	20,900	1,025
1,400	1,500	29	7,900	8,000	278	14,400	14,500	654	20,900	21,000	1,031
1,500	1,600	31	8,000	8,100	283	14,500	14,600	660	21,000	21,100	1,037
1,600	1,700	33	8,100	8,200	289	14,600	14,700	666	21,100	21,200	1,043
1,700	1,800	35	8,200	8,300	295	14,700	14,800	672	21,200	21,300	1,049
1,800	1,900	37	8,300	8,400	300	14,800	14,900	677	21,300	21,400	1,054
1,900	2,000	39	8,400	8,500	306	14,900	15,000	683	21,400	21,500	1,060
2,000	2,100	41	8,500	8,600	312	15,000	15,100	689	21,500	21,600	1,066
2,100	2,200	43	8,600	8,700	318	15,100	15,200	695	21,600	21,700	1,072
2,200	2,300	45	8,700	8,800	324	15,200	15,300	701	21,700	21,800	1,078
2,300	2,400	47	8,800	8,900	329	15,300	15,400	706	21,800	21,900	1,083
2,400	2,500	49	8,900	9,000	335	15,400	15,500	712	21,900	22,000	1,089
2,500	2,600	51	9,000	9,100	341	15,500	15,600	718	22,000	22,100	1,095
2,600	2,700	53	9,100	9,200	347	15,600	15,700	724	22,100	22,200	1,101
2,700	2,800	55	9,200	9,300	353	15,700	15,800	730	22,200	22,300	1,107
2,800	2,900	57	9,300	9,400	358	15,800	15,900	735	22,300	22,400	1,112
2,900	3,000	59	9,400	9,500	364	15,900	16,000	741	22,400	22,500	1,118
3,000	3,100	62	9,500	9,600	370	16,000	16,100	747	22,500	22,600	1,124
3,100	3,200	65	9,600	9,700	376	16,100	16,200	753	22,600	22,700	1,130
3,200	3,300	68	9,700	9,800	382	16,200	16,300	759	22,700	22,800	1,136
3,300	3,400	71	9,800	9,900	387	16,300	16,400	764	22,800	22,900	1,141
3,400	3,500	74	9,900	10,000	393	16,400	16,500	770	22,900	23,000	1,147
3,500	3,600	77	10,000	10,100	399	16,500	16,600	776	23,000	23,100	1,153
3,600	3,700	80	10,100	10,200	405	16,600	16,700	782	23,100	23,200	1,159
3,700	3,800	83	10,200	10,300	411	16,700	16,800	788	23,200	23,300	1,165
3,800	3,900	86	10,300	10,400	416	16,800	16,900	793	23,300	23,400	1,170
3,900	4,000	89	10,400	10,500	422	16,900	17,000	799	23,400	23,500	1,176
4,000	4,100	92	10,500	10,600	428	17,000	17,100	805	23,500	23,600	1,182
4,100	4,200	96	10,600	10,700	434	17,100	17,200	811	23,600	23,700	1,188
4,200	4,300	100	10,700	10,800	440	17,200	17,300	817	23,700	23,800	1,194
4,300	4,400	104	10,800	10,900	445	17,300	17,400	822	23,800	23,900	1,199
4,400	4,500	108	10,900	11,000	451	17,400	17,500	828	23,900	24,000	1,205
4,500	4,600	112	11,000	11,100	457	17,500	17,600	834	24,000	24,100	1,211
4,600	4,700	116	11,100	11,200	463	17,600	17,700	840	24,100	24,200	1,217
4,700	4,800	120	11,200	11,300	469	17,700	17,800	846	24,200	24,300	1,223
4,800	4,900	124	11,300	11,400	474	17,800	17,900	851	24,300	24,400	1,228
4,900	5,000	128	11,400	11,500	480	17,900	18,000	857	24,400	24,500	1,234
5,000	5,100	133	11,500	11,600	486	18,000	18,100	863	24,500	24,600	1,240
5,100	5,200	138	11,600	11,700	492	18,100	18,200	869	24,600	24,700	1,246
5,200	5,300	143	11,700	11,800	498	18,200	18,300	875	24,700	24,800	1,252
5,300	5,400	148	11,800	11,900	503	18,300	18,400	880	24,800	24,900	1,257
5,400	5,500	153	11,900	12,000	509	18,400	18,500	886	24,900	25,000	1,263
5,500	5,600	158	12,000	12,100	515	18,500	18,600	892	25,000	25,100	1,269
5,600	5,700	163	12,100	12,200	521	18,600	18,700	898	25,100	25,200	1,275
5,700	5,800	168	12,200	12,300	527	18,700	18,800	904	25,200	25,300	1,281
5,800	5,900	173	12,300	12,400	532	18,800	18,900	909	25,300	25,400	1,286
5,900	6,000	178	12,400	12,500	538	18,900	19,000	915	25,400	25,500	1,292
6,000	6,100	183	12,500	12,600	544	19,000	19,100	921	25,500	25,600	1,298
6,100	6,200	188	12,600	12,700	550	19,100	19,200	927	25,600	25,700	1,304
6,200	6,300	193	12,700	12,800	556	19,200	19,300	933	25,700	25,800	1,310
6,300	6,400	198	12,800	12,900	561	19,300	19,400	938	25,800	25,900	1,315
6,400	6,500	203	12,900	13,000	567	19,400	19,500	944	25,900	26,000	1,321

