

For calendar year or other taxable year beginning ______, 2010, and ending ______, 20__

KENTUCKY INDIVIDUAL INCOME TAX RETURN Full-Year Residents Only



		A. Spouse's Social Security Number	B. Your Social Security Number							
		Name—Last, First, Middle Initial (Joint or comb	pined return, give both names and initials.)							
	>									
	L A B E	Mailing Address (Number and Street or P.O. Bo	x) Apartment Number							
	L ►	City, Town or Post Office	State ZIP Code							
		FILING STATUS (see instruc	ctions)					PARTY F		
	1 2	Single	n this combined return. (If both had incor	me)		Designating \$2 wil		nange your A. Spouse	r refund or tax B. Yours	
	3	<i>Married</i> , filing joint return.		110.7		Democratic			(4)]
	4	Married, filing separate ret	urns. Enter spouse's Social Security numb	ber abo	ove	Republican	((2)	(5)]
		and full name here.				No Designation	ı ((3)	(6)	
		COME/TAX Enter amount from federal Form 10	40 line 27: 10404 line 21 er		A. g	Spouse (Use if Status 2 is checked.)		B .	Yourself (or Joint)	
	5	1040EZ, line 4. (If total of Columns A		-	i ning c					
				• 5		00	• 5	;		00
	6	Additions from Schedule M, line 8		• 6		00	• 6	;		00
	7	Add lines 5 and 6		7		00	7	,		00
	8	Subtractions from Schedule M, line	20	8		00	• 8	3		00
≥	9	Subtract line 8 from line 7. This is yo	our Kentucky Adjusted Gross Income	9		00	9)		00
Page Only	10	Itemizers: Enter itemized deduction	s from Kentucky Schedule A.							
Page		Nonitemizers: Enter \$2,210 in Colum	nns A and/or B	• 10		00	• 10)		00
Top	11	Subtract line 10 from line 9. This is y	your Taxable Income	• 11		00	• 11			00
-Staple to Top	12	Enter tax from Tax Table, Computation	on or Schedule J.	12		00	12			00
-Sta	13		_	• 13		00	• 13	3		00
Here-			here	14		00	14			00
nt H			n A, lines 19A and 19B	15		00	15	5		00
/me			15 is larger than line 14, enter zero	16		00	16	;		00
Statement(s) and Paym	17		· · ·	• 17		00	• 17	,		00
anc	18		17 is larger than line 16, enter zero	18		00	18	3		00
nt(s)	19	Add tax amount(s) in Columns A an	d B, line 18 and enter here				. 19)		00
eme	20	Check the box that represents your	total family size (see instructions before o	comple	eting li	nes 20 and 21)	. • 20	1 🗆	2 3	4 🗆
tate										00
	22	Subtract line 21 from line 19					. 22	2		00
Supporting	23	Enter the Education Tuition Tax Cred	lit from Form 8863-K				. • 23	3		00
ddng	24	Subtract line 23 from line 22					. 24	L		00
	25	Enter Child and Dependent Care Cre	edit							
Other		from federal Form 2441, line 9 > _	x 20%	o (.20) .			. • 25	5		00
2(s),	26	Subtract line 25 from line 24					. 26	5		00
Ň	27	Enter the New Home Tax Credit (see	e instructions)				. • 27	,		00
Form W-2(s),	28	Income Tax Liability. Subtract line 27	7 from line 26. If line 27 is larger than line	26, er	nter zei	ro	. 28	3		00
ч	29	Enter KENTUCKY USE TAX from wo	orksheet in the instructions				. • 29			00
Atta	30	Add lines 28 and 29. Enter here and	l on page 2, line 31				. 30			00



