



KENTUCKY INDIVIDUAL INCOMETAX RETURN Residents Only

2021

	Market State Control of the Control								
Che	ck if deceased: Spouse Taxpayer For calendar	year or other	taxabl	e year b	eginning		and ending		·
	A. Spouse's Social Security Number B. Your Social Security Nu	mber							
N:	ame—Last, First, Middle Initial (Joint or combined return, give both names and initials.)							
M	ailing Address (Number and Street including Apartment Number or P.O. Box)								
Ci	ty, Town or Post Office State Z	IP Code							
FILI	NG STATUS (see instructions) Single	Check if app			POLITICAL PARTY Designating \$2 will			refund or ta	x due.
2	Married, filing separately on this combined	copy of applicab	1040)			A.	Spouse	B. You	
3	return. (If both had income.) Married, filing joint return.				Democratic Republican		1) <u> </u> 2)	(4) (5)	
4	Married, filing separate returns. Enter spouse's				No Designation	(;	3)	(6)	
	Social Security number above and full name here.								
				A. s	Spouse (Use if Status 2 is checked.)			Yourself or Joint)	
5	Enter amount from federal Form 1040 or 1040-SR, line 11. (If total	l of		i iiiig (Status 2 is checked.		,	01 0011117	
	Columns A and B is \$35,245 or less, you may qualify for the Family Size Tax Credit. See instructions.)		5		00	5			00
6	Additions from Schedule M, line 6		6		00	6			00
	Add lines 5 and 6		7		00	7			00
	Subtractions from Schedule M, line 17		8		00	8			00
			9		00	9			00
	Subtract line 8 from line 7. This is your Kentucky Adjusted Gross I Itemizers: Enter itemized deductions from Kentucky Schedule A.		9			9			
10	Nonitemizers: Enter \$2,690 in Columns A and/or B		10		00	10			00
11	Subtract line 10 from line 9. This is your Taxable Income		11		00	11			00
	Tax Computation: Multiply line 11 by 5% (.05) or amount from Sched		12		00	12			00
	Enter tax from Form 4972-K : Schedule RC-R :	ale 5 🗀	12			12			
13	Schedule DS-R ; Angel Investor Recapture		13		00	13			00
11					00				00
	Add lines 12 and 13 and enter total here		14		00	14			00
15			15			15			00
16	Subtract line 15 from line 14. If line 15 is larger than line 14, ente		16		00	16			+
17	Enter personal tax credit amounts from Schedule ITC, Section B		17		00	17			00
	Subtract line 17 from line 16. If line 17 is larger than line 16, ente		18	<u> </u>	00	18			00
19	Add tax amount(s) in Columns A and B, line 18 and enter here, c	continue to pa	age 2			19	I		00



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20	Check the box that represents your total family size (see instructions before completing lines 20 and 21)	20	1 📗 2 🔲 3 🔲	4 🗌
21	Multiply line 19 by Family Size Tax Credit decimal amount (%) from Schedule ITC	21		00
22	Subtract line 21 from line 19	22		00
23	Enter the Education Tuition Tax Credit from Form 8863-K	23		00
24	Enter Child and Dependent Care Credit from federal Form 2441, line 11 ➤x 20% (.20)	24		00
25	Enter Education Opportunity Account Program Credit	25		00
26	Income Tax Liability. Subtract lines 23 through 25 from line 22. If zero or less, enter zero	26		00
27	Enter KENTUCKY USETAX due on Internet, mail order, or other out-of-state purchases (see instructions)	27		00
28	Add lines 26 and 27. This is your TOTAL TAX LIABILITY	28		00
29	For amended return; overpayment, if any, shown on original return	29		00
30	Add lines 28 and 29, enter here	30		00
31	a Enter Kentucky income tax withheld as shown on enclosed Schedule KW-2			
	b Enter 2021 Kentucky estimated tax/extension payments			
	c Enter 2021 refundable certified rehabilitation credit			
	d For amended return; enter amount paid with original return plus additional payment(s) made after it was filed			
32	Add lines 31(a) through 31(d)	32		00
33	If line 30 is larger than line 32, subtract line 32 from line 30, enter ADDITIONAL TAX DUE	33		00
34	a Estimated tax penalty Check if Form 2210-K attached			
	b Interest			
	c Late payment penalty			
	d Late filing penalty			
35	Add lines 34(a) through 34(d). Enter here	35		00
36	If the total of lines 30 and 35 is more than line 32, subtract line 32 from the total of lines 30 and 35.			
	This is the AMOUNTYOU OWE, continue to page 3	36		00
37	If line 32 is more than line 30, subtract lines 30 and 35 from line 32. This is the AMOUNT YOU OVERPAID,			
	continue to page 3	37		00



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38	FU	ND CONTRIBUTIONS; see instructions.					
	а	Nature and Wildlife Fund	38a		00		
	b	Child Victims' Trust Fund	38b		00		
	С	Veterans' Program Trust Fund	38c		00		
	d	Breast Cancer Research/EducationTrust Fund	38d		00		
	е	Farms to Food BanksTrust Fund	38e		00		
	f	Local History Trust Fund	38f		00		
	g	Special Olympics Kentucky	38g		00		
	h	Pediatric Cancer Research Trust Fund	38h		00		
	i	Rape Crisis CenterTrust Fund	38i		00		
	j	Court Appointed Special AdvocateTrust Fund	38j		00		
	k	YMCA Youth Association Fund	38k		00		
39	Ad	d lines 38(a) through 38(k)				39	00
40	Am	nount of line 37 to be CREDITED TO YOUR 2022 ESTIMATED TAX		CREDIT FORWA	RD	40	00
	(Cr	edit forwards not available for amended returns)					
41	Sul	btract lines 39 and 40 from line 37. Amount to be REFUNDED TO YOU		REFU	ND	41	00

I, the undersigned, declare under penalties of perjury that I have examined this return, including all accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I also understand and agree that our election to file a combined return under the provisions of Regulation 103 KAR 17:020 will result in refunds being made payable to us jointly and in each of us being jointly and severally liable for all taxes accruing under this return.

Sign	Signature of Taxpayer	Driver's License/State Issued ID No.	er's License/State Issued ID No.			Telephone Number (daytime)			
Here	Signature of Spouse	Driver's License/State Issued ID No.	Date						
	Signature of Preparer			Date	Date				
Paid Preparer Use					ID Number				
Ose	Email	Telephone No.	one No.			May the DOR discuss this return with this preparer?			
Enclose	Include a complete copy of federal Form 1040, if you received farm, business, or rental income or loss. If not required, check here.		Refund or No Payment		Kentucky Department of Revenue Frankfort, KY 40618-0006				
Payment	Check Payable: Kentucky State Treasurer E-Pay Options: www.revenue.ky.gov Include: Your Social Security number and "KY Income Tax—2021"		With Payment		Kentucky Department of Revenue Frankfort, KY 40619-0008				