TAX TABLE—2016 KENTUCKY INDIVIDUAL INCOME TAX

Read down the taxable income columns below until you find the bracket for the Taxable Income entered on Form 740-EZ, Line 3; Form 740, Line 11; or Form 740-NP, Line 13. Enter the tax on Form 740-EZ, Line 4; Form 740, Line 12, Column A and/or B; or Form 740-NP, Line 14.

If Taxable Income Is Over But Not Over Tax			If Taxable Income Is Over But Not Over Tax			If Taxable Income Is Over But Not Over Tax			If Taxable Income Is Over But Not Over Tax		
\$26,000	\$26,100	\$1,327	\$32,500	\$32,600	\$1,704	\$39,000	\$39,100	\$2,081	\$45,500	\$45,600	\$2,458
26,100	26,200	1,333	32,600	32,700	1,710	39,100	39,200	2,087	45,600	45,700	2,464
26,200	26,300	1,339	32,700	32,800	1,716	39,200	39,300	2,093	45,700	45,800	2,470
26,300	26,400	1,344	32,800	32,900	1,721	39,300	39,400	2,098	45,800	45,900	2,475
26,400	26,500	1,350	32,900	33,000	1,727	39,400	39,500	2,104	45,900	46,000	2,481
26,500	26,600	1,356	33,000	33,100	1,733	39,500	39,600	2,110	46,000	46,100	2,487
26,600	26,700	1,362	33,100	33,200	1,739	39,600	39,700	2,116	46,100	46,200	2,493
26,700	26,800	1,368	33,200	33,300	1,745	39,700	39,800	2,122	46,200	46,300	2,499
26,800	26,900	1,373	33,300	33,400	1,750	39,800	39,900	2,127	46,300	46,400	2,504
26,900	27,000	1,379	33,400	33,500	1,756	39,900	40,000	2,133	46,400	46,500	2,510
27,000	27,100	1,385	33,500	33,600	1,762	40,000	40,100	2,139	46,500	46,600	2,516
27,100	27,200	1,391	33,600	33,700	1,768	40,100	40,200	2,145	46,600	46,700	2,522
27,200	27,300	1,397	33,700	33,800	1,774	40,200	40,300	2,151	46,700	46,800	2,528
27,300	27,400	1,402	33,800	33,900	1,779	40,300	40,400	2,156	46,800	46,900	2,533
27,400	27,500	1,408	33,900	34,000	1,785	40,400	40,500	2,162	46,900	47,000	2,539
27,500	27,600	1,414	34,000	34,100	1,791	40,500	40,600	2,168	47,000	47,100	2,545
27,600	27,700	1,420	34,100	34,200	1,797	40,600	40,700	2,174	47,100	47,200	2,551
27,700	27,800	1,426	34,200	34,300	1,803	40,700	40,800	2,180	47,200	47,300	2,557
27,800	27,900	1,431	34,300	34,400	1,808	40,800	40,900	2,185	47,300	47,400	2,562
27,900	28,000	1,437	34,400	34,500	1,814	40,900	41,000	2,191	47,400	47,500	2,568
28,000	28,100	1,443	34,500	34,600	1,820	41,000	41,100	2,197	47,500	47,600	2,574
28,100	28,200	1,449	34,600	34,700	1,826	41,100	41,200	2,203	47,600	47,700	2,580
28,200	28,300	1,455	34,700	34,800	1,832	41,200	41,300	2,209	47,700	47,800	2,586
28,300	28,400	1,460	34,800	34,900	1,837	41,300	41,400	2,214	47,800	47,900	2,591
28,400	28,500	1,466	34,900	35,000	1,843	41,400	41,500	2,220	47,900	48,000	2,597
28,500	28,600	1,472	35,000	35,100	1,849	41,500	41,600	2,226	48,000	48,100	2,603
28,600	28,700	1,478	35,100	35,200	1,855	41,600	41,700	2,232	48,100	48,200	2,609
28,700	28,800	1,484	35,200	35,300	1,861	41,700	41,800	2,238	48,200	48,300	2,615
28,800	28,900	1,489	35,300	35,400	1,866	41,800	41,900	2,243	48,300	48,400	2,620
