





	For	calendar year or other taxable year beginni	ng , 2012, and ending	, 20	I	Full-Year Reside	nts U	niy	2	UIZ
		A. Spouse's Social Security Number	B. Your Social Security Number							
	N	ame—Last, First, Middle Initial (Joint or combined	return, give both names and initials.)							
	M	ailing Address (Number and Street including Apar	ment Number or P.O. Box)							
	Ci	ty, Town or Post Office	State ZIP Code							
		FILING STATUS (see instruct			POLI	FICAL	PARTY	FUND		
	1	Single				Designating \$2 will				
	2	2 Married, filing separately on this combined return. (If both had income.)						Spouse		ourself
	3 4	Married, filing joint return.	no Entor onouro's Social Socurity n	umbora	boyo	Democratic Republican		1) 🔲 2) 🔲		4) 📙 5) 🗖
	4	Married, filing separate returns. Enter spouse's Social Security num and full name here.				No Designation		2) 🔲 3) 🗌		6)
	INC	COME/TAX			Α.	Spouse (Use if		В.	Yourself	
	5	Enter amount from federal Form 1040			Filing	Status 2 is checked.)			(or Joint))
		1040EZ, line 4. (If total of Columns A may qualify for the Family Size Tax C	-	• 5		00	• 5			00
	~	Additions from Schedule M, line 8				00	• 6			00
						00	Ĭ			00
nlγ	7	Add lines 5 and 6				00	7			00
e O	8	Subtractions from Schedule M, line 2				00	• 8			00
Pag	9	Subtract line 8 from line 7. This is you		9			9			
ob	10	Itemizers: Enter itemized deductions		• 10		00				00
apl		Nonitemizers: Enter \$2,290 in Column				00	• 10			00
	11	Subtract line 10 from line 9. This is ye	our Taxable Income	• 11		00	• 11			00
	12	Enter tax from Tax Table, Computation				00				00
Here-		Check if from Schedule J				00	12			00
nent	13	Enter tax from Form 4972-K 🔲 ; Sch	edule RC-R 🔲	• 13		00	• 13			00
	14	Add lines 12 and 13 and enter total he	ere	14		00	14			00
Рауг	15	Enter amounts from page 3, Section A	A, lines 22A and 22B	15		00	15			00
ment(s) and	16	Subtract line 15 from line 14. If line 1	5 is larger than line 14, enter zero	16		00	16			00
	17	Enter personal tax credit amounts fro	om page 3, Section B, lines 4A and 4E	• 17		00	• 17			00
	18	Subtract line 17 from line 16. If line 17	7 is larger than line 16, enter zero	18		00	18			00
	19	Add tax amount(s) in Columns A and B, line 18 and enter here								00
	20	Check the box that represents your total family size (see instructions before completing lines 20 and 21)						1 🗆	2 3	
rtinç	21	Multiply line 19 by Family Size Tax Credit decimal amount (%) and enter here								00
odd	22	Subtract line 21 from line 19					22			00
Sul	23	Enter the Education Tuition Tax Cred	it from Form 8863-K				• 23			00
Other Supporting	24	Subtract line 23 from line 22								00
s), O	25	Enter Child and Dependent Care Cred								
V-2(from federal Form 2441, line 9 >	x:	20% (.20)		• 25			00
Form W-2(s),	26	Income Tax Liability. Subtract line 25	-							00
For	27	Enter KENTUCKY USE TAX due on								00
Attach	28	Add lines 26 and 27. Enter here and c	28			00				
At										



