

The Kentucky Department of Revenue presented the following information at University of Kentucky Income Tax Seminars across the Commonwealth at the end of 2018. These seminars covered recent administrative changes at the Department of Revenue as well as practical income tax preparation and compliance information.

The information in this presentation was prepared from information the Department of Revenue possessed and believed to be accurate and relevant on the date of the meeting. This information does not constitute a final ruling, order, or determination of the Department of Revenue and cannot be appealed.



2018 KENTUCKY STATE TAX UPDATE

UK Income Tax Seminar

Agenda

- House Bill 487
- IRC and TCJA Conformity
- Individual Income Tax
- Withholding Tax
- Corporate Income Tax
- Tax Credits
- Property Tax
- Sales and Excise Taxes TaxAnswers.ky.gov
- Miscellaneous



House Bill 487

Became Law on April 27, 2018

- Most substantial Kentucky tax law changes since 2006
- Sales and Excise taxes changes not covered here
- Effective Dates:
 - January 1, 2018
 - Flat 5% income tax rate for individuals and corporations
 - Elimination of many individual income tax deductions
 - IRC conformity for income tax updated to December 31, 2017 including the TCJA (Pub. L. 115-97)
 - Single sales factor
 - Market-based sourcing
 - January 1, 2019
 - Unitary combined reporting and elective consolidated group filing



IRC and TCJA Conformity

- IRC conformity date now December 31, 2017
- Tax Cuts and Jobs Act (TCJA) provisions adopted with IRC conformity
- Kentucky Adopted from TCJA:
 - Net Operating Loss changes (IRC §172)
 - Net Interest Expense limitation (IRC §163(j))
 - Domestic Production Activity Deduction repeal (IRC §199)
 - Foreign Derived Intangible Income-FDII (IRC §250)
 - Moving Expense Deduction repeal (IRC §132)
 - Moving Expense Reimbursement Exclusion repeal (IRC §217)
 - Alimony Payment Deduction repeal (IRC §215)
 - Alimony Received Inclusion repeal (IRC §61)
- Kentucky Decoupled from TCJA:
 - Full Depreciation Expensing (IRC §168(k))
 - Pass-Through Entity Qualified Business Income (QBI) deduction (IRC §199A)



Effective January 1, 2018

- Flat tax rate of 5% for all individuals
- Pension exclusion decreased to \$31,110 from \$41,110
- \$10 personal tax credit for taxpayers and dependents eliminated
- Retained personal tax credits for ages 65+, blind, and National Guard
- Adjustments Eliminated:
 - Deduction for health insurance premiums
 - Deduction for long-term care insurance premiums
 - Master Tobacco Settlement Payments
 - Deduction for homeless shelter leasehold interest donation
- STABLE investment income now tax exempt



- Dollar limit cap on itemized deductions (Pease Limitation) eliminated
- Itemized Deductions Maintained:
 - Home mortgage interest, points, and qualified MIP
 - Charitable contributions
 - Several miscellaneous deductions:
 - Amortizable premium on taxable bonds (IRC §171)
 - Federal estate tax on Income in Respect of a Descendent (IRC § 691)
 - Repayments >\$3,000 under a claim of right (IRC §1341)
 - Unrecovered investment in an annuity (IRC §72)
 - Other activities loss from Schedule K-1 (Form 1065-B), box 2



- Itemized Deductions Eliminated:
 - Investment interest (IRC §163)
 - Taxes (IRC §164)
 - Casualty/theft and gambling losses (IRC §165)
 - Medical and dental expenses (IRC §213)
 - Moving expenses (IRC §217)
 - 2% AGI miscellaneous deductions (IRC §67)



- Form Changes
 - Eliminated Form 740-EZ
 - Eliminated Schedule ME
 - 740 and 740-NP were shortened and rearranged
 - Simplified Schedules A (itemized) and M (federal modifications)
 - New Schedule ITC for individual tax credits
 - Nonrefundable business incentive credits
 - Personal tax credits (65 or over, blind, National Guard)
 - Qualifying dependent children and claiming family size tax credit



Form 740

| 2 | /40 IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII | | INI | DIVID | DUAL II | ENTUCKY NCOMETAX RETU dents Only | RN | | 201 | 8 |
|--|--|---|--|--|----------------------|--|--|------------|-------------------------------------|---|
| Cho | ck if deceased: Spouse Taxpayer | For cale | ndar year or ot | her ta | xable ye | ar beginning, | 2018, | and ending | , 2 | 0 |
| _ | A. Spouse's Social Security Number | B. Your Social Security N | umber | | | | | | | |
| | 1 1 | 1 1 | | | | | | | | |
| Na | ame—Last, First, Middle Initial (Joint or combine | d return, give both names and initial | s.i | | | | | | | |
| М | alling Address (Number and Street including Apa | ertment Number or PO. Box) | | | | | | | | |
| Cit | ty, Town or Post Office | State | ZIP Code | | | | | | | |
| | | rns. Enter spouse's | Check if application | ed (E 1040) | nclose | POLITICAL PARTY Designating \$2 will r Democratic Republican No Designation | A. (1 | | refund or to B.You (4) (5) | rself |
| NC | COME/TAX | | | П | Α. | Spouse (Use if | П | В. | Yourself | |
| 5 | Enter amount from federal Form 10- | | | | Filing S | Status 2 is checked.) | ш | (| or Joint) | |
| | and B is \$33,383 or less, you may que Credit. See instructions.) | | | 5 | | 00 | 5 | | | 00 |
| 6 | | | | | | 00 | | | | 00 |
| | Additions from Schedule M, line 6 Add lines 5 and 6 | | | 7 | | 00 | 7 | | | 00 |
| | Subtractions from Schedule M, line | | | 8 | | 00 | 8 | | | 00 |
| | Subtractions from Schedule M, line Subtract line 8 from line 7. This is yo | | | 9 | | 00 | 9 | | | 00 |
| | Itemizers: Enter itemized deduction | | | 9 | | 00 | 9 | | | - |
| | Nonitemizers: Enter \$2,530 in Colum | | | 10 | l | 00 | 10 | | | 00 |
| 11 | Subtract line 10 from line 9. This is y | | | 11 | | 00 | 11 | | | 00 |
| 12 | Tax Computation: Multiply line 11 b | y 5% (.05) or from Schedule | J 🗆 | 12 | | 00 | 12 | | | 00 |
| | Enter tax from Form 4972-K ☐; Schedule DS-R ☐; Angel Investor | | | 13 | | 00 | 13 | | | 00 |
| 13 | | | | | | 100 | 1000 | | | 00 |
| | | | | 14 | | 00 | 14 | | | |
| 14 | Add lines 12 and 13 and enter total Enter amounts from Schodule ITC, S | here | | 14 15 | | 00 | 14 | | | 00 |
| 14 | Add lines 12 and 13 and enter total | here Section A, lines 24E and 24F | | | | 00 | | | | - |
| 14 15 16 | Add lines 12 and 13 and enter total Enter amounts from Schodule ITC, 5 | here | er zero | 15 | | | 15 | | | 00 |
| 14 15 16 | Add lines 12 and 13 and enter total Enter amounts from Schodule ITC, 8 Subtract line 15 from line 14. If line Enter personal tax credit amounts from | here | er zero es 3A and 3B | 15 16 | | 00 | 15 | | | 00 |
| 14 15 16 17 | Add lines 12 and 13 and enter total Enter amounts from Schodule ITC, Subtract line 15 from line 14. If line Enter personal tax credit amounts fror Note: Use only if 65 or over, blind, or | here Section A, lines 24E and 24F 15 is larger than line 14, ent in Schedule ITC, Section B, lin in Kentucky National Guard. 17 is larger than line 16, ent | er zero es 3A and 3B | 15 16 17 | | 00 00 00 | 15 16 17 | | | 00 |
| 14 15 16 17 18 | Add lines 12 and 13 and onter total Enter amounts from Schodule ITC, Subtract line 15 from line 14. If line Enter personal tax credit amounts fron Note: Use only if 65 or over, blind, or Subtract line 17 from line 16. If line | here | er zero es 3A and 3B er zero | 15 16 17 18 | | 00 00 00 | 15 16 17 | 1 2 | : 3 - | 00 |
| 14 15 16 17 18 19 | Add lines 12 and 13 and enter total Enter amounts from Schedule ITC, & Subtract line 15 from line 14. If line Enter personal tax cradit amounts fror Note: Use only if 65 or over, blind, or Subtract line 17 from line 16. If line Add tax amount(s) in Columns A an | here | er zero es 3A and 3B er zero | 15 16 17 18 | leting li | 00 00 00 | 15 16 17 18 19 | 1 2 | :D 3D | 00 |
| 14 15 16 17 18 19 20 21 | Add lines 12 and 13 and enter total Enter amounts from Schedule ITC, & Subtract line 15 from line 14. If line Enter personal tax credit amounts from Note: Use only if 65 or over, blind, or Subtract line 17 from line 16. If line Add tax amount(s) in Columns A an Check the box that represents your | here | er zero er zero er zero tions before | 15 16 17 18 comp | leting li m Sche | 00 00 00 00 00 | 15 16 17 18 19 20 | 1 🗆 2 | 2 3 0 | 00 00 00 4 [|
| 14 15 16 17 18 19 20 21 | Add lines 12 and 13 and onter total Enter amounts from Schodule ITC, 5 Subtract line 15 from line 14. If line Enter personal tax credit amounts from Note: Use only if 85 or over, blind, or Subtract line 17 from line 16. If line Add tax amount(s) in Columns A and Chack the box that represents your Multiply line 19 by Family Size Tax C | here | er zero as 3A and 3B er zero tions before | 15 16 17 18 comp | leting li m Sche | 00 00 00 00 00 | 15 16 17 18 19 20 21 | 1 2 | : 3 🗆 | 00 00 00 4 [|
| 14 15 16 17 18 19 20 21 22 23 | Add lines 12 and 13 and onter total Enter amounts from Schodule ITC, \$ Subtract line 15 from line 14. If line Inter personal tax credit amounts fron Note: Use only if 65 or over, blind, or Subtract line 17 from line 16. If line Add tax amount(s) in Columns A an Check the box that represents your Multiply line 19 by Family SizeTax & Subtract line 21 from line 19 | here Section A, lines 24E and 24F 15 is largor than line 14, ent Schedule ITC, Section B, lin in Kantucky National Guard. 17 is largor than line 16, ent d B, line 18 and enter here. Lotal family size (see instruc- redit decimal amount it from Form 8883-K | er zero es 3A and 3B er zero tions before | 15 16 17 18 comp | leting li m Schei | 00 00 00 00 00 | 15 16 17 18 19 20 21 22 | 1 🗆 2 | t 3 O | 00 00 00 4 [00 00 |
| 14 15 16 17 18 19 20 21 22 23 24 | Add lines 12 and 13 and enter total Enter amounts from Schodule ITC, \$ Subtract line 15 from line 14. If line Enter personal tax cradit amounts from Note: Use only if 55 or over, blind, or Subtract line 17 from line 16. If line Add tax amounts[s] in Columns A an Check the box that represents your Multiply line 19 by Family Size Tax C Subtract line 21 from line 19 | here Section A, lines 24E and 24F 15 is larger than line 14, ont Schedule ITC, Section B, lin in Kentucky National Guerd. 17 is larger than line 16, ent d B, line 18 and enter here. It als the line 16 and the cotal in the line 16 and the cotal interest of the line 16 and the cotal interest of the line 18 and enter here. It from Form 8883-K | er zero as 3A and 3B er zero tions before | 15 16 17 18 | leting li | 00 00 00 00 00 | 15 16 17 18 19 20 21 22 23 | 1 2 | :□ 3□ | 00 00 00 4 [00 00 00 |
| 14 15 16 17 18 19 20 21 22 23 24 25 | Add lines 12 and 13 and onter total Entor amounts from Schodulo ITC, 5 Subtract line 15 from line 14. If line Inter personal tax cradit amounts fron Note: Use only if 65 or over, blind, or Subtract line 17 from line 16. If line Add tax amounts) in Columns A an Chack the box that represents your Multiply line 19 by Family Size Tax C Subtract line 21 from line 19. Entor the Education Tuitton Tax Crade Subtract line 22 from line 22 | here | er zero es 3A and 3B or zero tions before | 15 16 17 18 comp | leting li | 00 00 00 00 00 | 15 16 17 18 19 20 21 22 23 24 | 1 2 | :□ 3□ | 00 00 00 00 4 [00 00 00 00 |
| 14 15 16 17 18 19 20 21 22 23 24 25 | Add lines 12 and 13 and onter total Entor amounts from Schodule ITC, \$ Subtract line 15 from line 14. If line Inter personal tax credit amounts from Note: Use only if 65 or over, blind, or Subtract line 17 from line 16. If line Add tax amount(s) in Columns A an Check the box that represents your Multiply line 19 by Family Size Tax C Subtract line 21 from line 19. Entor the Education Tuition Tax Cred Subtract line 21 from line 22. Entor Child and Dependent Care Ctr from federal Form 2441, line 9 > | here Section A, lines 24E and 24F 15 is largor than line 14, ent Schedule ITC, Section B, lin in Kantucky National Guard. 17 is largor than line 16, ent d B, line 18 and enter here, total family size (see instructed if decimal amount it from Form 8863-K | or zero ss 3A and 3B or zero ttions before (% | 15 16 17 18 18 comp is (.20) | m Schei | 00 00 00 00 00 00 00 unes 20 and 21)tule ITC. | 15 16 17 18 19 20 21 22 23 24 | 1 2 | :□ 3□ | 000 000 000 000 000 000 000 000 000 |