28,900	29,000	1,495	35,400	35,500	1,872	41,900	42,000	2,249	48,400	48,500	2,626
29,000	29,100	1,501	35,500	35,600	1,878	42,000	42,100	2,255	48,500	48,600	2,632
29,100	29,200	1,507	35,600	35,700	1,884	42,100	42,200	2,261	48,600	48,700	2,638
29,200	29,300	1,513	35,700	35,800	1,890	42,200	42,300	2,267	48,700	48,800	2,644
29,300	29,400	1,518	35,800	35,900	1,895	42,300	42,400	2,272	48,800	48,900	2,649
29,400	29,500	1,524	35,900	36,000	1,901	42,400	42,500	2,278	48,900	49,000	2,655
29,500	29,600	1,530	36,000	36,100	1,907	42,500	42,600	2,284	49,000	49,100	2,661
29,600	29,700	1,536	36,100	36,200	1,913	42,600	42,700	2,290	49,100	49,200	2,667
29,700	29,800	1,542	36,200	36,300	1,919	42,700	42,800	2,296	49,200	49,300	2,673
29,800	29,900	1,547	36,300	36,400	1,924	42,800	42,900	2,301	49,300	49,400	2,678
29,900	30,000	1,553	36,400	36,500	1,930	42,900	43,000	2,307	49,400	49,500	2,684
30,000	30,100	1,559	36,500	36,600	1,936	43,000	43,100	2,313	49,500	49,600	2,690
30,100	30,200	1,565	36,600	36,700	1,942	43,100	43,200	2,319	49,600	49,700	2,696
30,200	30,300	1,571	36,700	36,800	1,948	43,200	43,300	2,325	49,700	49,800	2,702
30,300	30,400	1,576	36,800	36,900	1,953	43,300	43,400	2,330	49,800	49,900	2,707
30,400	30,500	1,582	36,900	37,000	1,959	43,400	43,500	2,336	49,900	50,000	2,713
30,500	30,600	1,588	37,000	37,100	1,965	43,500	43,600	2,342	50,000	50,100	2,719
30,600	30,700	1,594	37,100	37,200	1,971	43,600	43,700	2,348	50,100	50,200	2,725
30,700	30,800	1,600	37,200	37,300	1,977	43,700	43,800	2,354	50,200	50,300	2,731
30,800	30,900	1,605	37,300	37,400	1,982	43,800	43,900	2,359	50,300	50,400	2,736
30,900	31,000	1,611	37,400	37,500	1,988	43,900	44,000	2,365	50,400	50,500	2,742
31,000	31,100	1,617	37,500	37,600	1,994	44,000	44,100	2,371	50,500	50,600	2,748
31,100	31,200	1,623	37,600	37,700	2,000	44,100	44,200	2,377	50,600	50,700	2,754
31,200	31,300	1,629	37,700	37,800	2,006	44,200	44,300	2,383	50,700	50,800	2,760
31,300	31,400	1,634	37,800	37,900	2,011	44,300	44,400	2,388	50,800	50,900	2,765
31,400	31,500	1,640	37,900	38,000	2,017	44,400	44,500	2,394	50,900	51,000	2,771
31,500	31,600	1,646	38,000	38,100	2,023	44,500	44,600	2,400	51,000	51,100	2,777
31,600	31,700	1,652	38,100	38,200	2,029	44,600	44,700	2,406	51,100	51,200	2,783
31,700	31,800	1,658	38,200	38,300	2,035	44,700	44,800	2,412	51,200	51,300	2,789
31,800	31,900	1,663	38,300	38,400	2,040	44,800	44,900	2,417	51,300	51,400	2,794
31,900	32,000	1,669	38,400	38,500	2,046	44,900	45,000	2,423	51,400	51,500	2,800
32,000	32,100	1,675	38,500	38,600	2,052	45,000	45,100	2,429	51,500	51,600	2,806
32,100	32,200	1,681	38,600	38,700	2,058	45,100	45,200	2,435	51,600	51,700	2,812
32,200	32,300	1,687	38,700	38,800	2,064	45,200	45,300	2,441	51,700	51,800	2,818
32,300	32,400	1,692	38,800	38,900	2,069	45,300	45,400	2,446	51,800	51,900	2,823
32,400	32,500	1,698	38,900	39,000	2,075	45,400	45,500	2,452	51,900	52,000	2,829

