



KENTUCKY INDIVIDUAL TAX CREDIT SCHEDULE

Enclose with Form 740 or 740-NP

2020

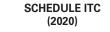
Enter name(s) as shown on tax return.

Your Social Security Number									

SECTION A-BUSINESS INCENTIVES AND OTHER TAX CREDITS

Α	B Preapproval	C Credit	D Required	E		F	
	Required	Name	Attachment	Spouse		Yourself	
1	No	Nonrefundable Limited Liability Entity	Kentucky Limited Liability Entity Tax Credit Worksheet/Schedule K-1		00		00
2	Yes	Kentucky Small Business	Schedule K-1		00		00
3	Yes	Kentucky Selling Farmers	Schedule K-1		00		00
4	Yes	Skills Training Investment	Schedule K-1		00		00
5	Yes	Certified Rehabilitation	Certification Copies		00		00
6	No	Tax Paid to Another State	Copy(ies) of Other State(s) return or Worksheet A		00		00
7	No	Unemployment	Schedule UTC		00		00
8	Yes	Recycling/Composting Equipment	Schedule RC		00		00
9	Yes	Kentucky Investment Fund	KEDFA notification		00		00
10	No	Qualified Research Facility	Schedule QR		00		00
11	No	GED Incentive	Form DAEL-31		00		00
12	Yes	Voluntary Environmental Remediation	Schedule VERB		00		00
13	Yes	Biodiesel	Schedule BIO		00		00
14	Yes	Clean Coal Incentive	Schedule CCI		00		00
15	Yes	Ethanol	Schedule ETH		00		00
16	Yes	Cellulosic Ethanol	Schedule CELL		00		00
17	No	Railroad Maintenance & Improvement	Schedule RR-I		00		00
18	Yes	Endow Kentucky	Schedule ENDOW		00		00
19	Yes	New Markets Development Program	Form 8874(K)-A		00		00
20	No	Food Donation (Carryover only)	Schedule FD		00		00
21	No	Distilled Spirits	Schedule DS		00		00
22	Yes	Angel Investor	Certification Letter		00		00
23	Yes	Film Industry	Film Office Certification		00		00
24	No	Inventory	Schedule INV		00		00
25	page 1, lii	otherTax Credits (add lines 1 through 24). Er ne 15, Columns A and B, or enter combined 740-NP, page 1, line 15	totals of Columns E and F		00		00







SECTION B-PERSONAL TAX CREDITS

Taxpayer

Spouse

Complete only if filing joint or married,

			filing separately on a combined return						
Ent	ter your date of birth (MM/DD/YYYY)		Enter your date of birth (MM/DD/YYYY)						
1	If you were 65 on or before 12/31/2020, enter 40	1	5 If you were 65 on or before 12/31/2020, enter 40	5					
2	If you were legally blind on 12/31/2020, enter 40	2	6 If you were legally blind on 12/31/2020, enter 40	6					
3	If you were a member of the Kentucky National		7 If you were a member of the Kentucky National						
	Guard on 12/31/2020, enter 20	3	Guard on 12/31/2020, enter 20	7					
4	Allowable Taxpayer Credit—Add lines 1 through 3	4	8 Allowable Spouse Credit—Add lines 5 through 7	8					
	signment of Personal Tax Credits								
9	For filing status Single or Married, filing separate ret	t urns, enter the a	amount from line 4 here and in Column B						
of Form 740, line 17 or Form 740-NP, line 17 (Not to exceed 100)9									
10	10 For filing status Married, filing separately on this combined return, enter the amount from line 4								
here and in column B of Form 740, line 17 (Not to exceed 100)									
11	For filing status Married, filing separately on this con	mbined return, e	nter the amount from line 8						
	here and in column A of Form 740, line 17. (Not to exc	ceed 100)							
12 For filing status Married, filing jointly, add line 4 and line 8 and enter here and in Column B of Form 740,									

SECTION C-FAMILY SIZE TAX CREDIT AND INCOME GAP CREDIT

Enter dependents qualifying for family size credit and income gap credit. See instructions to determine family size and your qualifying dependents. Your family size will be used to determine your family size tax credit percentage and the amount of your income gap credit.

line 17 or Form 740-NP, line 17. (Not to exceed 200)

First and Last Name	Dependent's Social Security number					nt's ' num	ber		Dependent's relationship to you	Check if qualifying child for family size tax credit

Use this Family Size Table to determine the percentage of family size credit and the amount of income gap credit. You will need to know your family size and your modified gross income (a worksheet is located within the instructions). You will enter the percentage for the family size tax credit on Form 740 or 740-NP, line 21 and you will enter the income gap credit on Form 740 or 740-NP, line 25.

Family Size	e: One		Т	wo	Tł	rree	Four o	r More	Credit	Income Gap Credit			
If MGI	is over	is not over	is over	is not over	is over is not over		is over	is not over	Percentage is	One	Two	Three	
	\$	\$12,760	\$	\$17,240	\$	\$21,720	\$	\$26,200	100%				
	12,760	13,270	17,240	17,930	21,720	22,589	26,200	27,248	90%	\$11	\$ 7	\$ 3	
05	13,270	13,781	17,930	18,619	22,589	23,458	27,248	28,296	80%	\$20	\$13	\$ 6	
	13,781	14,291	18,619	19,309	23,458	24,326	28,296	29,344	70%	\$29	\$18	\$ 6	
<u> </u>	14,291	14,802	19,309	19,998	24,326	25,195	29,344	30,392	60%	\$37	\$22	\$ 6	
l e	14,802	15,312	19,998	20,688	25,195	26,064	30,392	31,440	50%	\$45	\$24	\$ 4	
l Ğ l	15,312	15,822	20,688	21,378	26,064	26,933	31,440	32,488	40%	\$51	\$26		
>	15,822	16,205	21,378	21,895	26,933	27,584	32,488	33,274	30%	\$58	\$27		
×	16,205	16,588	21,895	22,412	27,584	28,236	33,274	34,060	20%	\$64	\$28		
ן מ	16,588	16,971	22,412	22,929	28,236	28,888	34,060	34,846	10%	\$69	\$28		
	16,971		22,929		28,888		34,846		0%				

Multiply tax from Form 740 or 740-NP, line 19, by the applicable family size tax credit percentage and enter on Form 740 or 740-NP line 21. This is your Family Size Tax Credit.