| | | | | | | | | _ | |
|--|--|--|--|--|--|---|--|--|--|
| | | X PAYMENT SUMMA | | | | | | | 00 |
| | | | | | ability | | | 29 | |
| | | | | - | al return | | | 30 | 00 |
| | | | | | | | | 31 | 00 |
| 32 | | r Kentucky income to | | | losed | 32a | | 00 | |
| | | | | | | 32b | | 00 | |
| | | | | | | 32c | | 00 | |
| | d For | mended return; ente | er amount paid | with original r | eturn plus | | | | |
| | addi | tional payment(s) ma | ade after it was | filed | | 32d | | 00 | |
| 33 | Add line | s 32(a) through 32(d) |) | | | | | 33 | 00 |
| 34 | If line 31 | is larger than line 33 | 3, subtract line 3 | 3 from line 31 | , enter ADDITIONALTA | X DUE | | 34 | 00 |
| 35 | a Estir | nated tax penalty | Check if Fo. | m 2210-K atta | ched | 35a | | 00 | |
| | | | | | | 35b | | 00 | |
| | | | | | | 35c | | 00 | |
| | | | | | | 35d 35e | | 00 | |
| 25 | | | | | | _ | | 36 | 00 |
| | | | | | t line 33 from the total of | | | 30 | 00 |
| 31 | | | | | t line 33 from the total t | | | 37 | 00 |
| 38 | | | | | n line 33. This is the AM | | | 38 | 00 |
| | | ntributions; see instr | | | | | | | |
| a | Nature a | nd Wildlife Fund | | | Farms to Food Banks Trus | st Fund | | 00 | |
| Ь | Child Vic | tims' Trust Fund | | | ocal History Trust Fund. | | | 00 | |
| | | Program Trust Fund | | | Special Olympics Kentuc | | | 00 | |
| d | | n Trust Fund | | | Pediatric Cancer Research | | | 00 | |
| | Educatio | n Irust Fund | | 00 1 | Rape Crisis Center Trust F | | | 00 | |
| | | | | i (| Court Appointed Special | Advocate | | | |
| | | | | | Court Appointed Special | | | 00 | |
| 40 | Add line | s 39(a) through 39(j) | | 1 | | | | 40 | 00 |
| | Amount | of line 38 to be CREI | DITED TO YOUR | 2019 ESTIMA | frust Fund | | | | 00 |
| 41 | Amount (Credit f | of line 38 to be CREI orwards not available | DITED TO YOUR e for amended r | 2019 ESTIMAT | TEDTAX | CRE | EDIT FORWARD | 40 | 00 |
| 41 | Amount (Credit for Subtract | of line 38 to be CREI orwards not available lines 40 and 41 from | DITED TO YOUR e for amended r n line 38. Amour | 2019 ESTIMAT eturns) at to be REFUI | frust Fund | CRE | DIT FORWARD | 40 | |
| 41 | Amount (Credit for Subtract REFUND | of line 38 to be CREI orwards not available lines 40 and 41 from OPTIONS (Not avail | DITED TO YOUR e for amended r n line 38. Amour lable for amend | 2019 ESTIMAT eturns) nt to be REFUI ed returns) | FEDTAX | CRE | EDIT FORWARD REFUND | 40 | 00 |
| 41 42 | Amount (Credit for Subtract REFUND Check he | of line 38 to be CREI brwards not available lines 40 and 41 from OPTIONS (Not avail are if you would like | DITED TO YOUR e for amended r n line 38. Amour lable for amend your refund issu | 2019 ESTIMAT eturns) at to be REFUI ed returns) and on a Bank | TEDTAX | CRE | EDIT FORWARD REFUND | 40 | 00 |
| 11 | Amount (Credit for Subtract REFUND Check he Check he | of line 38 to be CREI orwards not available. lines 40 and 41 from OPTIONS (Not available if you would like are if you would like | DITED TO YOUR e for amended r n line 38. Amour lable for amend your refund issu to receive your | 2019 ESTIMAT eturns) at to be REFUI ed returns) red on a Bank Debit Card ma | TEDTAX NDEDTO YOU of America Prepaid Delaterial in Spanish | CRE | EDIT FORWARD REFUND | 40 41 42 | 00 |
| 41 42 I, ar | Amount (Credit for Subtract REFUND Check he Check he the under the under the to the | of line 38 to be CREI orwards not available. lines 40 and 41 from OPTIONS (Not available are if you would like ore if you would like ore igned, declare und best of my knowled | DITED TO YOUR e for amended r n line 38. Amoun lable for amend your refund issu to receive your der penalties of lige and belief, it | 2019 ESTIMAT eturns) ht to be REFUI ed returns) ded on a Bank Debit Card ma perjury that I is true, corre | red Fund | bit Card | REFUND ding all accompany | 40 41 42 | 00 00 fulles and statements, on to file a combined |
| 1, ar re | Amount (Credit for Subtract REFUNE Check he Check he the under the under the under the under the under | of line 38 to be CREI orwards not available lines 40 and 41 from OPTIONS (Not available ere if you would like resigned, declare unc best of my knowled er the provisions of l | DITED TO YOUR e for amended r n line 38. Amour lable for amend your refund issu to receive your der penalties of lige and belief, it Regulation 103 i | 2019 ESTIMAT eturns) it to be REFUI ad returns) sed on a Bank Debit Card ma beit true, corre tAR 17:020 wi | FEDTAX NDEDTOYOU of America Prepaid Delaterial in Spanish | bit Card | REFUND ding all accompany | 40 41 42 | 00 00 fulles and statements, on to file a combined |
| 41 42 I, an | Amount (Credit fi Subtract REFUND Check he Check he the under the under to the sturn under do severa | of line 38 to be CREI orwards not available. lines 40 and 41 from OPTIONS (Not available are if you would like ore if you would like ore igned, declare und best of my knowled | DITED TO YOUR e for amended r n line 38. Amour lable for amend your refund issu to receive your der penalties of lige and belief, it Regulation 103 i | 2019 ESTIMAT eturns) it to be REFUI ad returns) sed on a Bank Debit Card ma beit true, corre tAR 17:020 wi | red Fund | bit Card urn, incluiundersta | REFUND ding all accompany | 40 41 42 ting sched | 00 00 fulles and statements, on to file a combined |
| I, ar re ar | Amount (Credit fi Subtract REFUND Check he Check he the under the under to the sturn under d severa | of line 38 to be CREI orwards not available lines 40 and 41 from o OPTIONS (Not avail ore if you would like ore if you would like rsigned, declare unc best of my knowled or the provisions of lally liable for all taxes | DITED TO YOUR e for amended r n line 38. Amour lable for amend your refund issu to receive your der penalties of lige and belief, it Regulation 103 i | 2019 ESTIMAT eturns) it to be REFUI ad returns) sed on a Bank Debit Card ma beit true, corre tAR 17:020 wi | FEDTAX NDEDTOYOU of America Propeid Deleterial in Spunish have examined this retect and complete. I also | bit Card urn, include understa | REFUND ding all accompany nd and agree that ayable to us jointly | 40 41 42 ting sched | 00 00 tules and statements, on to file a combined tich of us being jointly |
| I, ar re ar | Amount (Credit fi Subtract REFUND Check he Check he the under the under to the sturn under do severa | of line 38 to be CREI provided to the second of the second | DITED TO YOUR e for amended r n line 38. Amour lable for amend your refund issu to receive your der penalties of lige and belief, it Regulation 103 i | 2019 ESTIMAT eturns) it to be REFUI ad returns) sed on a Bank Debit Card ma beit true, corre tAR 17:020 wi | FEDTAX NDEDTOYOU of America Propeid Deleterial in Spunish have examined this retect and complete. I also Il result in refunds bein Driver's Licenser/State Issuace | bit Card urn, include understa | REFUND ding all accompany and and agree that ayable to us jointly Date Date | 40 41 42 ting sched | 00 00 tules and statements, on to file a combined tich of us being jointly |
| I, ar re ar | Amount (Credit fi Subtract REFUND Check he Check he the under do to the sturn und nd severa | of line 38 to be CREI processor of the second of the secon | DITED TO YOUR e for amended r i line 38. Amour lable for amend your refund issu to receive your der penalties of lige and belief, it Regulation 103 is s accruing unde | 2019 ESTIMAT eturns) it to be REFUI ad returns) sed on a Bank Debit Card ma beit true, corre tAR 17:020 wi | FEDTAX NDEDTOYOU of America Propeid Deleterial in Spunish have examined this retect and complete. I also Il result in refunds bein Driver's Licenser/State Issuace | bit Card urn, include understa | REFUND ding all accompany and and agree that ayable to us jointly Date Date | 40 41 42 ting sched | 00 00 tules and statements, on to file a combined tich of us being jointly |
| I, ar rear rear rear rear rear rear rear | Amount (Credit fi Subtract REFUND Check he Check he the under do to the sturn under do several | of line 38 to be CREI innes 40 and 41 from OPTIONS (Not available irre if you would like re if you would like signed, declare un best of my knowled or the provisions of I signature of I tape Signature of I tape Signature of I paper Flame of Prepare Flame of Prepare or Firm | DITED TO YOUR e for amended r i line 38. Amour lable for amend your refund issu to receive your der penalties of lige and belief, it Regulation 103 is s accruing unde | 2019 ESTIMAT eturns) it to be REFUI and returns) ed on a Bank Debit Card ma perjury that II is true, corre ARR 17-020 with this return. | IFEDTAX | bit Card urn, include understa | REFUND ding all accompany and and agree that ayable to us jointly Date Date Date ID Number | 40 41 42 42 ving sched our election and in ea | 00 00 tules and statements, on to file a combined sch of us being jointly choice (daytime) |
| I, arrear | Amount (Credit fi Subtract REFUND Check he Check he the under do to the sturn under do several | of line 38 to be CREI processor of the second of the secon | DITED TO YOUR e for amended r i line 38. Amour lable for amend your refund issu to receive your der penalties of lige and belief, it Regulation 103 is s accruing unde | 2019 ESTIMAT eturns) it to be REFUI and returns) ed on a Bank Debit Card ma perjury that II is true, corre ARR 17-020 with this return. | FEDTAX NDEDTOYOU of America Propeid Deleterial in Spunish have examined this retect and complete. I also Il result in refunds bein Driver's Licenser/State Issuace | bit Card urn, include understa | REFUND ding all accompany and and agree that ayable to us jointly Date Date | 40 41 42 42 42 42 42 Taken | 00 00 lules and statements, on to file a combined tho of us being jointly obtains flumber (daytimes) withis preparer? |
| I, arreares He | Amount (Credit fi Subtract REFUND Check he Check he the under do to the sturn und do severe gn are | of line 38 to be CREI rines 40 and 41 from OPTIONS (Not evail) rines 40 and 41 from OPTIONS (Not evail) rer if you would like rer if you would like resigned, declare une best of my knowled or the provisions of live Segnature of Expayer Segnature of Expayer Segnature of Expayer Email Include a complete Include a complete | DITED TO YOUR for amended r in line 38. Amount lable for amend your refund isst to receive your fer penalties of fige and belief, if Regulation 103 is a secruing unde | 2019 ESTIMA* returns) to be REFUI ad returns) to be REFUI ad returns) to do n a Bank Debit Card ma perjury that II is true, corre cAR 17.020 with r this return. | Inst Fund | bit Card urn, inclu understa ig made p d ID No. | REFUND Iding all accompany and and agree that ayable to us jointly Date Date May the DOB discuss the agree of the agre | 40 41 42 ring schedour electric and in each our electric and in each electric and electr | 00 00 lules and statements, on to file a combined tho of us being jointly obtains flumber (daytimes) withis preparer? |
| I, ar re ur Si He | Amount (Credit fi Subtract REFUND Check he Check he the under do to the sturn under do several | of line 38 to be CREI rotation of available lines 40 end 41 fron OPTIONS (Not avail ore if you would like resigned, declare unc best of my knowled or the provisions of filly liable for all toxer Signature of Expeyer Signature of Expeyer Signature of Preparer or Firm Email | DITED TO YOUR of or amended re inition 38. Amount lable for amended your refund issue to receive your fer penalties of fage and belief, it fage and belief, it secruting unde | 2019 ESTIMA* returns) to be REFUI ad returns) to be REFUI ad returns) to do n a Bank Debit Card ma perjury that II is true, corre cAR 17.020 with r this return. | Inst Fund | bit Card um, inclue understa g made p | REFUND ding all accompany and and agrace that aways bell to us jointly Date Date Date May the DOR discuss the same of the | 40 41 42 ring schedour electric and in each our electric and in each electric and electr | Itules and statements, on to file a combined of the order |
| I, arreares He | Amount (Credit fi Subtract REFUND Check he Check he the under do to the sturn und do severe gn are | of line 38 to be CREI processor of the second of the secon | DITED TO YOUR of or amended re inition 38. Amount lable for amended your refund issue to receive your fer penalties of fige and beliof, it fige and beliof, it security your need to be the security your fer penalties of fige and beliof, it fige and beliof, it fige and beliof, it fige and beliof, it fige and the security fige and | 2019 ESTIMA's turns) It to be REFUI dd returns) od on a Bank Debit Card ma perjury that II is true, corre- ka 17:020 with this return. | Inst Fund | bit Card urn, incluurndersta g made p d ID No. d ID No. | Date Date May the DOR discuss the Norticely Resource of the Norticely | 40 41 42 ling schedour electic and in each election with the schedour election and the schedour election an | Itules and statements, on to file a combined of the order |