TAX TABLE—2016 KENTUCKY INDIVIDUAL INCOME TAX

Read down the taxable income columns below until you find the bracket for the Taxable Income entered on Form 740-EZ, Line 3; Form 740, Line 11; or Form 740-NP, Line 13. Enter the tax on Form 740-EZ, Line 4; Form 740, Line 12, Column A and/or B; or Form 740-NP, Line 14.

If Taxable Income But Not Is Over Over Tax			If Taxable Income But Not Is Over Over Tax			If Taxable Income But Not Is Over Over Tax			If Taxable Income But Not Is Over Over Tax		
\$52,000	\$52,100	\$2,835	\$58,500	\$58,600	\$3,212	\$65,000	\$65,100	\$3,589	\$71,500	\$71,600	\$3,966
52,100	52,200	2,841	58,600	58,700	3,218	65,100	65,200	3,595	71,600	71,700	3,972
52,200	52,300	2,847	58,700	58,800	3,224	65,200	65,300	3,601	71,700	71,800	3,978
52,300	52,400	2,852	58,800	58,900	3,229	65,300	65,400	3,606	71,800	71,900	3,983
52,400	52,500	2,858	58,900	59,000	3,235	65,400	65,500	3,612	71,900	72,000	3,989
52,500	52,600	2,864	59,000	59,100	3,241	65,500	65,600	3,618	72,000	72,100	3,995
52,600	52,700	2,870	59,100	59,200	3,247	65,600	65,700	3,624	72,100	72,200	4,001
52,700	52,800	2,876	59,200	59,300	3,253	65,700	65,800	3,630	72,200	72,300	4,007
52,800	52,900	2,881	59,300	59,400	3,258	65,800	65,900	3,635	72,300	72,400	4,012
52,900	53,000	2,887	59,400	59,500	3,264	65,900	66,000	3,641	72,400	72,500	4,018
53,000	53,100	2,893	59,500	59,600	3,270	66,000	66,100	3,647	72,500	72,600	4,024
53,100	53,200	2,899	59,600	59,700	3,276	66,100	66,200	3,653	72,600	72,700	4,030
53,200	53,300	2,905	59,700	59,800	3,282	66,200	66,300	3,659	72,700	72,800	4,036
53,300	53,400	2,910	59,800	59,900	3,287	66,300	66,400	3,664	72,800	72,900	4,041
53,400	53,500	2,916	59,900	60,000	3,293	66,400	66,500	3,670	72,900	73,000	4,047
53,500	53,600	2,922	60,000	60,100	3,299	66,500	66,600	3,676	73,000	73,100	4,053
53,600	53,700	2,928	60,100	60,200	3,305	66,600	66,700	3,682	73,100	73,200	4,059
53,700	53,800	2,934	60,200	60,300	3,311	66,700	66,800	3,688	73,200	73,300	4,065
53,800	53,900	2,939	60,300	60,400	3,316	66,800	66,900	3,693	73,300	73,400	4,070
53,900	54,000	2,945	60,400	60,500	3,322	66,900	67,000	3,699	73,400	73,500	4,076
54,000	54,100	2,951	60,500	60,600	3,328	67,000	67,100	3,705	73,500	73,600	4,082
54,100	54,200	2,957	60,600	60,700	3,334	67,100	67,200	3,711	73,600	73,700	4,088
54,200	54,300	2,963	60,700	60,800	3,340	67,200	67,300	3,717	73,700	73,800	4,094
54,300	54,400	2,968	60,800	60,900	3,345	67,300	67,400	3,722	73,800	73,900	4,099
54,400	54,500	2,974	60,900	61,000	3,351	67,400	67,500	3,728	73,900	74,000	4,105
54,500	54,600	2,980	61,000	61,100	3,357	67,500	67,600	3,734	74,000	74,100	4,111
54,600	54,700	2,986	61,100	61,200	3,363	67,600	67,700	3,740	74,100	74,200	4,117
54,700	54,800	2,992	61,200	61,300	3,369	67,700	67,800	3,746	74,200	74,300	4,123
54,800	54,900	2,997	61,300	61,400	3,374	67,800	67,900	3,751	74,300	74,400	4,128