RE	FUND/TAX PAYMENT SUMMARY						
31	Enter amount from page 1, line 30. This is your Total Tax Liability				• 31		00
32	(a) Enter Kentucky income tax withheld as shown on attached						
	2010 Form W-2(s) and other supporting statements				00		
	(b) Enter 2010 Kentucky estimated tax payments				00		
	 (c) Enter 2010 refundable certified rehabilitation credit (KRS 141.382(1)(b)) (d) Enter 2010 film industry tax credit (KRS 141.383) 				00		
33	Add lines 32(a) through 32(d)				• 33		00
	If line 33 is larger than line 31, enter AMOUNT OVERPAID (see instructions)				34		00
	nd Contributions; See instructions.		 (Enter amou 				1.0.0
35	Nature and Wildlife Fund] Othe	r • 35		00		
36	Child Victims' Trust Fund] Othe	r • 36		00		
37	Veterans' Program Trust Fund □ \$10 □ \$25 □ \$50 □] Othe	r • 37		00		
38	Breast Cancer Research/Education Trust Fund 510 \$10 \$25 \$50] Othe	r • 38		00		
39	Add lines 35 through 38				39		00
40	Amount of line 34 to be CREDITED TO YOUR 2011 ESTIMATED TAX				• 40		00
41	Subtract lines 39 and 40 from line 34. Amount to be REFUNDED TO YOU		RE	FUND	• 41		00
42	If line 31 is larger than line 33, enter ADDITIONAL TAX DUE				• 42		00
43	(a) Estimated tax penalty and/or interest. Check if Form 2210-K attached	• 43	(a)		00		
	(b) Interest	• 43(b)		00		
	(c) Late payment penalty	• 43	(c)		00		
	(d) Late filing penalty	• 43(d)		00		
							-
44	Add lines 43(a) through 43(d). Enter here				• 44		00
	Add lines 43(a) through 43(d). Enter here Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE			OWE	• 44 45		00
	Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE		[· · · -		00
	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE Make check payable to Kentucky State Treasurer or visit www.revenue.ky.g 	ov for I	[· · · -	OFFICIAL USE ON	00 LY
	Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for I	[· · · -	OFFICIAL USE ON	00
45	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE Make check payable to Kentucky State Treasurer or visit www.revenue.ky.g 	ov for I	[OWE	· · · -	OFFICIAL USE ON B. Yourself	00 LY
45	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE Make check payable to Kentucky State Treasurer or visit www.revenue.ky.g Write your Social Security number and "KY IncomeTax-2010" on the check 	ov for I	more options.	OWE	· · · -		00 LY
45	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE Make check payable to Kentucky State Treasurer or visit www.revenue.ky.g Write your Social Security number and "KY Income Tax – 2010" on the check 	ov for i	more options.	OWE	· · · -		00 LY
45 SE	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE Make check payable to Kentucky State Treasurer or visit www.revenue.ky.g Write your Social Security number and "KY IncomeTax—2010" on the chec CTION A—BUSINESS INCENTIVE AND OTHER TAX CREDITS Enter nonrefundable limited liability entity credit (KRS 141.0401(2)) 	ov for the second secon	more options.	OWE	45		00 LY PWR
45 SE 1 2	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for the second sec	more options.	OWE 00	45		00 LY PWR 00
45 SE 1 2	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for the second sec	more options.	OWE 00	45		00 LY PWR 00 00
45 SE 1 2 3	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for 1 k.	more options.	OWE 000 000 000 000 000 000 000 000 000 0	45		00 LY PWR 00 00 00
45 SE 1 2 3 4	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for 1 k.	more options.	OWE 00 00 00 00 00	45		00 PWR 00 00 00 00 00
45 SE 1 2 3 4 5	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for 1 k.	more options.	OWE 00 00 00 00 00 00	45 1 2 3 4 5		00 LY PWR 00 00 00 00 00 00
45 SE 1 2 3 4 5 6	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for 1 k. 1 2 3 4 5 6	more options.	OWE 00 00 00 00 00 00 00	45 1 2 3 4 5 6		00 PWR 00 00 00 00 00 00 00 00
45 SE 1 2 3 4 5 6 7	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE Make check payable to Kentucky State Treasurer or visit www.revenue.ky.g Write your Social Security number and "KY IncomeTax—2010" on the check CTION A—BUSINESS INCENTIVE AND OTHER TAX CREDITS Enter nonrefundable limited liability entity credit (KRS 141.0401(2)) (attach Kentucky Schedule(s) K-1 or Form(s) 725) Enter skills training investment credit (attach copy(ies) of certification) Enter credit for tax paid to another state (attach copy of other state's return(s)) Enter recycling and/or composting equipment credit (attach Schedule RC) Enter Kentucky Investment Fund credit (attach copy(ies) of certification) 	ov for 1 k. 1 2 3 4 5 6 7	more options.	OWE 00 00 00 00 00 00 00 00	45 1 2 3 4 5 6 7		00 LY PWR 00 00 00 00 00 00 00 00
45 SE 1 2 3 4 5 6 7 8	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for 1 k. 1 2 3 4 5 6 7 8	more options.	OWE 9 00 00 00 00 00 00 00 00 00	45 1 2 3 4 5 6 7 8		00 PWR 00 00 00 00 00 00 00 00 00 0