Schedule ITC - Kentucky Individual Tax Credit Schedule

| nte | r name(s) as sho | own on tax return. | | Your Social | Security N | lumber | |
|-----------|------------------------------|---|--|-----------------------------|----------------------------|---------------|--------------------|
| | | | | | | | |
| SEC | TION A – BUSI | NESS INCENTIVES AND OTHER TAX CREE | DITS | | | | |
| А | B Preapproval Required | C Credit Name | D Required Attachment | E Spouse | | F Yourself | Γ |
| 1 | No | Nonrefundable Limited Liability Entity | Kentucky Limited Liability Entity Tax Cre Worksheet/Schedule | | 00 | | |
| 2 | Yes | Kentucky Small Business | Schedule K-1 | N-1 | 00 | | 00 |
| 3 | Yes | Skills Training Investment | Schedule K-1 | | 00 | | 00 |
| 4 | Yes | Certified Rehabilitation | Certification Copies | | 00 | | 00 |
| 5 | No | Tax Paid to Another State | Copy(ies) of Other St return or Worksheet A | | 00 | | 00 |
| 6 | No | Unemployment | Schedule UTC | | 00 | | 00 |
| 7 | Yes | Recycling/Composting Equipment | Schedule RC | | 00 | | 00 |
| 9 | Yes No | Kentucky Investment Fund Qualified Research Facility | KEDFA notification Schedule QR | _ | 00 | | 00 |
| 10 | No No | GED Incentive | Form DAEL-31 | | 00 | | 00 |
| 11 | Yes | Voluntary Environmental Remediation | Schedule VERB | _ | 00 | | 00 |
| 12 | Yes | Biodiesel | Schedule BIO | | 00 | | 00 |
| 13 | Yes | Clean Coal Incentive | Schedule CCI | | 00 | | 00 |
| 14 | Yes | Ethanol | Schedule ETH | | 00 | | 00 |
| 15 | Yes | Cellulosic Ethanol | Schedule CELL | | 00 | | 00 |
| 16 | No | Railroad Maintenance & Improvement | Schedule RR-I | | 00 | | 00 |
| 17 | Yes | Endow Kentucky | Schedule ENDOW | | 00 | | 00 |
| 18 | Yes | New Markets Development Program | Form 8874(K)-A | | 00 | | 00 |
| 19 | No | Food Donation (Carryover only) | Schedule FD Schedule DS | | 00 | | 00 |
| 21 | No Yes | Distilled Spirits Angel Investor | Certification Letter | _ | 00 | | 00 |
| 22 | Yes | Film Industry | Film Office Certification | on | 00 | | 00 |
| 23 | No | Inventory | Schedule INV | 011 | 00 | | 00 |
| 24 SEC | page 1, lir on Form 7 | Other Tax Credits (add lines 1 through 23). Ene 15, Columns A and B, or enter combine 740-NP, page 1, line 15 | d totals of Columns E and | d F | 00 Centucky I | National Guar | 00 r d . |
| | | Check all four if 65 or over | | n for Kentucky nal Guard | | | |
| | (a) Crodits for yo | pursolf: | 0000 | 1 1 | nter numbe ooxes checke | be | _ |
| | | | | | | | |
| | own credits from | separately on a combined return (Filing Status 2 n line 1, and enter the totals in Boxes 2A and 2B | . All other filers enter the an | nount from | Spouse 2A | Yoursel 2B | f |
| | | | | | | 1 | |
| • | enter on line 3B. | on line 2A by \$10 and enter on line 3A. Multiply Enter here and on Form 740, page 1, line 17, Co | lumns A and B (Form 740-NF | 9 | ж \$ * | 10 x \$ | :10 |
| | page 17 me 17 m | | | | | 100 | |

| ECTION C-F | MIIV SIZE | TAY CREDIT | | | | | | | |
|---|--|--|---|--|--|--|---|--|--|
| nter depender | | | ize tax credi | t. See instruct | ions to dete | rmine family : | size and qua | lifying depen | dents. |
| First and Last Nam | | | Dependent's Popendent's relationship Social Socurity number to you | | | lent's iship | Check | if qualifying I for family tax credit | |
| Thist and East Han | N. | | 3001 | Social by Humber | | (0) | ,u | 90 | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Use workshoused to dete WORKS | rmine you SHEET FO | r credit perco | entage on ATION OF | the Family S MODIFIED | ize Tax Tabl GROSS II | e below. NCOME FO | R FAMILY | SIZE TAX C | |
| | | zero | | | | | | | |
| | djusted gros | ss income fron | Form 740, | page 1, line 5 | (Form 740-1 | NP, page 1, line | e 8). If zero | | |
| (c) Enter tax- | | areet from mu | | | | | | | |
| (d) Enter ame | ount of lum | | utions not in | cluded in fede | eral adjusted | d gross incom | e | | |
| (e) Enter tota | | | | | | | | | |
| (f) Enter you | | | | | | | | 101 | |
| | | | | | | | | | |
| line a). II | zero or less | s, enter zero | | | | | | (f) | |
| (g) If married | filing sepa | | nd living in t | the same hou | sehold, ente | r your spouse | 's | | |
| (g) If married Kentucky | l filing sepa adjusted gr nter zero | rate returns ar ross income fr | nd living in 1 om Form 74 | the same hou 0, page 1, line | sehold, ente 9 (Form 74 | ryour spouse D-NP, page 1, I | 's ine 9). If ze | ro | |
| (g) If married Kentucky or less, er (h) Enter am Form 497 | I filing sepa adjusted gr nter zero ount of lum 2-K) | rate returns ar ross income fr p-sum distribu | nd living in to om Form 74 utions not in | the same hou: 0, page 1, line cluded in adju | sehold, ente 9 (Form 740 usted gross | ryour spouse D-NP, page 1, I income (Kentu | 's ine 9). If z er | ro (g) | |
| (g) If married Kentucky or less, er (h) Enter and Form 497 (i) Enter total | filing sepa adjusted gr nter zero ount of lum 2-K) Il of lines (f | rate returns ar ross income fr p-sum distribu , (g) and (h) | nd living in toom Form 74 | the same hour 0, page 1, line cluded in adju | sehold, ente 9 (Form 740 usted gross | ryour spouse D-NP, page 1, I income (Kentu | 's ine 9). If z er | ro (g) | |
| (g) If married Kentucky or less, er (h) Enter am Form 497 (i) Enter tota (j) Enter the | filing sepa adjusted gr nter zero ount of lum 2-K) Il of lines (fi greater of l | rate returns ar ross income fr p-sum distribu , (g) and (h) ine (e) or (i). T | nd living in 1 om Form 74 utions not in | the same hous 0, page 1, line cluded in adju | sehold, ente 9 (Form 740 usted gross s Income. | r your spouse O-NP, page 1, I income (Kentu | 's ine 9). If ze ucky | ro (g) (h) (i) | |
| (g) If married Kentucky or less, er (h) Enter am Form 497 (i) Enter tota (j) Enter the | filing sepa adjusted gr nter zero ount of lum 2-K) Il of lines (fi greater of l | rate returns ar ross income fr p-sum distribu , (g) and (h) | nd living in 1 om Form 74 utions not in | the same hous 0, page 1, line cluded in adju | sehold, ente 9 (Form 740 usted gross s Income. | r your spouse O-NP, page 1, I income (Kentu | 's ine 9). If ze ucky | ro (g) (h) (i) | |
| (g) If married Kentucky or less, er (h) Enter am Form 497 (i) Enter tota (j) Enter the | filing sepa adjusted granter zero ount of lum 2-K) | rate returns ar ross income fr p-sum distribu , (g) and (h) ine (e) or (i). T letermine if yo | nd living in 1 om Form 74 utions not in this is your I u qualify fo | the same house 0, page 1, line ocluded in adju | sehold, ente 9 (Form 74) usted gross s Income. ize Tax Credi | r your spouse D-NP, page 1, I income (Kentu | 's ine 9). If z ei | ro (g) (h) (i) | |
| (g) If married Kentucky or less, et (h) Enter am Form 497 (i) Enter tote (j) Enter the Use this a | filing sepa adjusted gr nter zero ount of lum 2-K) | rate returns ar ross income fr p-sum distribu , (g) and (h) ine (e) or (i). T letermine if yo | nd living in toom Form 74 actions not in this is your I u qualify fo | the same house 0, page 1, line ocluded in adju | sehold, ente 9 (Form 744 usted gross s Income. ize Tax Credi | r your spouse D-NP, page 1, I income (Kentu | 's ine 9). If zer | ro (g) (h) (i) | |
| (g) If married Kentucky or less, et (h) Enter ame Form 497 (i) Enter tota (j) Enter the Use this a | filing sepa adjusted gr nter zero ount of lum 2-K) | rate returns ar ross income fr p-sum distribu , (g) and (h) ine (e) or (i). T letermine if yo | nd living in toom Form 74 utions not in his is your I u qualify fo | the same hour 0, page 1, line cluded in adju Modified Gros r the Family S tage of credit | sehold, ente 9 (Form 744 usted gross s Income. ize Tax Credi | r your spouse D-NP, page 1, I income (Kentu- it | 's ine 9). If zer | ro (g) | O-NP, line |