54,900	55,000	3,003	61,400	61,500	3,380	67,900	68,000	3,757	74,400	74,500	4,134
55,000	55,100	3,009	61,500	61,600	3,386	68,000	68,100	3,763	74,500	74,600	4,140
55,100	55,200	3,015	61,600	61,700	3,392	68,100	68,200	3,769	74,600	74,700	4,146
55,200	55,300	3,021	61,700	61,800	3,398	68,200	68,300	3,775	74,700	74,800	4,152
55,300	55,400	3,026	61,800	61,900	3,403	68,300	68,400	3,780	74,800	74,900	4,157
55,400	55,500	3,032	61,900	62,000	3,409	68,400	68,500	3,786	74,900	75,000	4,163
55,500	55,600	3,038	62,000	62,100	3,415	68,500	68,600	3,792	75,000	75,100	4,169
55,600	55,700	3,044	62,100	62,200	3,421	68,600	68,700	3,798	75,100	75,200	4,175
55,700	55,800	3,050	62,200	62,300	3,427	68,700	68,800	3,804	75,200	75,300	4,181
55,800	55,900	3,055	62,300	62,400	3,432	68,800	68,900	3,809	75,300	75,400	4,187
55,900	56,000	3,061	62,400	62,500	3,438	68,900	69,000	3,815	75,400	75,500	4,193
56,000	56,100	3,067	62,500	62,600	3,444	69,000	69,100	3,821	75,500	75,600	4,199
56,100	56,200	3,073	62,600	62,700	3,450	69,100	69,200	3,827	75,600	75,700	4,205
56,200	56,300	3,079	62,700	62,800	3,456	69,200	69,300	3,833	75,700	75,800	4,211
56,300	56,400	3,084	62,800	62,900	3,461	69,300	69,400	3,838	75,800	75,900	4,217
56,400	56,500	3,090	62,900	63,000	3,467	69,400	69,500	3,844	75,900	76,000	4,223
56,500	56,600	3,096	63,000	63,100	3,473	69,500	69,600	3,850	76,000	76,100	4,229
56,600	56,700	3,102	63,100	63,200	3,479	69,600	69,700	3,856	76,100	76,200	4,235
56,700	56,800	3,108	63,200	63,300	3,485	69,700	69,800	3,862	76,200	76,300	4,241
56,800	56,900	3,113	63,300	63,400	3,490	69,800	69,900	3,867	76,300	76,400	4,247
56,900	57,000	3,119	63,400	63,500	3,496	69,900	70,000	3,873	76,400	76,500	4,253
57,000	57,100	3,125	63,500	63,600	3,502	70,000	70,100	3,879	76,500	76,600	4,259
57,100	57,200	3,131	63,600	63,700	3,508	70,100	70,200	3,885	76,600	76,700	4,265
57,200	57,300	3,137	63,700	63,800	3,514	70,200	70,300	3,891	76,700	76,800	4,271
57,300	57,400	3,142	63,800	63,900	3,519	70,300	70,400	3,896	76,800	76,900	4,277
57,400	57,500	3,148	63,900	64,000	3,525	70,400	70,500	3,902	76,900	77,000	4,283
57,500	57,600	3,154	64,000	64,100	3,531	70,500	70,600	3,908	77,000	77,100	4,289
57,600	57,700	3,160	64,100	64,200	3,537	70,600	70,700	3,914	77,100	77,200	4,295
57,700	57,800	3,166	64,200	64,300	3,543	70,700	70,800	3,920	77,200	77,300	4,301
57,800	57,900	3,171	64,300	64,400	3,548	70,800	70,900	3,925	77,300	77,400	4,307
57,900	58,000	3,177	64,400	64,500	3,554	70,900	71,000	3,931	77,400	77,500	4,313
58,000	58,100	3,183	64,500	64,600	3,560	71,000	71,100	3,937	77,500	77,600	4,319
58,100	58,200	3,189	64,600	64,700	3,566	71,100	71,200	3,943	77,600	77,700	4,325
58,200	58,300	3,195	64,700	64,800	3,572	71,200	71,300	3,949	77,700	77,800	4,331
58,300	58,400	3,200	64,800	64,900	3,577	71,300	71,400	3,954	77,800	77,900	4,337
58,400	58,500	3,206	64,900	65,000	3,583	71,400	71,500	3,960	77,900	78,000	4,343