45 SE 1 2 3 4 5 6 7 8 9	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for tk.	more options.	OWE 00 00 00 00 00 00 00 00 00 00 00	45 1 2 3 4 5 6 7 8 9		00 V PWR 00 00 00 00 00 00 00 00 00 0
45 SE 1 2 3 4 5 6 7 8 9 10 11	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for tak.	more options.	OWE 3 00 00 00 00 00 00 00 00 00 00 00 00	45 1 2 3 4 5 6 7 8 9 10 11		□ 00 □ 000
45 SE 1 2 3 4 5 6 7 8 9 10 11 12	 Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for 1 k. 1 2 3 4 5 6 7 8 9 10 11 12	more options.	OWE 3 00 00 00 00 00 00 00 00 00 00 00 00 0	45 1 2 3 4 5 6 7 8 9 10 11 12		00 PWR 00 00 00 00 00 00 00 00 00 00 00 00 00
45 SE 1 2 3 4 5 6 7 8 9 10 11 12 13 13 13 14 15 10 10 11 12 10 10 10 10 10 10 10 10 10 10	Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for 1 k. 1 2 3 4 5 6 7 8 9 10 11 12 13	more options.	OWE 9 00 00 00 00 00 00 00 00 00	45 1 2 3 4 5 6 7 7 8 9 10 11 11 12 13		00 ■ ■ ■ 00 00 00 00 00 00 00
45 SE 1 2 3 4 5 6 7 8 9 10 11 12 13 14	Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE Make check payable to Kentucky State Treasurer or visit www.revenue.ky.g Write your Social Security number and "KY Income Tax—2010" on the check CTION A—BUSINESS INCENTIVE AND OTHER TAX CREDITS Enter nonrefundable limited liability entity credit (KRS 141.0401(2)) (attach Kentucky Schedule(s) K-1 or Form(s) 725) Enter skills training investment credit (attach copy(ies) of certification) Enter nonrefundable certified rehabilitation credit (KRS 171.397(1)(a)) Enter credit for tax paid to another state (attach copy of other state's return(s)) Enter recycling and/or composting equipment credit (attach Schedule RC) Enter Kentucky Investment Fund credit (attach copy(ies) of certification) Enter coal incentive credit Enter qualified research facility credit (attach Schedule QR) Enter of the search facility credit (attach Schedule QR) Enter of the provision of the state (attach Schedule VERB) Enter of the provision of the search facility credit (attach Schedule QR) Enter of the provision of the search facility credit (attach Schedule QR) Enter of the provision of the search facility credit (attach Schedule QR) Enter of the provision of the search facility credit (attach Schedule QR) Enter of the provision of the search facility credit (attach Schedule QR) Enter biodiesel and renewable diesel credit Enter environmental stewardship credit Enter clean coal incentive credit	ov for 1 k. 1 2 3 4 5 6 7 7 8 9 10 11 12 13 14	more options.	OWE 3 3 3 3 3 3 3 3 3 3 3 3 3	45 1 2 3 4 5 6 7 7 8 9 10 11 12 13 14		00 LY PWR 00
45 SE 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 14 15 10 10 10 10 10 10 10 10 10 10	Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for 1 k. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	more options.	OWE 2 00 00 00 00 00 00 00 00 00	45 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15		00 ■ ■ ■ ■ 00 00 00 00 00 00
45 SE 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 16 16 16 16 16 16 16 16 16	Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for 1 k. 1 2 3 4 5 6 7 7 8 9 10 11 12 13 14 15 16	more options.	OWE 3 3 3 3 3 3 3 3 3 3 3 3 3	45 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16		00 LY PWR 00
45 SE 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE Make check payable to Kentucky State Treasurer or visit www.revenue.ky.g Write your Social Security number and "KY IncomeTax – 2010" on the check CTION A – BUSINESS INCENTIVE AND OTHER TAX CREDITS Enter nonrefundable limited liability entity credit (KRS 141.0401(2)) (attach Kentucky Schedule(s) K-1 or Form(s) 725) Enter skills training investment credit (attach copy(ies) of certification) Enter nonrefundable certified rehabilitation credit (KRS 171.397(1)(a)) Enter credit for tax paid to another state (attach copy of other state's return(s)) Enter recycling and/or composting equipment credit (attach Schedule RC) Enter kentucky Investment Fund credit (attach copy(ies) of certification) Enter coal incentive credit. Enter qualified research facility credit (attach Schedule QR) Enter ore dit (attach Form DAEL-31) Enter voluntary environmental remediation credit (attach Schedule VERB) Enter biodiesel and renewable diesel credit Enter environmental stewardship credit Enter celan coal incentive credit Enter celan coal incentive credit Enter ethanol credit (attach Schedule CELL) Enter energy efficiency products credit (attach Form 5695-K)	ov for 1 k. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	more options.	OWE 2 00 00 00 00 00 00 00 00 00	45 1 2 3 4 5 6 7 7 8 9 10 11 12 13 14 15 16 17		00 IV PWR 00
45 SE 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Add lines 42 and 44 and enter here. This is the AMOUNT YOU OWE	ov for 1 k. 1 2 3 4 5 6 7 7 8 9 10 11 12 13 14 15 16	more options.	OWE 3 3 3 3 3 3 3 3 3 3 3 3 3	45 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16		00 LY PWR 00