| (g) If married Kentucky or less, et (h) Enter am Form 497 (i) Enter tote Use this a Use this Family Size | filing sepa adjusted gr nter zero ount of lum 2-K) Il of lines (fi greater of l amount to d | rate returns ar ross income fr p-sum distribu j, (g) and (h) ine (e) or (i). T letermine if yo to determine | nd living in toom Form 74 utions not in his is your I u qualify fo | the same house 0, page 1, line cluded in adjusted Modified Gros r the Family S tage of credit Two | sehold, ente 9 (Form 74/ usted gross s Income. ize Tax Credi and enter ir | r your spouse J-NP, page 1, I income (Kentu it | 's ine 9). If zer ucky ovided on F | ro (g) | IO-NP, line |
| (g) If married Kentucky or less, et (h) Enter am Form 497 (i) Enter tote Use this a Use this Family Size | filing sepa adjusted gr nter zero ount of lum 2-K) | rate returns arcoss income from p-sum distribution, (g) and (h) ine (e) or (i). The letermine if you to determine one is not over | nd living in a common form 74 stions not in this is your I u qualify fo the percent is over | the same house, one of the same house, one of the same house, or the family Stage of credit. Two is not over | sehold, ente 9 (Form 740 usted gross s Income. ize Tax Credi and enter ir is over | r your spouse 0-NP, page 1, I income (Kentu- it | 's ine 9). If zer ucky ovided on F Four is over | ro (g) (g) (h) (i) (j) (j) | O-NP, line Credit Percentag |
| (g) If married Kentucky or less, et (h) Enter am Form 497 (i) Enter tota (j) Enter the Use this a Use this Family Size If MGI | filing sepa adjusted grater zero ount of lum 2-K) | rate returns arcoss income from the post of the composition of the com | nd living in a common form 74 vitions not in this is your I u qualify for the percent is over \$ | the same hour of the same hour of the same hour of the same hour of the same o | sehold, ente 9 (Form 74) usted gross s Income. ize Tax Credi and enter ir is over | r your spouse D-NP, page 1, I Income (Kentu- it | ovided on F | ro (g) (g) (h) (i) (j) (j) (j) or More is not over \$25,100 | O-NP, line Credit Percentag is |
| (g) If married Kentucky or less, et (h) Enter am Form 497 (i) Enter tota (j) Enter the Use this a Use this Family Size If MGI | filing sepa adjusted grater zero obunt of lum 2-K) | rate returns ar coss income fr p-sum distribu , (g) and (h) ine (e) or (i). T letermine if yo to determine One is not over \$ 12,140 12,626 | nd living in 1 om Form 74 utions not in his is your I u qualify fo the percent is over \$ 16,460 | the same hour 0, page 1, line cluded in adju- Modified Gros r the Family S tage of credit Two is not over \$16,460 17,118 | sehold, ente e 9 (Form 744 usted gross sincome. sincome. and enter ir is over \$ 20,780 | r your spouse D-NP, page 1, I income (Kentu- it | ovided on F Four is over \$ 25,100 | ro (g) | Credit Percentag is 100 |
| (g) If married Kentucky or less, et (h) Enter am Form 497 (i) Enter tota (j) Enter the Use this a Use this Family Size If MGI | filing sepa adjusted grader zero bunt of lum 2-K) | rate returns aross income from the p-sum distribution of the p-sum distribution of the termine if you to determine if you to determine is not over \$12,140 12,626 13,111 | nd living in to om Form 74 titions not in titions not in u qualify fo the percent is over \$ 16,460 17,118 | the same hour the same hour to page 1, line cluded in adjusted to the same with the same the | sehold, ente 9 (Form 744 usted gross s Income. ize Tax Credi and enter ir is over \$ 20,780 21,811 | r your spouse 3-NP, page 1, 1 ncome (Kentu- it | ovided on F Four is over \$ 25,100 26,104 | ro (g) (g) (h) (i) (j) (j) (j) form 740 or 740 or 740 or More is not over \$25,100 26,104 27,108 | Credit Percentag is 100 90 |
| (g) If married Kentucky or less, et (h) Enter am Form 497 (i) Enter tota (j) Enter the Use this a Use this Family Size If MGI | filing sepa adjusted grader set of the separate of the separat | rate returns ar coss income fr p-sum distribu (), (g) and (h) (ine (e) or (i). T letermine if yo to determine One is not over \$ 12,140 12,626 13,111 13,597 | nd living in to m Form 74 to m | the same hour 0, page 1, line cluded in adju- Modified Gros the Family S tage of credit Two is not over \$16,460 17,118 17,777 18,435 | sehold, enter sehold, enter sehold, enter sehold, enter sehold gross sincome. Selection selectio | t. the space pr hree is not over \$20,780 22,442 23,274 | ovided on F Four is over \$ 25,100 26,104 27,108 | ro (g) (g) (h) (i) (i) (j) (j) or 740 or 740 or 740 or 825,100 25,100 26,104 27,108 28,112 | O-NP, line Credit Percentag is 100 90 80 |
| (g) If married Kentucky or less, et (h) Enter am Form 497 (i) Enter tota (j) Enter the Use this a Use this Family Size If MGI | filing sepa adjusted grader set of the separate of the separat | rate returns ar oss income fr p-sum distrib. (, (g) and (h) ine (e) or (i). T i | nd living in to m Form 74 his is your I in the percent is over \$ 16,460 17,118 17,777 18,435 | the same hour on the same hour on the same hour on the same hour on the same hour of the same same same same same same same sam | sehold, enter sehold, enter sehold, enter sehold, enter sehold, enter sehold se | ryour spouse 1-NR page 1, I income (Kentu- inthe space pr hree is not over \$20,780 21,611 22,442 24,105 | ovided on F Four is over \$ 25,100 26,104 27,108 28,112 | ro (g) (h) (h) (ii) (iii) (iii) (j) (iii) (j) (j) (j) (j) (j) (j) (j) (j) (j) (j | Credit Percentag is 100 90 80 70 |
| (g) If married Kentucky or less, et (h) Enter am Form 497 (i) Enter tota (j) Enter the Use this a Use this Family Size If MGI | filing sepa adjusted gradinated g | rate returns ar oss income from the control of the | nd living in nom Form 74 utions not in his is your I u qualify fo the percent is over \$ 16,460 17,118 17,777 18,435 19,094 | the same hour 0, page 1, line Modified Gross Wodified Gross the Family S tage of credit Two is not over \$16,460 17,118 17,777 18,435 19,094 19,752 | sehold, enter 19 (Form 74) usted gross sincome. ize Tax Credi and enter ir is sover \$ | r your spouse t, I was to share the space print the space printed is not over \$20,780 & 21,611 & 22,442 & 23,274 & 24,936 & 24,936 | ovided on F Four is over \$ 25,100 26,104 27,108 28,112 29,116 | ro (g) (g) (h) (i) (i) (i) (ii) (j) (j) (j) (j) (j) (j) (j) (j) (j) (j | O-NP, line Credit Percentag is 100 90 80 70 60 |
| (g) If married Kentucky or less, et (h) Enter am Form 497 (i) Enter tote Use this a Use this Family Size | filing sepa adjusted gradinated g | rate returns ar ross income fr p-sum distrib. (, (g) and (h) inc (e) or (i). Teletermine if yo to determine One is not over \$ 12,026 13,111 13,597 14,082 14,568 15,054 | his is your I to u qualify for the percent is over \$\frac{1}{15,460}\$ 18,460 17,118 17,777 18,435 19,094 19,752 | the same hour, or, page 1, line work, or, page 1, line work, or, or, or, or, or, or, or, or, or, or | sehold, enter sehold, enter sehold, enter sehold, enter sehold se | r your spouse 1, 1 | ovided on F Four is over \$ 25,100 26,104 27,108 26,112 29,116 30,120 | ro (g) (h) (i) (ii) (iii) (iii | O-NP, line Credit Percentag is 100 90 80 70 60 50 |
| (g) If married Kentucky or less, et (h) Enter am Form 497 (i) Enter tota (j) Enter the Use this a Use this Family Size If MGI | filing sepa adjusted grid sepa a | rate returns ar ross income fr p-sum distrib. (, (g) and (h) ine (a) or (i). T etermine fry to determine from One is not over \$ 12,140 12,626 13,111 13,597 14,082 14,568 15,054 15,018 | his is your I to u qualify for the percent is over 16,460 17,118 17,777 18,435 19,052 20,410 | the same hour 0, page 1, line Wodified Gros tr the Family S tage of credit Two is not over \$16,460 17,118 17,777 18,435 19,094 19,752 20,410 20,904 | sehold, enter 9 (Form 74/ usted gross shroome. ize Tax Credi and enter in is over \$ 20,780 21,611 22,442 23,274 24,936 25,767 | t your spouse 1, I your spouse 1, I income (Kent. Income (| ovided on F Four is over \$ 25,100 26,104 27,108 28,112 30,120 31,124 | ro (9) | 0-NP, line Credit Percentag is 100 90 80 70 60 50 40 |



