P.O. Box 1190

Frankfort, KY 40602-1190





2012

- > COMPLETE ONLY IF NOT FILING FEDERAL EXTENSION
- > SEE INSTRUCTIONS FOR PAYMENT REQUIREMENTS

APPLICATION FOR EXTENSION OF TIME TO FILE INDIVIDUAL, GENERAL PARTNERSHIP AND FIDUCIARY INCOME TAX RETURNS FOR KENTUCKY

INSTRUCTIONS: Taxpayers who request a federal extension are not required to file a separate Kentucky extension. The requirements may be met by attaching federal Form 4868 (automatic extension) to the Kentucky return.

Interest at the annual rate of 6 percent 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 late payment penalty charges can be avoided by remitting payment with the Extension Payment Voucher below by the due date.

Use this form if you (1) are requesting a Kentucky extension of time to file (complete Section I); (2) are requesting a Kentucky extension and desire to make a payment prior to the due date (complete Sections I and II); or (3) have a federal extension and desire only to make a Kentucky payment prior to the due date (complete and submit Section II only).

You will be notified only if the application for extension is denied. To avoid the late filing penalty, a copy of this form must be attached to your return when filed. Keep a copy for yourself.

SECTION I (P	lease print	or type name and address in block b	elow.)		
				ck type of return: Individual (740 or 740- General Partnership (7	-
				Fiduciary (741) Sec. No. or Employer	ID No.
A six-month ended		-	e tax retu	rn of the above-nam	ed taxpayer(s) for the taxable year
REASON FOR reason.)	R REQUEST	(A reason must be given before any	/ request	can be considered. Ina	bility to pay tax liability is not a valid
Signature of taxp	payer	Date		parer other than taxpayer	Date
	,	➤ Mail to: Kentucky Department of Re		. ,	′ 40602-1190 ⋖
DENIED:	☐ La	ite (postmarked after return due date	e)	Other:	
To avoid the	late filing p	enalty, a copy of this form must be	attached	o your return when fil	led. Keep a copy for yourself.
40A102 (11-12) SECTION II	Kentui	COMPLETE ONLY IF MAKING PAYME			ME TAX 2012 KENTUCKY EXTENSION PAYMENT VOUCHER
Last name	First name (joint or combined return, give bot			nd initials)	Your Social Security number
Mailing address (Number and Street including Apartment Number or P.O. Be			()		Spouse's Social Security number
City, town or post office		State		ZIP code	
•	-	ntucky State Treasurer	Enter pa	yment amount here	> \$