TAX TABLE—2016 KENTUCKY INDIVIDUAL INCOME TAX

Read down the taxable income columns below until you find the bracket for the Taxable Income entered on Form 740-EZ, Line 3; Form 740, Line 11; or Form 740-NP, Line 13. Enter the tax on Form 740-EZ, Line 4; Form 740, Line 12, Column A and/or B; or Form 740-NP, Line 14.

If Taxable Income Is Over But Not Over Tax			If Taxable Income Is Over But Not Over Tax			If Taxable Income Is Over But Not Over Tax			If Taxable Income Is Over But Not Over Tax		
\$78,000	\$78,100	\$4,349	\$84,500	\$84,600	\$4,739	\$91,000	\$91,100	\$5,129	\$97,500	\$ 97,600	\$5,519
78,100	78,200	4,355	84,600	84,700	4,745	91,100	91,200	5,135	97,600	97,700	5,525
78,200	78,300	4,361	84,700	84,800	4,751	91,200	91,300	5,141	97,700	97,800	5,531
78,300	78,400	4,367	84,800	84,900	4,757	91,300	91,400	5,147	97,800	97,900	5,537
78,400	78,500	4,373	84,900	85,000	4,763	91,400	91,500	5,153	97,900	98,000	5,543
78,500	78,600	4,379	85,000	85,100	4,769	91,500	91,600	5,159	98,000	98,100	5,549
78,600	78,700	4,385	85,100	85,200	4,775	91,600	91,700	5,165	98,100	98,200	5,555
78,700	78,800	4,391	85,200	85,300	4,781	91,700	91,800	5,171	98,200	98,300	5,561
78,800	78,900	4,397	85,300	85,400	4,787	91,800	91,900	5,177	98,300	98,400	5,567
78,900	79,000	4,403	85,400	85,500	4,793	91,900	92,000	5,183	98,400	98,500	5,573
79,000	79,100	4,409	85,500	85,600	4,799	92,000	92,100	5,189	98,500	98,600	5,579
79,100	79,200	4,415	85,600	85,700	4,805	92,100	92,200	5,195	98,600	98,700	5,585
79,200	79,300	4,421	85,700	85,800	4,811	92,200	92,300	5,201	98,700	98,800	5,591
79,300	79,400	4,427	85,800	85,900	4,817	92,300	92,400	5,207	98,800	98,900	5,597
79,400	79,500	4,433	85,900	86,000	4,823	92,400	92,500	5,213	98,900	99,000	5,603
79,500	79,600	4,439	86,000	86,100	4,829	92,500	92,600	5,219	99,000	99,100	5,609
79,600	79,700	4,445	86,100	86,200	4,835	92,600	92,700	5,225	99,100	99,200	5,615
79,700	79,800	4,451	86,200	86,300	4,841	92,700	92,800	5,231	99,200	99,300	5,621
79,800	79,900	4,457	86,300	86,400	4,847	92,800	92,900	5,237	99,300	99,400	5,627
79,900	80,000	4,463	86,400	86,500	4,853	92,900	93,000	5,243	99,400	99,500	5,633
80,000	80,100	4,469	86,500	86,600	4,859	93,000	93,100	5,249	99,500	99,600	5,639
80,100	80,200	4,475	86,600	86,700	4,865	93,100	93,200	5,255	99,600	99,700	5,645
80,200	80,300	4,481	86,700	86,800	4,871	93,200	93,300	5,261	99,700	99,800	5,651
80,300	80,400	4,487	86,800	86,900	4,877	93,300	93,400	5,267	99,800	99,900	5,657
80,400	80,500	4,493	86,900	87,000	4,883	93,400	93,500	5,273	99,900	100,000	5,663
80,500	80,600	4,499	87,000	87,100	4,889	93,500	93,600	5,279			
80,600	80,700	4,505	87,100	87,200	4,895	93,600	93,700	5,285	Over	100,000	5,666
80,700	80,800	4,511	87,200	87,300	4,901	93,700	93,800	5,291	<i>Plus 6% of all over 100,000</i>		
80,800	80,900	4,517	87,300	87,400	4,907	93,800	93,900	5,297			
80,900	81,000	4,523	87,400	87,500	4,913	93,900	94,000	5,303			