Form 740 - Schedule A – Kentucky Itemized Deductions

| Commonwealth of Ke Department of Record | rtudy | ULL-YEAR RESIDENTS ONL Fig. Enclose with Form 740. | | |
|---|---|--|----------------------------|------|
| Enter name(s) a | s shown on Form 740, page 1. | Your So | cial Security Num | nber |
| Interest Expense | Home mortgage interest and points reported to you on federal Form 1098 | 1 | 00 | |
| | See instructions for lines 3 and 4. Points not reported to you on federal Form 1098 | 4 | 00 00 00 > 5 | 00 |
| Contributions Note: For any contri- bution of \$250 or more, see instructions. | 6 Contributions by cash or check | 7 8 9 | 00 00 00 00 00 | 00 |
| Other Miscellaneous Deductions | 11 Other (see instructions) | | | 00 |
| Total Itemized Deductions | 12 Add lines 5, 10, and 11. Enter here | | > 12 | 00 |
| Use this sch | IDING DEDUCTIONS BETWEEN SPOUSES edule if married filing separately on a combined return. mized deductions, line 12 | | | .00 |
| 2 Percent | of income (Form 740, line 9, Column A) to total income (Form 740, | total of line 9, Columns A and | B) | % |
| 3 Percent | of income (Form 740, line 9, Column B) to total income (Form 740, | total of line 9, Columns A and | B) | % |
| 4 Percent | on line 2 times total deductions entered on line 1 (enter here and | on Form 740, line 10, Column A |) | .00 |
| | | | | |



Fraud Deterrence Measures

- Identity Quiz Reminder
 - Participants get <u>two</u> chances to pass
 - Even if the quiz is failed, a legible photo ID and a copy of wage statements can be used to confirm identity
 - For joint returns both spouses must provide information
- Statistics on Quiz Letters
 - Less than 3% of Kentucky filers have received identity quiz letters in calendar year 2018

