



For calendar year or other taxable year beginning \_\_\_\_\_, 2017, and ending \_\_\_\_\_, 20\_\_\_\_.

A. Spouse's Social Security Number

B. Your Social Security Number

Grid for Spouse's Social Security Number

Grid for Your Social Security Number

Name—Last, First, Middle Initial (Joint or combined return, give both names and initials.)

Grid for Name

Mailing Address (Number and Street including Apartment Number or P.O. Box)

Grid for Mailing Address

City, Town or Post Office

State

ZIP Code

Grid for City, Town or Post Office

Grid for State

Grid for ZIP Code

FILING STATUS (see instructions)

- 1 Single
2 Married, filing joint return.
3 Married, filing separate returns. Enter spouse's Social Security number above and full name here.

Check if applicable:

- Amended (Enclose copy of 1040X, if applicable.)
Military Spouse

POLITICAL PARTY FUND

Designating \$2 will not change your refund or tax due.

- A. Spouse B. Yourself
Democratic (1) (4)
Republican (2) (5)
No Designation (3) (6)

RESIDENCY STATUS (check one box)

- 4 Full-year nonresident. I did not live in Kentucky during the year. Enter state of residence as of December 31, 2017.
5 Part-year resident. Complete appropriate line(s) below.
Moved into Kentucky / / 17. State moved from.
Moved out of Kentucky / / 17. State moved to.
6 You must file a 740-NP-R if you are a full-year resident of a reciprocal state (IL, IN, MI, OH, VA, WV or WI) with Kentucky income of wages and salaries only.

COMPLETE SECTIONS A, B, C AND D ON PAGES 2 THROUGH 4 BEFORE COMPLETING LINES 7 THROUGH 28.

INCOME/TAX

Table with 28 rows for income and tax calculations, including lines for percentage, federal adjusted gross income, Kentucky adjusted gross income, nonitemizers, itemizers, taxable income, tax from table, credits, and final tax liability.



**REFUND/TAX PAYMENT SUMMARY**

29	Enter amount from page 1, line 28. This is your <b>Total Tax Liability</b> .....	29		00	
30	(a) Enter <b>Kentucky income tax withheld</b> as shown on enclosed Schedule KW-2 .....	30(a)	00		
	(b) Enter 2017 Kentucky estimated tax payments .....	30(b)	00		
	(c) Enter 2017 refundable certified rehabilitation credit .....	30(c)	00		
	(d) Enter 2017 film industry tax credit .....	30(d)	00		
	(e) Enter <b>Nonresident Withholding</b> from Form PTE-WH, line 9 .....	30(e)	00		
	(f) <b>For amended return</b> ; enter amount paid with original return plus additional payment(s) made after it was filed .....	30(f)	00		
31	Add lines 30(a) through 30(f) .....	31		00	
32	(a) If line 31 is larger than line 29, enter amount overpaid .....	32(a)	00		
	(b) Estimated tax penalty and/or interest. <input type="checkbox"/> <b>Check if Form 2210-K attached</b> .....	32(b)	00		
	(c) <b>For amended return</b> ; overpayment, if any, shown on original return .....	32(c)	00		
	(d) Subtract line 32(b) and 32(c) from 32(a), enter <b>AMOUNT OVERPAID</b> (see instructions for amended returns) .....	32(d)		00	
33	<i>Fund Contributions; see instructions.</i>				
(a)	<b>Nature and Wildlife Fund</b> .....	00	(e) <b>Farms to Food Banks Trust Fund</b> .....		00
(b)	<b>Child Victims' Trust Fund</b> .....	00	(f) <b>Local History Trust Fund</b> .....		00
(c)	<b>Veterans' Program Trust Fund</b> ..	00	(g) <b>Special Olympics Kentucky</b> .....		00
(d)	<b>Breast Cancer Research/ Education Trust Fund</b> .....	00	(h) <b>Pediatric Cancer Research Trust Fund</b> ..		00
			(i) <b>Rape Crisis Center Trust Fund</b> .....		00
34	Add lines 33(a) through 33(i) .....	34		00	
35	Amount of line 32(d) to be <b>CREDITED TO YOUR 2018 ESTIMATED TAX</b> .....	35	<b>CREDIT FORWARD</b>	00	
36	Subtract lines 34 and 35 from line 32(d). Amount to be <b>REFUNDED TO YOU</b> .....	36	<b>REFUND</b>	00	
	<b>REFUND OPTIONS (Not available for amended returns)</b> Check here if you would like your refund issued on a Bank of America Prepaid Debit Card <input type="checkbox"/> Check here if you would like to receive your Debit Card material in Spanish <input type="checkbox"/>				
37	If line 29 is larger than line 31, enter <b>ADDITIONAL TAX DUE</b> (see instructions for amended returns) .....	37		00	
38	(a) Estimated tax penalty <input type="checkbox"/> <b>Check if Form 2210-K attached</b> .....	38(a)	00		
	(b) Estimated tax interest .....	38(b)	00		
	(c) Interest .....	38(c)	00		
	(d) Late payment penalty .....	38(d)	00		
	(e) Late filing penalty .....	38(e)	00		
39	Add lines 38(a) through 38(e) .....	39		00	
40	Add lines 37 and 39 and enter here. This is the <b>AMOUNT YOU OWE</b> .....	40	<b>OWE</b>	00	