81,000	81,100	4,529	87,500	87,600	4,919	94,000	94,100	5,309			
81,100	81,200	4,535	87,600	87,700	4,925	94,100	94,200	5,315			
81,200	81,300	4,541	87,700	87,800	4,931	94,200	94,300	5,321			
81,300	81,400	4,547	87,800	87,900	4,937	94,300	94,400	5,327			
81,400	81,500	4,553	87,900	88,000	4,943	94,400	94,500	5,333			
81,500	81,600	4,559	88,000	88,100	4,949	94,500	94,600	5,339			
81,600	81,700	4,565	88,100	88,200	4,955	94,600	94,700	5,345			
81,700	81,800	4,571	88,200	88,300	4,961	94,700	94,800	5,351			
81,800	81,900	4,577	88,300	88,400	4,967	94,800	94,900	5,357			
81,900	82,000	4,583	88,400	88,500	4,973	94,900	95,000	5,363			
82,000	82,100	4,589	88,500	88,600	4,979	95,000	95,100	5,369			
82,100	82,200	4,595	88,600	88,700	4,985	95,100	95,200	5,375			
82,200	82,300	4,601	88,700	88,800	4,991	95,200	95,300	5,381			
82,300	82,400	4,607	88,800	88,900	4,997	95,300	95,400	5,387			
82,400	82,500	4,613	88,900	89,000	5,003	95,400	95,500	5,393			
82,500	82,600	4,619	89,000	89,100	5,009	95,500	95,600	5,399			
82,600	82,700	4,625	89,100	89,200	5,015	95,600	95,700	5,405			
82,700	82,800	4,631	89,200	89,300	5,021	95,700	95,800	5,411			
82,800	82,900	4,637	89,300	89,400	5,027	95,800	95,900	5,417			
82,900	83,000	4,643	89,400	89,500	5,033	95,900	96,000	5,423			
83,000	83,100	4,649	89,500	89,600	5,039	96,000	96,100	5,429			
83,100	83,200	4,655	89,600	89,700	5,045	96,100	96,200	5,435			
83,200	83,300	4,661	89,700	89,800	5,051	96,200	96,300	5,441			
83,300	83,400	4,667	89,800	89,900	5,057	96,300	96,400	5,447			
83,400	83,500	4,673	89,900	90,000	5,063	96,400	96,500	5,453			
83,500	83,600	4,679	90,000	90,100	5,069	96,500	96,600	5,459			
83,600	83,700	4,685	90,100	90,200	5,075	96,600	96,700	5,465			
83,700	83,800	4,691	90,200	90,300	5,081	96,700	96,800	5,471			
83,800	83,900	4,697	90,300	90,400	5,087	96,800	96,900	5,477			
83,900	84,000	4,703	90,400	90,500	5,093	96,900	97,000	5,483			
84,000	84,100	4,709	90,500	90,600	5,099	97,000	97,100	5,489			
84,100	84,200	4,715	90,600	90,700	5,105	97,100	97,200	5,495			
84,200	84,300	4,721	90,700	90,800	5,111	97,200	97,300	5,501			
84,300	84,400	4,727	90,800	90,900	5,117	97,300	97,400	5,507			
84,400	84,500	4,733	90,900	91,000	5,123	97,400	97,500	5,513			

YOUR RIGHTS AS A KENTUCKY TAXPAYER

As a Kentucky taxpayer, you have the right to expect the DOR to honor its mission and uphold your rights every time you contact or are contacted by the DOR.

RIGHTS OF TAXPAYER

Privacy—You have the right to privacy of information provided to the DOR.

Assistance—You have the right to advice and assistance from the DOR in complying with state tax laws.

Explanation—You have the right to a clear and concise explanation of:

- basis of assessment of additional taxes, interest and penalties, or the denial or reduction of any refund or credit claim;
- procedure for protest and appeal of a determination of the DOR; and
- tax laws and changes in tax laws so that you can comply with the law.

