SCHEDULE FD

41A720FD (06-16)

Commonwealth of Kentucky



Taxable Year Ending

___ / ___ Yr.

DEPARTMENT OF REVENUE

➤ Attach to Form 720, 720S, 725, 740, 740-NP, 741, 765 or 765-GP.

FOOD DONATION TAX CREDIT

KRS 141.392

Name of Entity (Donor)		Identification Nun	Identification Number (SSN or FEIN)		Kentucky Corporation/LLET Account Number (if applicable)	
Address (Number, Street, and Roo	City, State and Zip Co	City, State and Zip Code				
Part I - Qualifications						
1. Growing fruits, veg	oonsible for and deriving getables, or other edible ry, pork, fish, or other ed	agricultural products; c			YES □ NO	
Was the edible agricultural products that is intended for and fit for human consumption raised or grown in Kentucky? □ YES □ NO						
 Was the edible agricu nonprofit food progra 	ltural products provided m operating in Kentucky				YES 🗆 NO	
If you answered "No" to an If you answered "Yes" to al			qualify for this cre	dit.		
Part II - Information on Don	ated Food -To be compl	eted by taxpayer makin	g the donation a	nd/or donee		
☐ Fruits ☐ Vegetables ☐ Pork ☐ Fish			☐ Beef ☐ Other edible product		Poultry	
A Description of Donated Food	B Date Donated	C Quantity of Donation	D Fair Market f Per Unit of Me		E Fair Market Value Itiply Column C by Column D	
1.				1	00	
2.				2	00	
3.				3	00	
4. 5.				5	00	
6.				6	00	
	of donation (add Co	lumn E lings 1 throug	 ab 6)		00	
7. Total fair market value of donation (add Column E, lines 1 through 6)					00	
9. Total fair market value of donation less reimbursements (subtract line 8 from line 7)					00	
10. Credit percentage					10%	
11. Credit amount. Multiply line 9 by line 10					00	
12. Enter the unused prior year carryforward amount from the total line of the Carryforward Worksheet					00	
13. Total credit amount (add lines 11 and 12). Enter result here and on applicable form or schedule					00	
Part III - Taxpayer (Donor) S	tatement					
l, the undersigned, declar and fair market values in			-	vledge and be	elief, the information	
Signature of Taxpayer (Donor) Date				9		
 Type Name and Title of Pe	rson SigningThis Docume	nt				



INSTRUCTIONS—SCHEDULE FD

PURPOSE OF SCHEDULE—This schedule is used by a qualified taxpayer (donor) who provides free of fee or charge edible agriculture products to a nonprofit food program operating in Kentucky as provided by KRS 141.392.

For taxable years beginning on or after January 1, 2014, but before January 1, 2018, any donor shall be allowed a nonrefundable credit (food donation tax credit) against the tax imposed by KRS 141.020 or 141.040 and 141.0401, with the ordering of credits as provided by KRS 141.0205, in the amount equal to ten percent (10%) of the value of the donated edible agricultural products. A qualified taxpayer claiming the food donation tax credit shall attach this schedule to the applicable tax return.

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. KRS 141.392

A qualified taxpayer that is a pass-through entity not subject to the tax imposed by KRS 141.040 shall apply the food donation tax credit against the limited liability entity tax imposed by KRS 141.0401, and shall distribute the amount of the approved tax credit to each partner, member or shareholder based on the partner's, member's or shareholder's distributive share of income as determined for the taxable year during which the tax credit is approved, with the ordering of credits as provided by KRS 141.0205.

A tax credit not used by a qualified taxpayer in the current taxable year may be carried forward for up to four (4) succeeding years.

GENERAL INSTRUCTIONS

Part I – Qualifications

Answer the questions provided in Part I and proceed to Part II if applicable.

Part II - Information on Donated Food

Check the box that best describes the donated food. If the box for "Other edible product" is checked, describe the product in the space provided.

Lines 1 through 6—Enter the following: Column A, the description of the item of food being donated; Column B, the date donated; Column C, the quantity of the food item; Column D, the fair market price of each unit of measure; and Colum E, the total fair market value.

Attach a separate schedule if more than 6 items are being donated.

KRS 141.392(3)(b) provides that a donor shall determine the value of the donated edible agriculture products as follows: (i) if there was a previous sale of the edible agriculture products to a buyer, the donor shall retain a copy of an invoice or other statement identifying the price received by the donor for the edible agriculture products of comparable grade and quality; or (ii) If there is no previous sale to a buyer, the donor shall on the date of the donation, determine the value of the donated edible agriculture products based on the fair market value as

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determined by average weekly regional produce auction prices or United States Department of Agriculture prices for meat, fish and dairy products.

Line 7—Add Lines 1 through 6.

Line 8—Reimbursements received from all sources, such as any reimbursed costs of picking or transporting the donated food.

Line 9—Subtract Line 8 from Line 7.

Line 11—Multiply Line 9 by Line 10.

Line 12— Enter the unused prior year carryforward amount from the total line of the Carryforward Worksheet.

Carryforward Worksheet

The Kentucky food donation tax credit can be carried forward for up to 4 years if unused during the preceding tax year(s). You must have completed Schedule FD for any prior year(s) in which you are claiming a credit carryforward.

2016 Carryforward Worksheet A. Credit carryforward from 2014 to 2016 ______ B. Credit carryforward from 2015 to 2016 ______ C. Total carryforward

Line 13—Add Lines 11 and 12. Enter the amount on this line and the applicable tax form or schedule. In order to claim the credit, this schedule must be attached to the applicable tax return.

Part III – Taxpayer (Donor) Statement

The taxpayer (donor) or the representative of the taxpayer shall certify that the information and fair market values included in Part I are true, correct and complete. Enter the date signed, and type the name and title of person signing this document in the spaces provided. Failure to sign the schedule or to provide all information may result in the disallowance of the tax credit.

Part IV – Donee Acknowledgement

The representative of the charitable organization (donee) shall certify that the charitable organization is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code, certify that it operates a surplus food collection and distribution program as defined in KRS 141.392(1)(c), and certify that the information included in the schedule is true, correct and complete. Enter the name, Employer Identification Number, and address of the charitable organization in the spaces provided. Also, enter the title of person signing this document and the date in the spaces provided. Failure to sign the schedule or to provide all information may result in the disallowance of the tax credit.