

**KENTUCKY ESTIMATED TAX VOUCHER  
INSTALLMENT 1**

**2023 INDIVIDUAL INCOME TAX  
Form 740-ES**  
Due April 18, 2023

Check if Estate or Trust  
 Fiduciary Tax

<input type="text"/>	<input type="text"/>	<input type="text"/>	12/31/2023	<input type="text"/>	<input type="text"/>	<input type="text"/>
Your Social Security No./FEIN			Year Ending	Spouse's Social Security No.		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
LAST NAME			FIRST NAME	SPOUSE'S NAME		

Mailing Address (Number and Street including Apartment No. or P.O. Box) \_\_\_\_\_

Amount Paid     **00**

City, Town or Post Office \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Kentucky Department of Revenue**  
**Frankfort, KY 40620-0009**

42A740ES0003



Make check payable to:  
Kentucky State Treasurer.

**DO NOT ATTACH CHECK TO VOUCHER**

42A740ES (09/22)

**KENTUCKY ESTIMATED TAX VOUCHER  
INSTALLMENT 2**

**2023 INDIVIDUAL INCOME TAX  
Form 740-ES**  
Due June 15, 2023

Check if Estate or Trust  
 Fiduciary Tax

<input type="text"/>	<input type="text"/>	<input type="text"/>	12/31/2023	<input type="text"/>	<input type="text"/>	<input type="text"/>
Your Social Security No./FEIN			Year Ending	Spouse's Social Security No.		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
LAST NAME			FIRST NAME	SPOUSE'S NAME		

Mailing Address (Number and Street including Apartment No. or P.O. Box) \_\_\_\_\_

Amount Paid     **00**

City, Town or Post Office \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Kentucky Department of Revenue**  
**Frankfort, KY 40620-0009**

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**KENTUCKY ESTIMATED TAX VOUCHER  
INSTALLMENT 3**

**2023 INDIVIDUAL INCOME TAX  
Form 740-ES**  
Due September 15, 2023

Check if Estate or Trust  
 Fiduciary Tax

<input type="text"/>	<input type="text"/>	<input type="text"/>	12/31/2023	<input type="text"/>	<input type="text"/>	<input type="text"/>
Your Social Security No./FEIN			Year Ending	Spouse's Social Security No.		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
LAST NAME			FIRST NAME	SPOUSE'S NAME		

Mailing Address (Number and Street including Apartment No. or P.O. Box) \_\_\_\_\_

Amount Paid     **00**

City, Town or Post Office \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Kentucky Department of Revenue**  
**Frankfort, KY 40620-0009**

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**KENTUCKY ESTIMATED TAX VOUCHER  
INSTALLMENT 4**

**2023 INDIVIDUAL INCOME TAX  
Form 740-ES**  
Due January 16, 2024

Check if Estate or Trust  
 Fiduciary Tax

<input type="text"/>	<input type="text"/>	<input type="text"/>	12/31/2023	<input type="text"/>	<input type="text"/>	<input type="text"/>
Your Social Security No./FEIN			Year Ending	Spouse's Social Security No.		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
LAST NAME			FIRST NAME	SPOUSE'S NAME		

Mailing Address (Number and Street including Apartment No. or P.O. Box) \_\_\_\_\_

Amount Paid     **00**

City, Town or Post Office \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Kentucky Department of Revenue**  
**Frankfort, KY 40620-0009**

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