Protest and Appeal—You have the right to protest and appeal a determination of the DOR if you disagree with an assessment of tax or penalty, reduction or a denial of a refund, a revocation of a license or permit, or other determination made by the DOR. If you file a timely protest, you have a right to a conference to discuss the matter.

Representation—You have the right to representation by your authorized agent (attorney, accountant or other person) in any hearing or conference with the DOR. You have the right to be informed of this right prior to the conference or hearing. If you intend for your representative to attend the conference or hearing in your place, you may be required to give your representative a power of attorney before the DOR can discuss tax matters with your authorized agent.

Recordings—You have the right to make an audio recording of any meeting, conference, or hearing with the DOR. The DOR has the right to make an audio recording, if you are notified in writing in advance or if you make a recording. You have the right to receive a copy of the recording.

Consideration—You have the right to consideration of:

- waiver of penalties or collection fees if “reasonable cause” for reduction or waiver is given (“reasonable cause” is defined in KRS 131.010(9) as: “an event, happening, or circumstance entirely beyond the knowledge or control of a taxpayer who has exercised due care and prudence in the filing of a return or report or the payment of monies due the department pursuant to law or administrative regulation”);
- installment payments of delinquent taxes, interest and penalties;
- waiver of interest and penalties, but not taxes, resulting from incorrect written advice from the DOR if all facts were given and the law did not change or the courts did not issue a ruling to the contrary;
- extension of time for filing reports or returns; and
- payment of charges incurred resulting from an erroneous filing of a lien or levy by the DOR.

Guarantee—You have the right to a guarantee that DOR employees are not paid, evaluated or promoted based on taxes assessed or collected, or a tax assessment or collection quota or goal imposed or suggested.

Damages—You have the right to file a claim for actual and direct monetary damages with the Kentucky Board of Claims if a DOR employee willfully, recklessly and intentionally disregards your rights as a Kentucky taxpayer.

Interest—You may have the right to receive interest on an overpayment of tax.

DEPARTMENT OF REVENUE RESPONSIBILITIES

The DOR has the responsibility to:

- perform audits, conduct conferences and hearings with you at reasonable times and places;
- authorize, require or conduct an investigation or surveillance of you only if it relates to a tax matter;
- make a written request for payment of delinquent taxes which are due and payable at least 30 days prior to seizure and sale of your assets;
- conduct educational and informational programs to help you understand and comply with the laws;
- publish clear and simple statements to explain tax procedures, remedies, your rights and obligations, and the rights and obligations of the DOR;
- notify you in writing when an erroneous lien or levy is released and, if requested, notify major credit reporting companies in counties where lien was filed;
- advise you of procedures, remedies and your rights and obligations with an original notice of audit or when an original notice of tax due is issued, a refund or credit is denied or reduced, or whenever a license or permit is denied, revoked or canceled;
- notify you in writing prior to termination or modification of a payment agreement;
- furnish copies of the agent’s audit workpapers and a written narrative explaining the reason(s) for the assessment;
- resolve tax controversies on a fair and equitable basis at the administrative level whenever possible;
- notify you in writing at your last known address at least 60 days prior to publishing your name on a list of delinquent taxpayers for which a tax or judgment lien has been filed; and
- notify you by certified mail 20 days prior to submitting name to the relevant agency for the revocation or denial of professional license, driver’s license or motor vehicle registration.

* * * * *

This information merely summarizes your rights as a Kentucky taxpayer and the responsibilities of the Department of Revenue. The Kentucky Taxpayers’ Bill of Rights may be found in the Kentucky Revised Statutes (KRS) at Chapter 131.041—131.083. Additional rights and responsibilities are provided for in KRS 131.020, 131.110, 131.170, 131.1817, 131.183, 131.190, 131.500, 131.654, 133.120, 133.130, 134.580 and 134.590.

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- Sign your return electronically and file a completely paperless return.
- Get an electronic acknowledgment that the Department of Revenue has received your return.
- Schedule debit dates for estimate tax payments and pay any additional income tax owed by using direct debit. **Direct debit is not available on paper filed returns.**
- Prepare and file your federal and state returns at the same time.
- File from the comfort of your home 24 hours a day, 7 days a week.

It's accurate and secure.

- Approved software ensures more accurate returns due to edits within the program.
- Department of Revenue computers quickly and automatically process return information.
- IRS/Kentucky *e-file* meets or exceeds all government security standards.
- Over 85% of Kentucky taxpayers chose *e-file* in 2016.