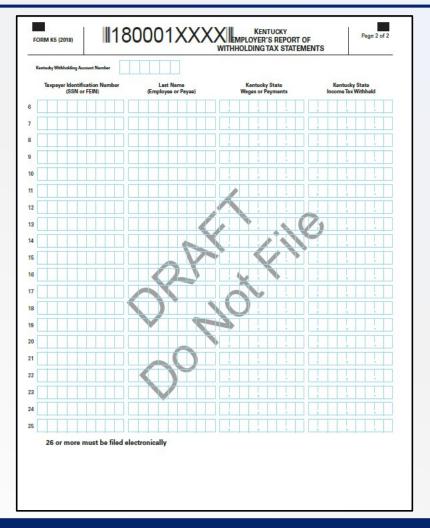


Withholding Tax

- The electronic filing threshold for withholding statements (W-2, W-2G, and 1099 Series) has been lowered from 100 to 26 forms
- DOR will no longer provide blank Forms W-2
- New Form K-5
 - Replaces mailing individual withholding statements (W-2, W-2G, and 1099 series)
 - Beginning in early 2019, the Form K-5 can be completed online and electronically submitted at https://revenue.ky.gov

Form K-5 – Kentucky Employer's Report of Withholding Tax Statements

| | III I OUUU I 🔨 🔨 Ilemployer | TAX STATEMENTS 201 |
|--------------------------|---|--|
| Kentucky Withho | lding Account Number Federal Employer Identification Number (FEIN) | |
| Business Name | | |
| M-T Address | (Number and Street including Apartment Number or PO. Box) | |
| maning Audies | presented and outset militaring appreciates resinted of 155, 5004) | |
| City, Town or Pos | t Office State ZIP Code | Telephone Number |
| Part I—Ken | tucky withholding statement code and totals. | |
| | Withholding Statement Code (see instructions) | |
| | Number of Kentucky Withholding Statements | |
| | Total Kentucky Wagos or Payments | |
| | , | |
| | Total Kentucky Income Tax Withheld | |
| Part II — Cor | nplete the table below for each statement or information return | issue <mark>d</mark> . |
| Taxpaye | r Identification Number Last Name Kontuck (SSN or FEIN) (Employee or Payee) Wages or F | |
| | | |
| , | | |
| | | |
| | | |
| 1 | | |
| 5 | | |
| Under penal | ties of perjury, I declare that I have examined this form and to the best of my knowledge an her than taxpayer) is based on all information of which preparer has any knowledge. | d belief, it is true, correct, and complete. Declaration |
| | Signatule of Taxpayer | Dute |
| Sign | Name of Expayer | Title |
| Sign Here | Signature of Preparer | Dute |
| Here | | PTIN |
| Here Paid Preparer | Name of Preparer of Firm | 1 |
| Here Paid | Name of Preparal of Film Email Telephone No. | May the DOR discuss this feturn with this preparer? |
| Here Paid Preparer | · · | May the DOR discuss this tetutor with this preparer? Vex No |





Withholding Tax

- **New** Form K-4 introduced in 2018 after HB 487
- Consolidated four forms into one
- All wage earners taxed at 5% rate with an allowance for the standard deduction
- Should only be completed if declaring for one of the exemptions or requesting additional withholding



Form K-4 – Kentucky's Withholding Certificate

| G IV. | noth of Konniky | KENTUCKY'S WITHHOLDING CERTIFICATE | 2018 |
|---|--|--|--|
| | Social Security Numb | er | <u>'</u> |
| Name-La | ast, First, Middle Initial | | |
| | | | |
| Mailing A | ddrees (Number and Street including Apartment N | (umber or P.O. Box) | |
| City, Town | or Post Office | State ZIP Code | |
| Check i | f exempt: Kentucky income tax liability | lard deduction in accordance with KRS 141.081(is not expected this year (see instructions) shell Exemption Certificate. I am a resident of | |
| | | nt military spouse exemption | State |
| | | | |
| | You work in Kentucky and res | d under agreement with employer \$ | |
| | penalties of perjury, I declare t e, correct, and complete. | that I have examined this certificate and, to the | best of my knowledge and belief, |
| | | that I have examined this certificate and, to the | best of my knowledge and belief, |
| | e, correct, and complete. | that I have examined this certificate and, to the | |
| it is true | e, correct, and complete. Signature | Instructions to Employees flat fax rate. Due to this change all Kentucky way | Doto |
| t is true | e, correct, and complete. Signature sy recently enacted a new 5% allowance for the standard de | Instructions to Employees flat fax rate. Due to this change all Kentucky way | Doto |
| Kentuck with an | e, correct, and complete. Signature sy recently enacted a new 5%: allowance for the standard de by be exempt from withholding | Instructions to Employees flat tax rate. Due to this change all Kentucky was eduction. | Doto |
| Kentuck with an | e, correct, and complete. Signature sy recently enacted a new 5%: allowance for the standard de by be exempt from withholding You may be exempt from with | Instructions to Employees flat tax rate. Due to this change all Kentucky wag eduction. g if any of the four conditions below are met: | Data ge earners will be taxed at this rate |
| Kentuck with an | sy recently enacted a new 5%; allowance for the standard drug be exempt from withholding. You may be exempt from with For 2017, you had a right income tax liability, and | Instructions to Employees flat tax rate. Due to this change all Kentucky wageduction. g if any of the four conditions below are met: hholding for 2018 if both the following apply: | Data ge earners will be taxed at this rate |
| Kentuck with an You ma 1. | sy recently enacted a new 5%; allowance for the standard di by be exempt from withholdin. For 2017, you had a right income tax liability, and For 2018, you expect a ref | Instructions to Employees flat tax rate. Due to this change all Kentucky was eduction. g if any of the four conditions below are met: hholding for 2018 if both the following apply: to a refund of all Kentucky income tax withho | pe earners will be taxed at this rate |
| Kentuck With an You ma 1. If both 1 | cy recently enacted a new 5% allowance for the standard di y be exempt from withholding. You may be exempt from with income tax liability, and For 2018, you expect a ref the above statements apply you fresident? as an individual directions. | Instructions to Employees flat tax rate. Due to this change all Kentucky was eduction. g if any of the four conditions below are met: hholding for 2018 if both the following apply: t to a refund of all Kentucky income tax withheld. fund of all your Kentucky income tax withheld. ou are exempt, check box 1. Your exemption for lic Law 105–261, pay and compensation earne Kentucky income tax if you are not a resident of omiciled within this state or an individual who this state and spends in the aggregate more the this state and spends in the aggregate more the size of the state of the saggregate more the size of the state of the saggregate more the size of the size of the saggregate more the size of the size | ge earners will be taxed at this rate eld because you had no Kentucky 2018 expires February 15, 2019. d at the Fort Campbell, Kentucky, Kentucky, KRS 141.010(17) defines is not domiciled in this state, but |

You may be exempt from withholding, if you meet the conditions set for under the Servicemember Civil
Relief Act as amended by the Military Spouses Residence Relief Act. You must complete the worksheet
below to determine if you are eligible.
 In order to qualify you must complete this form in full, certify that the you are not subject to Kentucky withholding tax

In order to quality you must complete this form in full, certify that the you are not subject to Kentucky withholding tax because you met the conditions set forth below, and provide a copy of your spouse's military picture ID issued to the employee by the U.S. Department of Defense.

| | My spouse is a military servicemember | | |
|----|--|-------|-------|
| | | LITES | LI NO |
| 3. | My military servicemember spouse has a current military order assigning him or her | | |
| | to a military location in Kentucky | ☐ YES | □ NO |
| 4. | I and my military servicemember spouse live at the same address | ☐ YES | □ NO |
| 5. | My domicile is a state other than Kentucky(check one) | ☐ YES | □ NO |
| | If yes, enter the 2-letter state code of your state | | |
| 6. | My military servicemember spouse's domicile is the same as mine | ☐ YES | □ NO |
| 7. | I am present in Kentucky solely to be with my military servicemember spouse | ☐ YES | □ NO |

If you checked "YES" to all the statements above, your earned income is exempt from Kentucky withholding tax.

Check box 3 if you checked "YES" to all the statements listed in the worksheet. You are exempt from Kentucky income tax withholding. This exemption will terminate if any of the answers to the questions changes to "NO". In general, the exemption termination date will be the earlier of:

- · The day the military servicemember is no longer in the military;
- · The day the employee enlists in the military;
- The day the employee and the military servicemember no longer live at the same address; or
- . The day the military servicemember's permanent duty station changes to a location outside of Kentucky.
- 4. You may be exempt from withholding if you work in Kentucky but reside in one of the following reciprocal states: Illinois, Indiana, Michigan, West Virginia, Wisconsin, Virginia and you commute daily or Ohio and you are not a shareholder-employee who is a "twenty (20) percent or greater" direct or indirect equity investor in a S corporation.

In order to qualify you must complete the worksheet below:

| I have not been a resident of Kentuck | y during the year. | (Check block in front of applicable statement | .) I work and reside in |
|---------------------------------------|--------------------|---|-------------------------|

- □ Illinois, □ Indiana, □ Michigan, □ West Virginia, □ Wisconsin
 □ Virginia and commute daily to my place of employment in Kentucky. (Must commute daily to apply.)
- Ohio and I am not a shareholder-employee who is a "twenty (20) percent or greater" direct or indirect equity investor in an S corporation.

Check box 4 if you certify you work in Kentucky and reside in a reciprocal state.

If you meet any of the four exemptions you are exempted from Kentucky withholding. However, you must complete this form and file it with your employer before withholding can be stopped. You will need to maintain a copy of the K-4 for your permanent records.

Instructions to Employers

Upon receipt of this form, properly completed, you are authorized to discontinue withholding for an employee who qualifies for one of the four exemptions. Retain a copy of all K-4's received from employees.

