



KENTUCKY INDIVIDUAL INCOME TAX RETURN Full-Year Residents Only



For calendar year or other taxable year beginning _____, 2011, and ending _____, 20_____.

Form section for Social Security Numbers (A and B), Name, Mailing Address, and City/State/ZIP Code.

FILING STATUS (see instructions) section with checkboxes for Single, Married (separate), Married (joint), and Married (separate returns).

POLITICAL PARTY FUND section with checkboxes for Democratic, Republican, and No Designation for both Spouse and Yourself.

Main table for INCOME/TAX with columns for Spouse (A) and Yourself (B), rows 5-28 detailing various tax items and credits.

Attach Form W-2(s), Other Supporting Statement(s) and Payment Here - Staple to Top Page Only



DRAFT
6/29/11

REFUND/TAX PAYMENT SUMMARY

29	Enter amount from page 1, line 28. This is your Total Tax Liability	• 29		00
30	(a) Enter Kentucky income tax withheld as shown on attached 2011 Form W-2(s) and other supporting statements.....	• 30(a)	00	
	(b) Enter 2011 Kentucky estimated tax payments	• 30(b)	00	
	(c) Enter 2011 refundable certified rehabilitation credit (KRS 141.382(1)(b))	• 30(c)	00	
	(d) Enter 2011 film industry tax credit (KRS 141.383)	• 30(d)	00	
31	Add lines 30(a) through 30(d)	• 31		00
32	If line 31 is larger than line 29, enter AMOUNT OVERPAID (see instructions)	32		00
<i>Fund Contributions; See instructions.</i>				
▶ (Enter amount(s) checked)				
33	Nature and Wildlife Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> Other	• 33	00	
34	Child Victims' Trust Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> Other	• 34	00	
35	Veterans' Program Trust Fund <input type="checkbox"/> \$10 <input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> Other	• 35	00	
36	Breast Cancer Research/Education Trust Fund	• 36	00	
37	Add lines 33 through 36	37		00
38	Amount of line 32 to be CREDITED TO YOUR 2012 ESTIMATED TAX	• 38		00
39	Subtract lines 37 and 38 from line 32. Amount to be REFUNDED TO YOU	REFUND • 39		00
40	If line 29 is larger than line 31, enter ADDITIONAL TAX DUE	• 40		00
41	(a) Estimated tax penalty and/or interest. <input type="checkbox"/> Check if Form 2210-K attached	41(a)	00	
	(b) Interest	41(b)	00	
	(c) Late payment penalty	41(c)	00	
	(d) Late filing penalty.....	41(d)	00	
42	Add lines 41(a) through 41(d). Enter here.....	• 42		00
43	Add lines 40 and 42 and enter here. This is the AMOUNT YOU OWE	OWE 43		00

- Make check payable to **Kentucky State Treasurer** or visit www.revenue.ky.gov for more options.
- Write your Social Security number and "KY Income Tax—2011" on the check.

OFFICIAL USE ONLY	
	PWR

SECTION A—BUSINESS INCENTIVE AND OTHER TAX CREDITS

	A. Spouse		B. Yourself	
1	1	00	1	00
2	2	00	2	00
3	3	00	3	00
4	4	00	4	00
5	5	00	5	00
6	6	00	6	00
7	7	00	7	00
8	8	00	8	00
9	9	00	9	00
10	10	00	10	00
11	11	00	11	00
12	12	00	12	00
13	13	00	13	00
14	14	00	14	00
15	15	00	15	00
16	16	00	16	00
17	17	00	17	00
18	18	00	18	00

Continue to page 3 to complete Section A



SECTION A—BUSINESS INCENTIVE AND OTHER TAX CREDITS (continued)		A. Spouse		B. Yourself	
19	Enter railroad maintenance and improvement credit (attach Schedule RR-I).....	19	00	19	00
20	Enter Endow Kentucky credit (attach Schedule ENDOW)	20	00	20	00
21	Add lines 1 through 20, Columns A and B. Enter here and on page 1, line 15 ..	21	00	21	00

SECTION B—PERSONAL TAX CREDITS **Check Regular** **Check both if 65 or over** **Check both if blind**

1 (a) Credits for yourself: 1 Enter number of boxes checked on line 1

(b) Credits for spouse:

2 **Dependents:**

First name	Last name	Dependent's Social Security number	Dependent's relationship to you	Check if qualifying child for family size tax credit
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

2 Enter number of dependents who:

- lived with you.....
- did not live with you (see instructions).....
- other dependents.....