29 Enter amount from page 1, line 28. This is your Total Tax Liability • 29 30 (a) Enter Kentucky income tax withheld as shown on attached • 30(a) 00 (b) Enter 2012 Kentucky estimated tax payments. • 30(b) 00 (c) Enter 2012 Kentucky estimated tax payments. • 30(c) 00 (d) Enter 2012 Kentucky estimated tax payments. • 30(c) 00 (d) Enter 2012 Film industry tax credit (KRS 141.382(1)(b)) • 30(c) 00 31	00 00 00 00 00 00 00 00 00 00 00
2012 Form W-2(s) and other supporting statements • 30(a) 00 (b) Enter 2012 Kentucky estimated tax payments	00 00 00 00 00 00
(b) Enter 2012 Kentucky estimated tax payments	00 00 00 00 00 00
(c) Enter 2012 refundable certified rehabilitation credit (KRS 141.382(1)(b)) • 30(c) 00 (d) Enter 2012 film industry tax credit (KRS 141.383)	00 00 00 00 00 00
(d) Enter 2012 film industry tax credit (KRS 141.383) • 30(d) 00 31 Add lines 30(a) through 30(d) • 31 32 If line 31 is larger than line 29, enter AMOUNT OVERPAID (see instructions). 32 Fund Contributions; See instructions. 32 SNature and Wildlife Fund \$10 \$25 \$50 0 Other • 33 00 34 Child Victims' Trust Fund \$10 \$25 \$50 0 Other • 33 00 35 Veterans' Program Trust Fund \$10 \$25 \$50 0 Other • 34 00 36 Breast Cancer Research/Education Trust Fund \$10 \$25 \$50 0 Other • 36 00 37 Add lines 33 through 36 37 38 Amount of line 32 to be CREDITED TO YOUR 2013 ESTIMATED TAX • 38 39 Subtract lines 37 and 38 from line 32. Amount to be REFUNDED TO YOU REFUND • 39 40 If line 29 is larger than line 31, enter ADDITIONAL TAX DUE • 440 • 440 41 (a) Estimated tax penalty and/or interest. Check if Form 2210-K attached 41(a) 00 (b) Interest 41(b) 00 • 41(c) 00 • 42 42 41(d) 00 • 42 • 42 • 42	00 00 00 00 00 00
31 Add lines 30(a) through 30(d) • 31 32 If line 31 is larger than line 29, enter AMOUNT OVERPAID (see instructions) 32 Fund Contributions; See instructions. 32 33 Nature and Wildlife Fund \$10 \$25 \$50 Other • 33 00 \$10 \$25 34 Child Victims' Trust Fund \$10 35 Veterans' Program Trust Fund \$10 36 Breast Cancer Research/Education Trust Fund \$10 37 Add lines 33 through 36 38 37 39 Subtract lines 37 and 38 from line 32. Amount to be REFUNDED TO YOU 16 If line 29 is larger than line 31, enter ADDITIONAL TAX DUE 41 (a) (b) Interest 41(a) (c) Late payment penalty 41(c) (d) Late filing penalty 41(d)	00 00 00 00 00 00
32 If line 31 is larger than line 29, enter AMOUNT OVERPAID (see instructions) 32 Fund Contributions; See instructions. \$10 33 Nature and Wildlife Fund \$10 34 Child Victims' Trust Fund \$10 35 Veterans' Program Trust Fund \$10 36 Breast Cancer Research/Education Trust Fund \$10 37 Add lines 33 through 36 38 37 39 Subtract lines 37 and 38 from line 32. Amount to be REFUNDED TO YOU 41 (a) Estimated tax penalty and/or interest. Check if Form 2210-K attached 41(a) 41(a) 00 (c) Late payment penalty	00 00 00 00 00 00
Fund Contributions; See instructions. (Enter amount(s) checked) Nature and Wildlife Fund \$10 \$25 \$50 Other 33 00 34 Child Victims' Trust Fund \$10 \$25 \$50 Other • 33 00 34 Child Victims' Trust Fund \$10 \$25 \$50 Other • 34 00 35 Veterans' Program Trust Fund \$10 \$25 \$50 Other • 35 00 36 Breast Cancer Research/Education Trust Fund \$10 \$25 \$50 Other • 36 000 37 Add lines 33 through 36 37 37 38 38 39 30 31 33 34 34	00 00 00 00
33 Nature and Wildlife Fund	00 00 00 00 00 00 00
34 Child Victims' Trust Fund \$10 \$25 \$50 Other • 34 00 35 Veterans' Program Trust Fund \$10 \$25 \$50 Other • 35 00 36 Breast Cancer Research/Education Trust Fund \$10 \$25 \$50 Other • 36 00 37 Add lines 33 through 36 37	00 00 00 00 00 00 00
35 Veterans' Program Trust Fund \$10 \$25 \$50 Other • 35 00 36 Breast Cancer Research/Education Trust Fund \$10 \$25 \$50 Other • 36 00 37 Add lines 33 through 36 37 38 37 38 Amount of line 32 to be CREDITED TO YOUR 2013 ESTIMATED TAX • 38 38 39 Subtract lines 37 and 38 from line 32. Amount to be REFUNDED TO YOU REFUND • 39 40 If line 29 is larger than line 31, enter ADDITIONAL TAX DUE • 40 41 (a) Estimated tax penalty and/or interest. Check if Form 2210-K attached 41(a) 00 (b) Interest 41(b) 00 00 00 00 (d) Late filing penalty 41(d) 00 00 00 42 4dd lines 41(a) through 41(d). Enter here. • 42 • 42	00 00 00 00 00 00 00
36 Breast Cancer Research/Education Trust Fund \$10 \$25 \$50 Other • 36 00 37 Add lines 33 through 36 37 38 Amount of line 32 to be CREDITED TO YOUR 2013 ESTIMATED TAX • 38 39 Subtract lines 37 and 38 from line 32. Amount to be REFUNDED TO YOU • 39 40 If line 29 is larger than line 31, enter ADDITIONAL TAX DUE • 40 41 (a) Estimated tax penalty and/or interest. Check if Form 2210-K attached 41(a) (b) Interest 41(b) 00 (c) Late payment penalty 41(c) 00 (d) Late filing penalty	00 00 00 00 00 00 00
37 Add lines 33 through 36 37 38 Amount of line 32 to be CREDITED TO YOUR 2013 ESTIMATED TAX • 38 39 Subtract lines 37 and 38 from line 32. Amount to be REFUNDED TO YOU • 39 40 If line 29 is larger than line 31, enter ADDITIONAL TAX DUE • 40 41 (a) Estimated tax penalty and/or interest. Check if Form 2210-K attached 41(b) 00 (b) Interest 41(b) (c) Late payment penalty 41(c) (d) Late filing penalty 41(d) 42	00 00 00 00 00 00 00
38 Amount of line 32 to be CREDITED TO YOUR 2013 ESTIMATED TAX • 38 39 Subtract lines 37 and 38 from line 32. Amount to be REFUNDED TO YOU REFUND • 39 40 If line 29 is larger than line 31, enter ADDITIONAL TAX DUE • 40 41 (a) Estimated tax penalty and/or interest. Check if Form 2210-K attached 41(a) 00 (b) Interest 00 (c) Late payment penalty 41(c) 00 (d) Late filing penalty	00 00 00 00 00 00 00
39 Subtract lines 37 and 38 from line 32. Amount to be REFUNDED TO YOU	00 00
40 If line 29 is larger than line 31, enter ADDITIONAL TAX DUE • 40 41 (a) Estimated tax penalty and/or interest. • Check if Form 2210-K attached 41(a) 00 (b) Interest • 40 • 40 (c) Late payment penalty • 40 00 (d) Late filing penalty	00
41 (a) Estimated tax penalty and/or interest. 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
(b) Interest	
(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	
(d) Late filing penalty	
42 Add lines 41(a) through 41(d). Enter here	
43 Add lines 40 and 42 and enter here. This is the AMOUNT YOU OWE	00
Make check payable to Kentucky State Treasurer or visit www.revenue.ky.gov for more options. OFFICIAL USE ONL	ILY
• Write your Social Security number and "KY Income Tax—2012" on the check.	PWR
SECTION A – BUSINESS INCENTIVE AND OTHER TAX CREDITS A. Spouse B. Yourself	
1 Enter nonrefundable limited liability entity credit (KRS 141.0401(2)) 1 00 1	00
2 Enter Kentucky small business investment credit	00
	00
	00
	00
6 Enter unemployment credit (attach Schedule UTC)	00
7 Enter recycling and/or composting equipment credit (attach Schedule RC) 7 00 7	00
8 Enter Kentucky investment fund credit (attach copy(ies) of certification)	00
9 Enter coal incentive credit	00
10 Enter qualified research facility credit (attach Schedule QR) 10 00 10	1
11 Enter GED incentive credit (attach Form DAEL-31) 11 00 11	00
12 Enter voluntary environmental remediation credit (attach Schedule VERB) 12 00 12	00
13 Enter biodiesel and renewable diesel credit	00
	00
13 Enter biodiesel and renewable diesel credit	00 00 00
13 Enter biodiesel and renewable diesel credit 14 Enter environmental stewardship credit	00 00 00 00
13Enter biodiesel and renewable diesel credit13001314Enter environmental stewardship credit14001415Enter clean coal incentive credit150015	00 00 00 00 00

