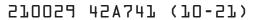




KENTUCKY FIDUCIARY INCOMETAX RETURN

2021

For	calendar year or other taxab	le year beginning	, 2021, and ending	, 20		
Check applicable box: ☐ Decedent's estate ☐ Simple trust ☐ Complex trust ☐ ESBT (S portion only) ☐ Grantor trust ☐ Bankruptcy estate ☐ Pooled income fund		Name of Estate or Trust			Federal Emp	oloyer Identification Number
		Name and Title of Fiduciary			Date Entity	Created
		Address of Fiduciary (Number and S	Street or P.O. Box)			Room or Suite Number
Check applicable boxes: Initial return Amended return Final return		City, State and ZIP Code				
		Number of Schedules K-1 enclosed. ➤ (Copies Must Be Enclosed)				t Be Enclosed)
	Enclose a copy	of the federal return incl	uding all schedules a	and stateme	nts.	
1	Federal adjusted total inc	ome (federal Form 1041, line 17) <u>.</u>		1	
2	Additions (from page 3, S	chedule M, line 4)		2		_
3	Enter the portion of deduc	ctions allocable to line 2		3		
4	Subtract line 3 from line 2	<u>)</u>			4	
5	Add lines 1 and 4	Add lines 1 and 4			5	
6	Subtractions (from page 3, Schedule M, line 8)					
7	Enter the portion of deduc	ctions allocable to line 6		7		
8	Subtract line 7 from line 6	3			8	
9	Subtract line 8 from line 5	5. This is your Kentucky adjuste	d total income (loss). Ente	er here		
	and on page 3, Schedule	B, line 1			9	
10	Income distribution dedu	ction (from page 3, Schedule B,	line 15)			
	(enclose Schedule(s) K-1)			10		_
11	Pension income exclusion	n (enclose Schedule P, if more th	nan \$31,110)	11		_
12	Federal estate tax deducti	on (enclose computation)		12		
13	Add lines 10, 11 and 12				13	
14	Total income of fiduciary	(subtract line 13 from line 9)			14	
INT	ANGIBLE INCOME ATTRIBU	UTABLETO NONRESIDENTS IN	CLUDED IN LINE 14			
15	15 Trusts or estates with income attributable to nonresident beneficiaries. Enter the portion of					
	intangible income included in line 14 that is attributable to nonresident beneficiaries .					
	Enter zero if not applicabl	e. See instructions			15	3
16	Taxable income of fiducia	ry (subtract line 15 from line 14) This is your taxable inco	ome	16	<u> </u>





TAX COMPUTATION



	-		
Page	2	of 3	

17	(a) Ta	x: multiply line 16 by 5% (.05)	and add tax from:				
	(b) Fo	orm 4972-K □; Sch. RC-R □; Sch. DS-R □;	Angel Investor Recapture 🔲	Total	17c		
18	Nonre	fundable credit(s) (specify and enclose suppo	orting documents)		18		
19	Enter -	Tax Credit (\$2 for a trust; \$10 for an estate). T	his credit is not refundable		19		
20	Total T	ax (subtract lines 18 and 19 from line 17(c); if	line 18 plus line 19 is more than I	ine 17(c), enter -0-)	20		
21	(a) Es	stimated tax/Extension payments	21a	a			
	(b) W	ithholding (W-2 or 1099 — enclose forms)	211	0			
	(c) N	onresident Withholding from Form PTE-WH,	line 9 (enclose forms) 21	С			
	(d) T c	otal of amounts on line 21(a) through 21(c)			21d		
22	If line	20 is larger than line 21(d), subtract line 21(d)	from line 20, and enter the TAX I	DUE	22		
23	(a) Es	stimated tax penalty 🏻 Check if Form 2210	-K attached23a	а			
	(b) In	terest	231	0			
	(c) La	ate payment penalty	230	С			
	(d) La	ate filing penalty	230	d			
24	Add lii	nes 23(a) through 23(d)			24		
25	If the t	otal of lines 20 and 24 is more than line 21(d)	, subtract line 21(d) from the tota	l of lines 20 and			
	24. Th	is is the AMOUNT YOU OWE			25		
26	If line	21(d) is more than the total of lines 20 and 24	re than the total of lines 20 and 24, subtract lines 20 and 24 from line 21(d). This is				
	the AN	NOUNT YOU OVERPAID			26		
27	Amou	nt of line 26 to be CREDITED TO YOUR 2022 E	STIMATED TAX		27		
28	Subtra	act line 27 from line 26. This is the amount to	be REFUNDED TO YOU		28		
		under the penalties of perjury that this return (in		es and statements) ha	as been examined by me a	ınd,	
to	the bes	st of my knowledge and belief, is a true, correct	and complete return.				
Sign		Signature of Fiduciary or Agent		Date			
Here Paid Preparer Use		PTIN or Identification Number of Fiduciary or Agent		Telephone Number (daytime)			
		Signature of Preparer	Date				
		Name of Preparer or Firm		ID Number			
		Email	Telephone No.	May the DOR discuss this	return with this preparer?		
Mail To:		Kentucky Department of Revenue Frankfort, KY 40620-0016					
Pa	yment	Check Payable: Kentucky State Treasurer E-Pay Options: www.revenue.ky.gov Include: Your FEIN and "KY Income Tax—	2021"				