3 Add total number of credits claimed on lines 1 and 2.
If married filing separately on a combined return (Filing Status 2), each taxpayer must claim his or her own credits from line 1, divide the credits on line 2, and enter the totals in Boxes 3A and 3B. All other filers enter the amount from line 3 in Box 3B

3 Enter total credits.....

Spouse	Yourself
•3A	•3B
x \$20	x \$20
4A	4B

4 Multiply credits on line 3A by \$20 and enter on line 4A. Multiply credits on line 3B by \$20 and enter on line 4B. **Enter here and on page 1, line 17, Columns A and B**

SECTION C—FAMILY SIZE TAX CREDIT (List the name and Social Security number of qualifying children that are not claimed as dependents in Section B.)

First name	Last name	Social Security number	First name	Last name	Social Security number

Attach a complete copy of federal Form 1040 if you received farm, business, or rental income or loss. If not required, check here.

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.

Your Signature (If joint or combined return, both must sign.) Spouse's Signature Date Signed ()

Telephone Number (daytime)

Typed or Printed Name of Preparer Other than Taxpayer I.D. Number of Preparer Date

Firm Name EIN Date

DRAFT
6 / 30 / 11

Mail to: **REFUNDS** Kentucky Department of Revenue, Frankfort, KY 40618-0006.

PAYMENTS Kentucky Department of Revenue, Frankfort, KY 40619-0008.

5695-K

41A720-S7 (10-11)
Commonwealth of Kentucky
DEPARTMENT OF REVENUE



DRAFT
6/23/11

2011

- See instructions.
- Attach to Form 720, 720S, 725, 740, 740-NP, 741, 765 or 765-GP

Kentucky Energy Efficiency Products Tax Credit
KRS 141.435 to KRS 141.436

Name of Entity	Federal Identification Number	Kentucky Corporation/LLET Account Number (if applicable)
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Part I-Qualifications

	Yes	No
■ Was the installation of the energy efficiency products completed before January 1, 2011?		
■ Was the installation of the energy efficiency products completed after December 31, 2011?		
■ Have you taken a tax credit as provided by KRS 141.437 for an ENERGY STAR home or an ENERGY STAR manufactured home?		

If you answered "yes" to any of the questions above, STOP; you do not qualify for these credits.

If you answered "no" to all of the questions above, go to Part II.

Part II-Installation of Energy Efficiency Products

Residence or Single-family or Multifamily Residential Rental Unit:				
1. Qualified upgraded insulation costs	1	00		
2. Multiply line 1 by 30% (.30)	2	00		
3. Credit from pass-through entities	3	00		
4. Add lines 2 and 3	4	00		
5. Maximum Credit amount	5	\$100 00		
6. Enter the smaller of line 4 or line 5	6		00	
7. Qualified energy-efficient windows and storm doors	7	00		
8. Multiply line 7 by 30% (.30)	8	00		
9. Credit from pass-through entities	9	00		
10. Add lines 8 and 9	10	00		
11. Maximum Credit amount	11	\$250 00		
12. Enter the smaller of line 10 or line 11	12		00	
13. Qualified energy property	13	00		
14. Multiply line 13 by 30% (.30)	14	00		
15. Credit from pass-through entities	15	00		
16. Add lines 14 and 15	16	00		
17. Maximum Credit amount	17	\$250 00		
18. Enter the smaller of line 16 or line 17	18		00	
19. Add lines 6, 12 and 18	19		00	
20. Maximum Credit amount	20	\$500 00		
21. Enter the smaller of line 19 or line 20	21		00	
Residence or Single-family Residential Rental Unit:				
22. Qualified active solar space-heating system	22	00		
23. Qualified passive solar space-heating system	23	00		
24. Qualified combined active solar space-heating and water-heating system	24	00		
25. Qualified solar water-heating system	25	00		
26. Qualified wind turbine or wind machine	26	00		
27. Add lines 22 through 26	27	00		
28. Multiply line 27 by 30% (.30)	28	00		
29. Credit from pass-through entities	29	00		
30. Add lines 28 and 29	30	00		
31. Qualified solar photovoltaic system-Watts of direct current (DC) _____ X \$3	31	00		
32. Credit from pass-through entities	32	00		
33. Add lines 31 and 32	33	00		
34. Enter the larger of line 30 or line 33	34		00	
35. Maximum Credit amount	35	\$500 00		
36. Enter the smaller of line 34 or line 35	36		00	



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Part II-Installation of Energy Efficiency Products (continued)