42A804 (K-4)(2018)



Corporate Income Tax

Effective January 1, 2018

- Flat tax rate of 5% for all corporations
- Single sales factor apportionment
- Market-Based Sourcing:
 - Receipts from tangible personal property are in Kentucky if it is shipped or delivered to a purchaser, other than the U.S. Government, in Kentucky
 - Receipts from services and the sale of intangibles are in Kentucky if the market is in Kentucky:
 - Sale, rental, lease, or license of real property in Kentucky
 - Sale, rental, lease, or license of tangible personal property in Kentucky
 - Service delivered or intangible property used in Kentucky (throw-out rule for intangible receipts if not taxable or indeterminable)
 - Kentucky Administrative Regulation (KAR) coming soon



Corporate Income Tax

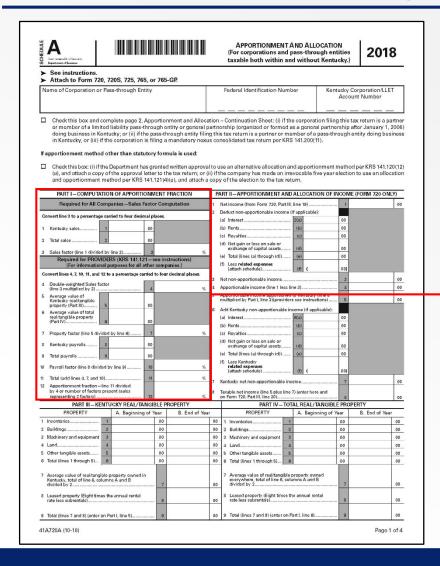
- 3-Factor Apportionment Retained for "Providers" (KRS 141.121(1)(e):
 - Communication services per KRS 136.602
 - Cable services per KRS 136.602
 - Internet access per 47 USC §51

Note: A 2-digit code is required on the face of the return to indicate provider qualification

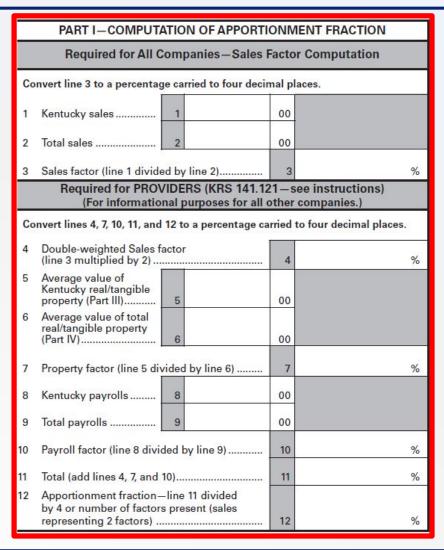
- Special Apportionment Definitions:
 - Passenger airlines
 - Qualified freight forwarders
- Alternative Apportionment:
 - Taxpayer must prove by clear and convincing evidence that statutory apportionment requirements unfairly represent activity in Kentucky



Schedule A – Kentucky Apportionment









Provider Business Reason Codes – 3-Factor Apportionment

| The state of the s | | | KENTU INCOMET | JCKY CORPORATION FAX AND LLET RETU | | 18 |
|--|--|----------------------|---|---|---|-----|
| ➤ See instructions. | Taxable period begi | nning | , 201 | , and ending | , 201 | |
| A LLET Exemption Code | D Federal Identification Number | | | cky Corporation/LLET nt Number (Required) | | |
| Enter Code | Name of Corporation | | | ☐ Change of Name | Taxable Year Ending | 1 |
| B Income Tax Exemption Code | Number and Street | | | | M M / Y Y | 100 |
| Enter Code Mandatory NEXUS | City | State | ZIP Code | Telephone Number | State and Date of Incorporation | - |
| C Check if applicable: Amended return Amended return—RAR | F Name of Common Parent | | Kentucky Corpo | pration/LLET Account Number | Principal Business Activity in KY | , |
| Provide explanation of changes in Part V — Explanation of Amended Retum Changes. | G Check if applicable: ☐ Initial return ☐ Change of accounti | ☐ S ng period ☐ F | Short-period return (Complei inal return (Complete Part IV | H Provider 3-Factor Apportionment Code V) | NAICS Code Number in KY (See www.census.gov) | |

| REASON | PROVIDER BUSINESS |
|--------|---|
| 31 | Communications service as defined in KRS 136.602; |
| 32 | Cable service as defined in KRS 136.602; |
| 33 | Internet service as defined in 47 U.S.C. sec. 151; or |
| 34 | Other (attach statement) |



Corporate Income Tax

Net Operating Losses

- 50% NOL limitation for mandatory nexus consolidated group filers until December 31, 2018
- Beginning on or after January 1, 2018, the NOLD is limited to 80% of taxable income without regard to the NOL deduction per IRC §172(a)
- Unlimited unused NOL carryforward per TCJA for NOL generated on or after January 1, 2018
- Kentucky disallows NOL carryback since January 1, 2005
- Guidance coming soon



Corporate Income Tax

Filing Requirements

- Mandatory Nexus Consolidated otherwise Separate Entity still required until December 31, 2018 for corporations
- Tax years beginning on or after **January 1, 2019** for corporations:
 - Unitary combined group; unless
 - Same-as-federal consolidated group election; otherwise
 - Separate entity filing if not part of a unitary or consolidated group
- e-Filing required if federal gross receipts >\$1,000,000
 - Applies to corporations and pass-through entities
- Forms Changes:
 - Updated Schedule A for apportionment factor changes
 - Various updates for tax law changes



Tax Credits

Inventory Tax Credit:

- Ad valorem (property) tax paid on inventory
- Must be timely paid
- Phased-in 25% per year from 2018 through 2021
- Calculator will be posted at https://revenue.ky.gov/

• Film Tax Credit:

- Nonrefundable and nontransferable for applications approved after April 27, 2018
- Annual approval cap of \$100 million for 2018 and after
- Commercials no longer qualify

Credits Eliminated:

- Kentucky Environmental Stewardship Act (KESA)
- Kentucky Economic Opportunity Zone Tax Credit (KEOZ)
- Incentives for Energy Independence Act (IEIA)
- Coal Incentive Tax Credit
- Food Donation Tax Credit (2018 is final year to use any 2017 carryover)
- Kentucky Housing for Homeless Families

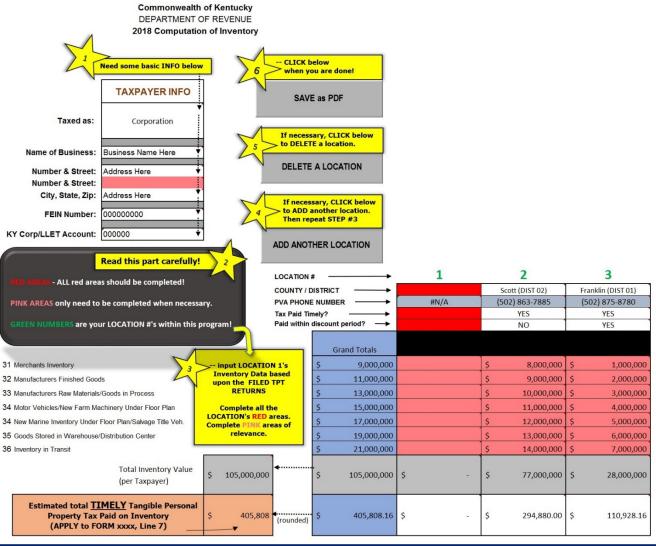


Schedule INV – Inventory Tax Credit

| Greenwalth of Kerulyo | | VENTORY TAX CRE (Ad Valorem) | UII | 2018 |
|---|--|---|-------------|-------------------------------------|
| ➤ See instructions. | | | | |
| ➤ Attach to Form 720, 720S, 725, 740, 740-NP, 741, 765, or 765-GP. | | | | KRS 141.40 |
| Name of Taxpayer | Federal Identification or Social Security N | | | poration/LLET er (if applicable) |
| Mailing Address | □ Lin | rporation nited Liability Pass-thr neral Partnership lividual ner | ough Entity | |
| PART I—Qualifications | | | | |
| If you answered "No" to either question above, STC If you answered "Yes" to both questions above, go PART II—Amount of Credit | to Part II. | lify for the credit. sit revenue.ky. | gov for a | |
| | ta) | k credit. | | |
| Enter the total amount reported on all Forms 62A500 | | xpayer's Valuation of Inventory | | x Timely Paid on Inventory |
| 1 Line 31, Merchants Inventory | 1 | c | 00 1 | 00 |
| 2 Line 32, Manufacturing Finished Goods | 2 | C | 00 2 | 00 |
| 3 Line 33, Manufacturers Raw Materials/Goods in Pr | rocess 3 | C | 00 3 | 00 |
| 4 Line 34, Motor Vehicles Held for Sale (dealers onl Farm Machinery Held Under a Floor Plan, New Both Marine Equipment Held Under a Floor Plan, Salve Vehicles (insurance companies only), Recreations Held in Retailer's Inventory, Biotechnology Produ a Warehouse (manufacturers and affiliates only), Nonferrous Metal Located in a Commodity Wareh Held on Warranty | oats and age Titled al Vehicles cts Held in and nouse and | c | 00 4 | oc |
| 5 Line 35, Goods Stored in Warehouse/Distribution | Center 5 | C | 00 5 | oc |
| 6 Line 36, Inventory - In Transit | 6 | | 00 6 | 00 |
| 7 Total (add lines 1 through 6) | 7 | C | 00 7 | 00 |
| 8 Allowable percentage | | | 8 | 25% |
| 9 Allowable Inventory Tax Credit (Line 7 mul | Itiplied by Line 8) | | 9 | 00 |
| | | | | |