SCHEDULE A - CHARITABLE DEDUCTION (Do not complete for a simple trust or pooled income fund.)

Complete Schedule A only if you made additions to or subtractions from total income on page 1, lines 2 or 6 and claimed a charitable deduction on federal Form 1041.

1	Kentucky taxable income that was paid or set aside for charitable purposes and was not reported on					
	federal Form 1041, Schedule A, including additional capital gains. Enter here and include on Schedule					
	M, line 7	1				
2	Kentucky tax-exempt income that was paid or set aside for charitable purposes that was reported on					
	federal Form 1041, Schedule A. Enter here and include on Schedule M, line 3	2				
SC	SCHEDULE B—INCOME DISTRIBUTION DEDUCTION (See federal instructions.)					
1	Adjusted total income (enter amount from page 1, line 9)	1				
2	Adjusted tax-exempt interest	2				
3	Net gain shown on Schedule D, Form 741, column 1, line 19 (if net loss, enter zero)	3				
4	Enter amount included from federal Schedule A, line 4	4				
5	Enter net capital gains included on Kentucky Schedule A, line 1 or line 2	5				
6	Enter any Kentucky gains included on page 1, line 9 as a negative figure. If capital loss, enter as a					
	positive figure. (Kentucky gain/loss includes federal figures plus Kentucky adjustments.)	6				
7	Distributable net income (combine lines 1 through 6)	7				
8	If complex trust, enter accounting income for tax years as determined under the governing					
	instrument and applicable law	8				
9	Amount of income required to be distributed currently	9				
10	Other amounts paid, credited or otherwise required to be distributed	10				
11	Total distributions (add lines 9 and 10) (If greater than line 8, see federal instructions.)	11				
12	Enter the amount of tax-exempt income included on line 11	12				
	Tentative income distribution deduction (subtract line 12 from line 11)	13				
14	Tentative income distribution deduction (subtract line 2 from line 7)	14				
15	Income distribution deduction (enter the smaller of line 13 or line 14 here and on page 1, line 10)	15				
SCHEDULE M (FORM 741)						
Par	t I—Additions to Federal Adjusted Total Income					
1	Enter interest from bonds issued by other states and their political subdivisions	1				
2	Enter additions from partnerships, fiduciaries and S corporations (enclose schedule)	2				
3	Other additions (enclose schedule)	3				
4	Total additions. Enter here and on page 1, line 2	4				
Par	t II—Subtractions from Federal Adjusted Total Income					
5	Enter interest from U.S. government obligations (enclose schedule)	5				
6	Enter subtractions from partnerships, fiduciaries and S corporations (enclose schedule)	6				
7	Other subtractions (enclose schedule)	7				
8	Total subtractions. Enter here and on page 1, line 6	8				

ADDITIONAL INFORMATION REQUIRED

- 1 Was a Kentucky fiduciary income tax return filed for 2020?□Yes □ No. If "No," state reason.
- 2 If the fiduciary has income not taxed by Kentucky, have you deducted only that portion of expenses allocable to taxable income? ☐ Yes ☐ No. If "Yes," enclose computation.
- 3 Did the estate or trust have any passive activity loss(es)?

 ☐Yes ☐ No. (If "Yes," enter the loss(es) on Form 8582-K,
 Kentucky Passive Activity Loss Limitations, to determine
 the allowable loss.)

- 4 If a federal audit changed the taxable income as originally reported for any prior year, a copy of the Revenue Agent's Report must be submitted to the Department of Revenue. Do not attach to this return.
- 5 During the taxable year did you make an accumulation distribution as defined in Sec. 665(b), Internal Revenue Code? □Yes □ No. If "Yes," enclose federal Schedule J (Form 1041).
- If this is an amended return, check the appropriate box on page 1. Explain changes below. Enclose a separate page if necessary.