## **740-X** 42A740-X (11-10) Department of Revenue



## AMENDED KENTUCKY INDIVIDUAL INCOMETAX RETURN



For calendar year or For fiscal year beginning \_  $\_\_$  , and ending  $\_$ Spouse's Social Security No. Your Social Security No Filing Status: Check only one block. Original Amended Single Last Name First Name (Joint or combined return, give both names and initials.) 2. Married, filing separately on this combined return Married, filing joint return Mailing Address Number and Street or P.O. Box Apt. No. Married, filing separate returns. Enter spouse's name and Social Security City. Town or Post Office ZIP Code State number as it appears on separate return. I-As Originally II-Net Change Increase Ш **INCOME AND DEDUCTIONS** Reported or Adjusted or Decrease (see p. 2) Correct Amount KENTUCKY ADJUSTED GROSS INCOME (Form 740 or 740-EZ) Column A, Spouse..... Column B, Yourself (or Joint)..... 2. ITEMIZED DEDUCTIONS / STANDARD DEDUCTION Column A, Spouse..... Column B, Yourself (or Joint)..... 3. TAXABLE INCOME Column A, Spouse..... Column B, Yourself (or Joint)..... TAX LIABILITY 4. Enter tax from Form 740, line 14 or Form 740-EZ, line 4. Column A, Spouse..... Column B, Yourself (or Joint)..... **Business Incentive Credits.** Column A, Spouse..... Column B, Yourself (or Joint)..... Personal Tax Credits. Column A, Spouse..... Column B, Yourself (or Joint)..... 7. Subtract lines 5 and 6 Column A, Spouse..... from line 4. Column B, Yourself (or Joint)..... Add line 7, Columns A and B and enter here ..... 9. Family SizeTax Credit ..... 10. Education Tuition Tax Credit..... 11. Child and Dependent Care Credit ..... 12. New HomeTax Credit (2009 and 2010 Only) ...... 13. Income Tax Liability. Subtract lines 9, 10, 11 and 12 from line 8...... 14. Kentucky Use Tax..... 15. TotalTax Liability ..... **PAYMENTS AND CREDITS** Kentucky Income Tax Withheld..... 17. Kentucky Estimated Tax Payments..... 18. Refundable Kentucky Corporation Tax Credit (KRS 141.420(3)(c)).... 19. Refundable certified rehabilitation credit (KRS 141.382(1)(b))........ 20. Film industry tax credit (KRS 141.383)..... 21. Amount paid with original return, plus additional payments made after it was filed ...... Total of lines 16 through 21, Column III ..... **REFUND OR AMOUNT DUE** 23. Overpayment, if any, shown on original return, Form 740 or Form 740-EZ...... 24. Subtract line 23 from line 22 and enter the result..... 25. If line 15, Column III, is more than line 24, enter amount due ...... 26. Compute interest on the amount due from the due date until paid. Use Interest Rate Chart on Page 2, Part IV when calculating interest...... Add lines 25 and 26. Pay in full with this return......

If line 15, Column III, is less than line 24, enter refund to be received.....



PART I – TAX CREDITS (This section must be completed for any increase or decrease in the number of personal tax credits claimed on original return)							
1. Number of person	nal tax credits claimed on o	riginal return	(Form 740, S	ection B, lin	es 3A and 3	BB)	
Number of personal tax credits claimed on this return							
3. Difference							
Explain any differenc	e in detail below. Include n	ame and Socia	al Security n	umber.			
PART II – FAMILY SIZE	TAX CREDIT (This section original retu		mpleted for	any increas	se or decrea	ase to Total Family	Size claimed on
4. Total Family Size	claimed on original return	1	2	:	3 🔲	4 or more	
5. Total Family Size	claimed on this return	1	2		3	4 or more	
Explain any difference	e in detail below. Include r	name and Soci	ial Security	number.			
PART III – CHANGES	Explain changes to incom corrected Kentucky and/o	r federal forms	s, schedules	or W-2s.			ach additional or
PART IV – INTEREST F	ATE CHART - Use the follo	wing rates wh	en computi	ng interest fo	or amount o	on Page 1, Line 25.	
Jan. 1, 20 Jan. 1, 20 May 1, 20 Jan. 1, 20	11–Dec. 31, 2011 – 5% 10–Dec. 31, 2010 – 5% 09–Dec. 31, 2009 – 7% 108–Dec. 31, 2008 – 10% 08–Apr. 30, 2008 – 8% 07–Dec. 31, 2007 – 8%						
the best of my knowledg	re under penalties of perjury to e and belief, it is true, correct income tax regulations will re- ler this return.	and complete. I	also underst	and and agree	that our ele	ction to file a combine	ed return under the
Your Signature (If a joint or con	nbined return, both must sign.)	Spouse's Signatu	re		Telepl	none Number (daytime)	Date Signed
Typed or Printed Name of Prepare	arer Other than Taxpayer		I.D.	Number of Prepai	rer		Date

Make check payable to: Kentucky State Treasurer.



Mail to: Kentucky Department of Revenue, Frankfort, KY 40618-0006.

Mail to: Kentucky Department of Revenue, Frankfort, KY 40619-0008.