**SECTION A—BUSINESS INCENTIVE AND OTHER TAX CREDITS**

1	Enter nonrefundable limited liability entity credit .....	1		00
2	Enter Kentucky small business tax credit .....	2		00
3	Enter skills training investment credit (attach copy(ies) of certification) .....	3		00
4	Enter nonrefundable certified rehabilitation credit .....	4		00
5	Enter credit for tax paid to another state ( <b>attach copy of other state's return(s)</b> ) .....	5		00
6	Enter unemployment credit (attach Schedule UTC) .....	6		00
7	Enter recycling and/or composting equipment credit (attach Schedule RC) .....	7		00
8	Enter Kentucky investment fund credit (attach copy(ies) of certification) .....	8		00
9	Enter coal incentive credit .....	9		00
10	Enter qualified research facility credit (attach Schedule QR) .....	10		00
11	Enter GED incentive credit (attach Form DAEL-31) .....	11		00
12	Enter voluntary environmental remediation credit (attach Schedule VERB) .....	12		00
13	Enter biodiesel and renewable diesel credit .....	13		00
14	Enter environmental stewardship credit .....	14		00
15	Enter clean coal incentive credit .....	15		00
16	Enter ethanol credit (attach Schedule ETH) .....	16		00
17	Enter cellulosic ethanol credit (attach Schedule CELL) .....	17		00
18	Enter railroad maintenance and improvement credit (attach Schedule RR-I) .....	18		00



SECTION A—BUSINESS INCENTIVE AND OTHER TAX CREDITS (continued)

Table with 3 columns: Description, Line Number, and Amount. Rows include Endow Kentucky credit, New Markets Development Program credit, food donation credit, distilled spirits credit, angel investor credit, and a total line for lines 1-23.

SECTION B—PERSONAL TAX CREDITS

Form for personal tax credits with checkboxes for 'Check Regular', 'Check all four if 65 or over', 'Check all four if blind', and 'Check both for Kentucky National Guard'. Includes sub-questions for self and spouse.

1 Enter number of boxes checked on line 1

2 Dependents:

2 Enter number of dependents who:

Table for dependents with columns: First and Last Name, Social Security number, and relationship to you. Includes a checkbox for 'Check if qualifying child for family size tax credit'.

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

3 Add lines 1 and 2 and enter here

3
x \$10
4

4 Multiply credits on line 3 by \$10. Enter here and on page 1, line 17

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.)

Table for family size tax credit with columns: First and Last Name, Social Security number, First and Last Name, Social Security number.

A copy of pages 1 and 2 of your federal income tax return and all supporting schedules must be enclosed with Kentucky Form 740-NP.

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.

Signature and identification section with fields for: Your Signature, Spouse's Signature, Typed or Printed Name of Preparer, Firm Name, EIN, Driver's License/State Issued ID No., Date Signed, Telephone Number, and a checkbox for 'May the DOR discuss this return with this preparer?'.

REFUNDS MAIL TO: Kentucky Department of Revenue, P.O. Box 856970, Louisville, KY 40285-6970

PAYMENTS MAIL TO: Kentucky Department of Revenue, P.O. Box 856980, Louisville, KY 40285-6980. Includes instructions to make checks payable to the Kentucky State Treasurer and visit www.revenue.ky.gov.