Multifamily Residential Rental Unit or Commercial Property:			
37. Qualified active solar space-heating system	37	00	
38. Qualified passive solar space-heating system	38	00	
39. Qualified combined active solar space-heating and water-heating system	39	00	
40. Qualified solar water-heating system	40	00	
41. Qualified wind turbine or wind machine	41	00	
42. Add lines 37 through 41	42	00	
43. Multiply line 42 by 30% (.30)	43	00	
44. Credit from pass-through entities	44	00	
45. Add lines 43 and 44	45	00	
46. Qualified solar photovoltaic system-Watts of direct current (DC) _____ X \$3	46	00	
47. Credit from pass-through entities	47	00	
48. Add lines 46 and 47	48	00	
49. Enter the larger of line 45 or line 48	49	00	
50. Maximum Credit amount	50	\$1,000	00
51. Enter the smaller of line 49 or line 50	51		00
Commercial Property:			
52. Qualified energy-efficient interior lighting system	52	00	
53. Multiply line 52 by 30% (.30)	53	00	
54. Credit from pass-through entities	54	00	
55. Add lines 53 and 54	55	00	
56. Maximum Credit amount	56	\$500	00
57. Enter the smaller of line 55 or line 56	57		00
58. Qualified energy-efficient heating, cooling, ventilation, or hot water system	58	00	
59. Multiply line 58 by 30% (.30)	59	00	
60. Credit from pass-through entities	60	00	
61. Add lines 59 and 60	61	00	
62. Maximum Credit amount	62	\$500	00
63. Enter the smaller of line 61 or line 62	63		00
64. Add lines 57 and 63	64		00
65. Add lines 21, 36, 51 and 64	65		00
66. Enter any unused Energy Efficiency Products Tax Credit earned in 2010, if applicable	66		00
67. Add lines 65 and 66	67		00

Enter the amounts from Form 5695-K on the applicable tax return as follows:

Individual, estate or trust filing:

- Form 740-Enter the amount from Line 67 on Form 740, Section A, Line 17.
- Form 740-NP-Enter the amount from Line 67 on Form 740-NP, Section A, Line 17.
- Form 741-Enter the amount from Line 67 on Form 741, Line 18.

Corporation or pass-through entity filing:

- Form 720-Enter the amount from Line 67 on Schedule TCS, Line 16.
- Form 720S-Enter the amounts from Lines 6, 12, 18, 36, 36, 51, 51, 57 and 63 on Form 720S, Schedule K, Lines 27, 28, 29, 30, 31, 32, 33, 34 and 35, respectively; and the amount from Line 67 on Schedule TCS, Line 16.
- Form 725-Enter the amount from Line 67 on Schedule TCS, Line 16.
- Form 765-Enter the amounts from Lines 6, 12, 18, 36, 36, 51, 51, 57 and 63 on Form 765, Schedule K, Lines 28, 29, 30, 31, 32, 33, 34, 35 and 36, respectively; and the amount from Line 67 on Schedule TCS, Line 16.
- Form 765-GP-Enter the amounts from Lines 6, 12, 18, 36, 36, 51, 51, 57 and 63 on Form 765-GP, Schedule K, Lines 28, 29, 30, 31, 32, 33, 34, 35 and 36, respectively.



Attach to Form 740 or Form 740-NP.

KENTUCKY EDUCATION TUITION TAX CREDIT

Enter name(s) as shown on Form 740 or Form 740-NP, page 1.

Your Social Security Number

If you have a credit carry forward from previous years, see Page 2, Part V.

Caution: Requirements for the 2011 Kentucky Education Tuition Tax Credit are different from the federal education requirements. Please review instructions to determine if you meet the qualifications for this credit.

PART I - Qualifications

- Are all expenses claimed on this form from an eligible educational institution located within the Commonwealth of Kentucky (Kentucky institution)?
Are all of the expenses claimed on this form for undergraduate studies?
Is your Kentucky filing status single; married filing separately on a combined return; or married filing a joint return?

Table with 2 columns: Yes, No. Includes a large green 'DRAFT 6/8/11' watermark.

If you answered "No" to any of these questions above, STOP, you do not qualify for this credit.

If you answered "Yes" to all questions above, go to Part II.

PART II - Hope Credit (List only expenses from Kentucky institutions.) See Instructions

Table for Hope Credit with columns: (a) Student Name SSN, (c) Qualified Expenses, (d) Enter the smaller of the amount in column (c) or \$1,200, (e) Add column (c) and column (d), (f) Enter one-half of the amount in column (e). Includes rows for institution name and address.

