



KENTUCKY INDIVIDUAL INCOMETAX RETURN Residents Only

2021

	The state of the s								
Che	eck if deceased: Spouse Taxpayer For calendar year	ar or other t	axabl	e year b	eginning		and ending		<u>-</u>
	A. Spouse's Social Security Number B. Your Social Security Number	er							
N	ame—Last, First, Middle Initial (Joint or combined return, give both names and initials.)								
IV	lailing Address (Number and Street including Apartment Number or P.O. Box)								
С	ity, Town or Post Office State ZIP C	Code							
FIL		heck if app			POLITICAL PARTY				
1 2	Single Married, filing separately on this combined	Amende copy of	1040 <i>)</i>		Designating \$2 will			d or tax o B. Yourse	
	return. (If both had income.)	applicab	Ie.)		Democratic	•	1) 🔲	(4)]
3 4	✓ Married, filing joint return.✓ Married, filing separate returns. Enter spouse's				Republican No Designation		2) <u> </u> 3)	(5)]]
	Social Security number above and full name here.					·	. Ш		•
				Δ	Spouse <i>(Use if</i>	T	B. Yours	16	
				Filing S	Spouse (Use II Status 2 is checked.)		B. Yours (or Jo		
5	Enter amount from federal Form 1040 or 1040-SR, line 11. (If total of Columns A and B is \$35,245 or less, you may qualify for the	of							
	Family Size Tax Credit. See instructions.)		5		00	5			00
6	Additions from Schedule M, line 6		6		00	6			00
7	Add lines 5 and 6		7		00	7			00
8	Subtractions from Schedule M, line 17		8		00	8			00
9	Subtract line 8 from line 7. This is your Kentucky Adjusted Gross Inco	ome	9		00	9			00
10	Itemizers: Enter itemized deductions from Kentucky Schedule A.								
	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
12	Tax Computation: Multiply line 11 by 5% (.05) or amount from Schedule	g J 🔲	12		00	12			00
13	Enter tax from Form 4972-K [; Schedule RC-R [;								
	Schedule DS-R : Angel Investor Recapture :		13		00	13			00
14	Add lines 12 and 13 and enter total here		14		00	14			00
15	Enter amounts from Schedule ITC, Section A, lines 26E and 26F		15		00	15			00
16	Subtract line 15 from line 14. If line 15 is larger than line 14, enter ze	ero	16		00	16			00
17	Enter personal tax credit amounts from Schedule ITC, Section B		17		00	17			00
18	Subtract line 17 from line 16. If line 17 is larger than line 16, enter ze	ero	18		00	18			00
19	Add tax amount(s) in Columns A and B, line 18 and enter here, conf	itinue to pa	age 2			19			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, line 17	23		00
24	Enter Child and Dependent Care Credit from Form 2441-K, line 12	24		00
25	RESERVED	25		
26	Income Tax Liability. Subtract lines 23 through 25 from line 22. If zero or less, enter zero	26		00
27	Enter KENTUCKY USE TAX 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 AMOUNT YOU 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 FORWARD	40	00
	(Cr	edit forwards not available for amended returns)				
41	Su	btract lines 39 and 40 from line 37. Amount to be REFUNDED TO YOU		REFUND	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. Signature of Taxpayer Driver's License/State Issued ID No. Date Telephone Number (daytime) Sign Driver's License/State Issued ID No. Signature of Spouse Date Here Signature of Preparer Date **Paid** Name of Preparer or Firm ID Number **Preparer** Use May the DOR discuss this return with this preparer? Email Telephone No. ☐ No ☐ Yes Refund Include a complete copy of federal Form 1040, if you **Kentucky Department of Revenue** received farm, business, or rental income or loss. If not **Enclose** or No Frankfort, KY 40618-0006 required, check here. **Payment** Check Payable: Kentucky State Treasurer **Kentucky Department of Revenue** With **Payment** E-Pay Options: revenue.ky.gov **Payment** Frankfort, KY 40619-0008 Include: Your Social Security number and "KY Income Tax – 2021"