Continue to page 3 to complete Section A



SECTION A-BUSINESS INCENTIVE AND OTHER TAX CREDITS (continued) A. Spouse									B. `	Yourself	F
19	Enter railroad maintenance and impro	vement cred	lit (attach Schedule RR-I)	19			00	19			00
20	Enter Endow Kentucky credit (attach S	Schedule END	DOW)	20			00	20			00
21	Enter New Markets Development Prog	gram credit		21			00	21			00
22	Add lines 1 through 21, Columns A an	d B. Enter he	ere and on page 1, line 15 .	22			00	22			00
SEC	CTION B-PERSONAL TAX CREDITS	Check Regu	ular Check both if 65 or o	ver	Check bo	oth if blind					
1	(a) Credits for yourself:						1		number of	Г	
	(b) Credits for spouse:								checked e 1		
2	Dependents:						2		number of idents who		
	First name Last name			ependen elationsh to you	ip ch	ck if qualifying ild for family ze tax credit		• live	d with you.		
									not live wit		
								(000	monuolioi		
								• othe	er depende	nts	
3	Add total number of credits claimed o			or mus	t claim h	is or her	3	Enter	total credit	s	
	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							S	oouse	Yo	urself
	filers enter the amount from line 3 in l	Box 3B					≻	•3A		•3B	
4	Multiply credits on line 3A by \$20 and	enter on line	e 4A. Multiply credits on line	3B bv	\$20 and				x \$20		x \$20
	enter on line 4B. Enter here and on pa			'				4A		4B	

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
		<u> </u>			

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	e of Preparer Other th	nan Taxpaver	I.D. Number of Preparer	Date	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Firm Name			EIN	Date	
	Mail to:	REFUNDS	Kentucky Department of R	evenue, Frankfor	t, KY 40618-0006.
		PAYMENTS	Kentucky Department of R	evenue, Frankfor	t, KY 40619-0008.