2. Tentative Hope Credit. Add the amounts on line 1, column (f). If you are taking the Lifetime Learning Credit for another student, go to Part III; otherwise, go to line 7

PART III - Lifetime Learning Credit

Table for Lifetime Learning Credit with columns: (a) Student Name, (b) Student SSN, (c) Name and Address of Kentucky Institution, (d) Qualified Expenses (See instructions)

- 4. Add the amounts on line 3, column (d) and enter total here
5. Enter the smaller of line 4 or \$10,000
6. Tentative Lifetime Learning Credit. Multiply line 5 by 20% (.20), enter here
7. Tentative Kentucky Education Credits. Add lines 2 and 6, enter here and on Page 2, line 8

Note: If you have an unused credit from prior year(s), complete Page 2, Part V to determine your carryforward amount. You must have completed Form 8863-K in prior years to claim any allowable unused credit carryforward.



PART IV – Allowable Education Credits

8. Enter tentative Kentucky Education Credits from page 1, line 7	8	
9. Enter: \$122,000 if married filing jointly or married filing separately on a combined return; \$61,000 if single.....	9	
10. Enter the amount from Form 1040, line 37, or Form 1040A, line 21	10	
11. Subtract line 10 from line 9. If zero or less, STOP; you cannot take any education credits for Kentucky	11	
12. Enter \$20,000 if married filing jointly or married filing separately on a combined return; \$10,000 if single	12	
13. If line 11 is equal to or more than line 12, enter the amount from line 8 on line 14 and go to line 15. If line 11 is less than line 12, divide line 11 by line 12. Enter the result as a decimal (rounded to at least three places).....	13	X .
14. Multiply line 8 by the decimal amount on line 13 and enter here.....	14	
15. Multiply the amount on line 14 by 25% (.25) and enter total here	15	
16. Enter tentative tax from Form 740 or Form 740-NP, page 1, line 22	16	
17. Enter amount from Part V, line 37. If Part V, line 37 is blank, enter -0-	17	
18. Subtract line 17 from line 16	18	
19. Enter the smaller of line 18 or line 15	19	
20. Add lines 17 and 19. Enter here and on Form 740 or Form 740-NP, line 23. This is your allowable 2011 education credit.....	20	
21. If line 18 is smaller than line 15, subtract line 18 from line 15. This is the amount of unused credit carryforward from 2011 to 2012 . Enter here and on the 2011 Carryforward Worksheet, Line E, provided below	21	

PART V – Credit Carryforward from Prior Years

22. Enter tentative tax from Form 740 or Form 740-NP, page 1, line 22	22	
23. Enter your credit carryforward from 2006.....	23	
24. Enter your credit carryforward from 2007.....	24	
25. Enter your credit carryforward from 2008.....	25	
26. Enter your credit carryforward from 2009.....	26	
27. Enter your credit carryforward from 2010	27	
28. Add lines 23 through 27 and enter total here	28	
29. Subtract line 23 from line 22. If zero or less, enter -0-.....	29	
30. Enter 2007 credit carryforward to 2012. Subtract line 29 from line 24. If zero or less, enter -0-....	30	
31. Subtract line 24 from line 29. If zero or less, enter -0-.....	31	
32. Enter 2008 credit carryforward to 2012. Subtract line 31 from line 25. If zero or less, enter -0-....	32	
33. Subtract line 25 from line 31. If zero or less, enter -0-	33	
34. Enter 2009 credit carryforward to 2012. Subtract line 33 from line 26. If zero or less, enter -0-....	34	
35. Subtract line 26 from line 33. If zero or less, enter -0-.....	35	
36. Enter 2010 credit carryforward to 2012. Subtract line 35 from line 27. If zero or less, enter -0-	36	
37. Enter the smaller of line 22 or line 28	37	

2011 Carryforward Worksheet

- A. From Part V, Line 30, 2007 to 2012 _____
- B. From Part V, Line 32, 2008 to 2012 _____
- C. From Part V, Line 34, 2009 to 2012 _____
- D. From Part V, Line 36, 2010 to 2012 _____
- E. From Part IV, Line 21, 2011 to 2012 _____

If you have a carryforward of credit, maintain a copy of this worksheet or Form 8863-K for your records. This information will be needed to prepare future returns.

DO NOT MAIL! RETAIN FOR YOUR RECORDS.

