

740-X

42A740-X (11-16)
Department of Revenue



AMENDED
KENTUCKY INDIVIDUAL
INCOME TAX RETURN



20

For calendar year or
For fiscal year beginning, and ending

Filing Status: Check only one block.

- Original Amended
1. Single
2. Married, filing separately on this combined return
3. Married, filing joint return
4. Married, filing separate returns. Enter spouse's name and Social Security number as it appears on separate return.

Spouse's Social Security No.
Your Social Security No.
Last Name First Name (Joint or combined return, give both names and initials.)
Mailing Address Number and Street including Apartment Number or P.O. Box
City, Town or Post Office State ZIP Code

INCOME AND DEDUCTIONS

Table with 4 columns: Description, I-As Originally Reported or Adjusted, II-Net Change Increase or Decrease (see p. 2), III Correct Amount. Rows include KENTUCKY ADJUSTED GROSS INCOME, ITEMIZED DEDUCTIONS / STANDARD DEDUCTION, and TAXABLE INCOME.

TAX LIABILITY

Table with 4 columns: Description, I-As Originally Reported or Adjusted, II-Net Change Increase or Decrease (see p. 2), III Correct Amount. Rows include Enter tax from Form 740, Business Incentive Credits, Personal Tax Credits, Subtract lines 5 and 6 from line 4, Family Size Tax Credit, Education Tuition Tax Credit, Child and Dependent Care Credit, RESERVED, Income Tax Liability, Kentucky Use Tax, Total Tax Liability.

PAYMENTS AND CREDITS

Table with 4 columns: Description, I-As Originally Reported or Adjusted, II-Net Change Increase or Decrease (see p. 2), III Correct Amount. Rows include Kentucky Income Tax Withheld, Kentucky Estimated Tax Payments, Refundable Kentucky Corporation Tax Credit, Refundable certified rehabilitation credit, Film industry tax credit, Amount paid with original return, Total of lines 16 through 21.

REFUND OR AMOUNT DUE

Table with 4 columns: Description, I-As Originally Reported or Adjusted, II-Net Change Increase or Decrease (see p. 2), III Correct Amount. Rows include Overpayment, Subtract line 23 from line 22, Compute interest on the amount due, Add lines 25 and 26, If line 15, Column III, is less than line 24.



**PART I – TAX CREDITS** (This section must be completed for any increase or decrease in the number of personal tax credits claimed on original return)

1. Number of personal tax credits claimed on original return (Form 740, Section B, lines 3A and 3B) .....	
2. Number of personal tax credits claimed on this return.....	
3. Difference.....	

Explain any difference in detail below. Include name and Social Security number.

**PART II – FAMILY SIZE TAX CREDIT** (This section must be completed for any increase or decrease to Total Family Size claimed on original return.)

4. Total Family Size claimed on original return      1       2       3       4 or more
5. Total Family Size claimed on this return      1       2       3       4 or more

Explain any difference in detail below. Include name and Social Security number.

**PART III – CHANGES** Explain changes to income, deductions and tax from page 1, Column II in detail below. **Attach additional or corrected Kentucky and/or federal forms, schedules or W-2s.**

**If you do not attach the required information, processing of your Form 740-X may be delayed.**

**PART IV – INTEREST RATE CHART - Use the following rates when computing interest for amount on Page 1, Line 26.**

Jan. 1, 2017–Dec. 31, 2017	–	5%
Jan. 1, 2016–Dec. 31, 2016	–	6%
Jan. 1, 2015–Dec. 31, 2015	–	6%
Jan. 1, 2014–Dec. 31, 2014	–	6%
Jan. 1, 2013–Dec. 31, 2013	–	6%

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 appropriate income tax regulations 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 a joint return or combined, both must sign.)      Driver's License/State Issued ID No.      Date Signed      (      )  
Telephone Number (daytime)

\_\_\_\_\_  
Spouse's Signature      Driver's License/State Issued ID No.      Date Signed

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

Make check payable to:  
Kentucky State Treasurer.

**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.**