FORM 740 (2010)



SE	CTION B-PERSONAL TAX CREDITS	Check Regular	Check both i	f 65 or over Ch	neck both if blind				
1	(a) Credits for yourself:						r number of	Г	
	(b) Credits for spouse:						es checked ne 1		
2	Dependents:						r number of endents who:	_	
	First name Last name	Soc	Dependent's ial Security number	Dependent's relationship to you	Check if qualifying child for family size tax credit	• liv	ed with you		
							I not live with e instruction		
						• otł	ner depender	its	
3	Add total number of credits claimed on					3 Ente	r total credits	,[
	If married filing separately on a combin own credits from line 1, divide the crea filers enter the amount from line 3 in B	lits on line 2, and	l enter the total	s in Boxes 3A and	13B. All other		Spouse	You •3B	Irself
4						_	x \$20		x \$20
4	Multiply credits on line 3A by \$20 and e enter on line 4B. Enter here and on pag					4A		4B	χ ψ20
	CTION C-FAMILY SIZE TAX CREDIT (List ction B.)	t the name and S	Social Security r	number of qualify	ing children that a	re not clai	med as dep	benden	ts in
First	name Last name	Social Secu	rity number	First name	Last name		Social Se	curity nu	mber

First name	Last name	Social Security number		First name	Last name	Social Security number		number	
		1		I			'	I	L
							1		
		1		I				l	<u> </u>
		1		I			.	I	I.
		1		1			<u> </u>		

Attach a complete copy of federal Form 104	0 if you received farm, business, or	r rental income or loss. If not required, check here.
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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 Signatu	re (If joint or combined return, both must sign.)	Telephone Number (daytime)			
Typed or Prin	ted Name of Preparer Other than Taxpayer	I.D. Number of Preparer	Date		
Firm Name		EIN	Date		
Mail to:	REFUNDS Kentucky Depar	tment of Revenue, Frankfort, KY	40618-0006.		
	PAYMENTS Kentucky Depar	tment of Revenue, Frankfort, KY	40619-0008.		

OFFICIAL USE ONLY										
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