

**KENTUCKY
ESTIMATED TAX VOUCHER
INSTALLMENT 1**

**2017 INDIVIDUAL INCOME TAX
Form 740-ES**

Due April 18, 2017

12/31/2017
Year Ending

For FISCAL year filers ONLY
FISCAL year ending ___/___/___

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Your Social Security No. _____ Spouse's Social Security No. _____
LAST NAME FIRST NAME SPOUSE'S NAME

Mailing Address (Number and Street including Apartment No. or P.O. Box) _____ Amount Paid 00

City, Town or Post Office _____ State _____ Zip Code _____

**Kentucky Department of Revenue
Frankfort, KY 40620-0009**

42A740ES0003

Make check payable to:
Kentucky State Treasurer.

DO NOT ATTACH CHECK TO VOUCHER

42A740ES (09/16)



**KENTUCKY
ESTIMATED TAX VOUCHER
INSTALLMENT 2**

**2017 INDIVIDUAL INCOME TAX
Form 740-ES**

Due June 15, 2017

12/31/2017
Year Ending

For FISCAL year filers ONLY
FISCAL year ending ___/___/___

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Your Social Security No. _____ Spouse's Social Security No. _____
LAST NAME FIRST NAME SPOUSE'S NAME

Mailing Address (Number and Street including Apartment No. or P.O. Box) _____ Amount Paid 00

City, Town or Post Office _____ State _____ Zip Code _____

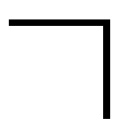
**Kentucky Department of Revenue
Frankfort, KY 40620-0009**

42A740ES0003

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42A740ES (09/16)



**KENTUCKY
ESTIMATED TAX VOUCHER
INSTALLMENT 3**

**2017 INDIVIDUAL INCOME TAX
Form 740-ES**

Due September 15, 2017

12/31/2017
Year Ending

For FISCAL year filers ONLY
FISCAL year ending ___/___/___

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Your Social Security No. _____ Spouse's Social Security No. _____
LAST NAME FIRST NAME SPOUSE'S NAME

Mailing Address (Number and Street including Apartment No. or P.O. Box) _____ Amount Paid 00

City, Town or Post Office _____ State _____ Zip Code _____

**Kentucky Department of Revenue
Frankfort, KY 40620-0009**

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42A740ES (09/16)



**KENTUCKY
ESTIMATED TAX VOUCHER
INSTALLMENT 4**

**2017 INDIVIDUAL INCOME TAX
Form 740-ES**

Due January 16, 2018

12/31/2017
Year Ending

For FISCAL year filers ONLY
FISCAL year ending ___/___/___

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Your Social Security No. _____ Spouse's Social Security No. _____
LAST NAME FIRST NAME SPOUSE'S NAME

Mailing Address (Number and Street including Apartment No. or P.O. Box) _____ Amount Paid 00

City, Town or Post Office _____ State _____ Zip Code _____

**Kentucky Department of Revenue
Frankfort, KY 40620-0009**

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42A740ES (09/16)