8879-K

42A740-S22

Department of Revenue



KENTUCKY INDIVIDUAL INCOME TAX DECLARATION FOR ELECTRONIC FILING

2011

Declaration Control Number (DCN) ▶

Taxpayer's Name

Taxpayer's Social Security number

Spouse's Name

Spouse's Social Security number

PART I—Tax Return Information (Whole Dollars Only)

Table with 5 rows and 4 columns: Line number, Description, 740 line, 740-EZ line, Amount. Includes a 'DRAFT 6/23/11' watermark.

PART II— Direct Deposit of Refund or Direct Debit of Tax Amount Due (See Instructions)

Form fields for RTN, DAN, account type, and debit amount/date. Includes instructions for RTN and DAN.

PART III—Declaration of Taxpayer (Sign only after Part I is completed.)

- 11. I consent that my refund be directly deposited...
12. I do not want direct deposit of my refund...
13. I authorize the Kentucky Department of Revenue...

If I have filed a balance due return, I understand that if the Kentucky Department of Revenue does not receive my full and timely payment...

Under penalties of perjury, I declare that the information I have given my electronic return originator (ERO) or transmitter...

Your Signature (If joint or combined return, both must sign) Spouse's Signature Telephone Number (daytime) Date Signed

PART IV—Declaration and Signature of Electronic Return Originator and Paid Preparer

I declare that I have reviewed the above taxpayer's return and that the entries on Form 8879-K are complete and correct to the best of my knowledge.

Check [] if also paid preparer. Check [] if self-employed.

ERO's Use Only

Signature, Date, I.D. Number of ERO, Firm's name, FEIN, ZIP code

Paid Preparer's Use Only

Check [] if self-employed.

Preparer's Signature, Date, I.D. Number of Preparer, Firm's name, FEIN, ZIP code

Keep this form with your tax return. Do not mail!

Attach Copy of Forms W-2, W-2G and 1099-R Here

KENTUCKY

For the year Jan. 1–Dec. 31, 2011, or other tax year beginning , 2011, ending , 20 See separate instructions.

Your first name and initial Last name Your social security number

If a joint return, spouse's first name and initial Last name Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). Presidential Election Campaign

Foreign country name Foreign province/county Foreign postal code Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. You Spouse

Filing Status

- 1 Single
2 Married filing jointly (even if only one had income)
3 Married filing separately. Enter spouse's SSN above and full name here.
4 Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here.
5 Qualifying widow(er) with dependent child

Exemptions

Table with columns for dependent details: (1) First name, Last name, (2) Dependent's social security number, (3) Dependent's relationship to you, (4) if child under age 17 qualifying for child tax credit. Includes summary boxes for 'Boxes checked on 6a and 6b', 'No. of children on 6c who...', and 'Add numbers on lines above'.

Income

Table for income reporting with lines 7 through 22. Includes sub-rows for interest (8a, 8b), dividends (9a, 9b), and social security benefits (20a, 20b). Includes instructions for attaching forms W-2, W-2G, and 1099-R.

Adjusted Gross Income

Table for adjusted gross income with lines 23 through 37. Includes categories like educator expenses, business expenses, health savings account deduction, moving expenses, etc.

		a Employee's social security number		OMB No. 1545-0008					
b Employer identification number (EIN)			1 Wages, tips, other compensation		2 Federal income tax withheld				
c Employer's name, address, and ZIP code			3 Social security wages		4 Social security tax withheld				
			5 Medicare wages and tips		6 Medicare tax withheld				
			7 Social security tips		8 Allocated tips				
d Control number			9 Advance EIC payment		10 Dependent care benefits				
e Employee's first name and initial		Last name		Suff.		11 Nonqualified plans		12a	
						13 Statutory employee	Retirement plan	Third-party sick pay	12b
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						14 Other		12c	
								12d	
f Employee's address and ZIP code									
15 State	Employer's state ID number		16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form **W-2** Wage and Tax Statement

2009

Department of the Treasury—Internal Revenue Service

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return.

		a Employee's social security number		OMB No. 1545-0008					
b Employer identification number (EIN)			1 Wages, tips, other compensation		2 Federal income tax withheld				
c Employer's name, address, and ZIP code			3 Social security wages		4 Social security tax withheld				
			5 Medicare wages and tips		6 Medicare tax withheld				
			7 Social security tips		8 Allocated tips				
d Control number			9 Advance EIC payment		10 Dependent care benefits				
e Employee's first name and initial		Last name		Suff.		11 Nonqualified plans		12a	
						13 Statutory employee	Retirement plan	Third-party sick pay	12b
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						14 Other		12c	
								12d	
f Employee's address and ZIP code									
15 State	Employer's state ID number		16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form **W-2** Wage and Tax Statement

2009

Department of the Treasury—Internal Revenue Service

Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return.