Inventory Tax Credit Worksheet



- 1. Enter Taxpayer Info
 - Taxed as
 - Name
 - Address
 - FEIN
 - KY Corp/LLET Account Number
- 2. Fill-in Inventory Tax Information
 - Select: County/District
 - Timely paid: Yes/No
 - Paid within discount period: Yes/No
 - Enter value of inventory property for each category (follows lines from 62A500)
- 3. Input Each Location in a Separate Column
 - Keep adding columns until all locations entered
 - Tax automatically computes
- 4. Click to save worksheet work paper as a PDF and retain for your records
- 5. Click to generate a mock-up Sch INV
 - Save as a PDF



Electronic Filing Statistics

- Individual
 - 88% of the 1.96 million returns received through September were e-filed
- Corporate
 - 42% of the Corporate returns received through September were e-filed
- Kentucky follows the IRS for when e-file returns may begin to be electronically submitted & accepted



Forms Filed Electronically

| Filing Year | Form | Payment/Refund |
|--------------------|--|----------------------------------|
| 2018, 2017, & 2016 | Form 740 * | E-Pay & Direct Deposit of Refund |
| 2018, 2017, & 2016 | Form 740-NP * | E-Pay |
| 2018, 2017, & 2016 | Form 740-NP-R (cannot e-file amended) | E-Pay |
| 2018, 2017 | Form 741 * | E-Pay |
| 2018, 2017, & 2016 | Form 720 * | E-Pay |
| 2018, 2017, & 2016 | Form 720 (consolidated) * | E-Pay |
| 2018, 2017, & 2016 | Form 720S * | E-Pay |
| 2018, 2017 | Form 725 / 725-EZ * | E-Pay |
| 2018, 2017, & 2016 | Form 765 * | E-Pay |
| 2018, 2017, & 2016 | Form 765-GP * | E-Pay |

^{*}including amended



Property Tax

- Pre-written computer software is subject to state and local property tax
- Reminders:
 - Form 62A500 returns are due for all businesses each year on May 15 for property held on January 1
 - Returns must be filed with the Property Valuation Administrator in each county per Form 62A500 instructions, <u>not</u> the DOR
 - Returns mailed to the DOR are forwarded via mail at the state's expense to the PVA offices
 - Late or amended returns must be filed with the Office of Property Valuation at DOR
 - No de minimus value standard
 - All personal property must be reported and depreciated per the instructions



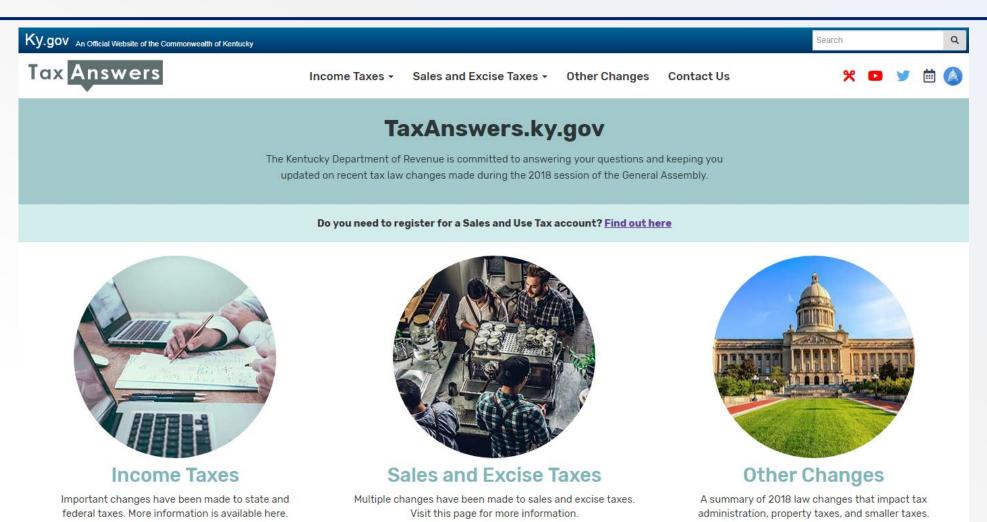
Sales & Excise Taxes

- Information on tax changes can be found at:
 - https://TaxAnswers.ky.gov
- Including:
 - Listing of new services subject to sales tax
 - Industry specific FAQs
 - Video tutorials
 - Links to Register for a Sales and Use Tax Account

| Sales and Use Taxes | (502) 564-5170 |
|----------------------------|----------------|
| Telecommunications Tax | (502) 564-5170 |
| 911 Prepaid Service Charge | (502) 564-5170 |
| Financial Tax | (502) 564-4810 |
| Motor Vehicle Tax | (502) 564-3853 |
| Motor Vehicle Usage Tax | (502) 564-4455 |
| Excise Tax | (502) 564-6823 |
| Tobacco Tax | (502) 564-6823 |



TaxAnswers.ky.gov





Miscellaneous

- Kentucky Court Appointed Special Advocates (CASA) new refund designation checkoff
- Final federal audit determination due in 180 days
 - Previously 30 days
- Assessment and refund denial protests due in 60 days
 - Previously 45 days
- Bonds no longer required to suspend collection activity when appealing an order sustaining a tax assessment to the Kentucky Claims Commission

Interest Rates

The adjusted prime rate charged by banks is used to set the tax interest rate that the Kentucky Department of Revenue charges on unpaid taxes and pays on refunds that are subject to interest due.

- Increased 1% from last year
- Interest rates for 2019:
 - Rate charged on unpaid taxes is 7%
 - Base rate of 5% plus 2%
 - Rate paid when interest is due on a refund is 3%
 - Base rate of 5% minus 2%
 - KRS 131.183



Procedural Reminders

- No staples, check stubs, hole punches
- Review the DOR website for the newest version of forms
- Use the mailing address shown on the tax form you are sending
- Non-Revenue mail is not processed by DOR
- Do not use DOR envelopes for other personal or business mailings
- Mail each return separately every single return and/or voucher should be mailed in its own envelope
- No envelopes (sealed or unsealed) inside another envelope
- Do not mail anything to 100 or 200 Fair Oaks Lane, Frankfort, KY
- Cut forms to size when instructed (vouchers, etc.)



Stay in Touch

- Twitter
 - @RevenueKY



- Kentucky Business One Stop Portal
 - https://onestop.ky.gov



- Tax Alert
 - https://revenue.ky.gov
 - News Tab → Publications Section → Tax Alerts



Taxpayer Service Center Map

TAXPAYER SERVICE CENTERS

Districts **ASHLAND BOWLING GREEN** CORBIN FRANKFORT HOPKINSVILLE LOUISVILLE NORTHERN KENTUCKY GREENUP **OWENSBORO** PADUCAH 8 PIKEVILLE GRAYSON



Taxpayer Service Centers

Ashland Taxpayer Service Center

1539 Greenup Avenue, 41101-7695 (606) 920-2037

Bowling Green Taxpayer Service Center

201 West Professional Park Court, 42104-3278 (270) 746-7470

Corbin Taxpayer Service Center

15100 North US25E, Suite 2, 40701-6188 (606) 528-3322

Frankfort Taxpayer Service Center

501 High Street, 40601-2103 (502) 564-4581 (*Taxpayer Assistance*)

Hopkinsville Taxpayer Service Center

181 Hammond Drive, 42240-7926 (270) 889-6521

Louisville Taxpayer Service Center

600 West Cedar Street, 2nd Floor West, 40202-2310 (502) 595-4512

Northern Kentucky Taxpayer Service Center

Turfway Ridge Office Park 7310 Turfway Road, Suite 190, Florence, 41042-4871 (859) 371-9049

Owensboro Taxpayer Service Center

401 Frederica Street, Building C, Suite 201, 42301-6295 (270) 687-7301

Paducah Taxpayer Service Center

Clark Business Complex, Suite G 2928 Park Avenue, 42001-4024 (270) 575-7148

Pikeville Taxpayer Service Center

Uniplex Center, 126 Trivette Drive, Suite 203, 41501-1275 (606) 433-7675



Revenue Contact Phone Numbers

| Collections | (502) 564-4921 |
|--|----------------|
| Corporation Tax | (502) 564-8139 |
| DOR One Stop Help Line | (502) 564-5053 |
| E-Filing Assistance (Business Forms) | (502) 564-7926 |
| E-Filing Assistance (Individual Forms) | (502) 564-7862 |
| Field Operations | (502) 564-2113 |
| Forms and Envelopes | (502) 564-3658 |
| Individual Income Tax | (502) 564-4581 |
| Inheritance Tax | (502) 564-4810 |
| Local Government & County Fees | (502) 564-8785 |
| Miscellaneous Tax | (502) 564-2935 |
| | |

| Motor Fuels | (502) 564-3853 |
|----------------------------------|----------------|
| Motor Vehicle Usage | (502) 564-4455 |
| Ombudsman | (502) 564-7822 |
| Property Tax | (502) 564-8338 |
| Protest Resolution | (502) 564-6734 |
| Registration | (502) 564-3306 |
| Sales & Use Tax | (502) 564-5170 |
| Special Investigations | (502) 564-4470 |
| State Operator | (502) 564-3130 |
| Withholding (also use for WRAPS) | (502) 564-7287 |
| | |



Questions, Comments, or Concerns



Thank You!



2018 Kentucky State Tax Update

Jessica S. Honican, CPA

Director, Corporation Tax

Image ✓ JessicaS.Honican@ky.gov

2(502) 564-7268

Christy Kinney

Director, Individual Income Tax

☐ Christy.Kinney@ky.gov

2(502) 564-7538

Kentucky Department of Revenue
Office of Income Taxation
501 High Street • Station 55 • Frankfort, KY 40601
(502) 564-4581

