



Check if deceased: Spouse Taxpayer For calendar year or other taxable year beginning _____, 2018, and ending _____, 20____.

A. Spouse's Social Security Number	B. Your Social Security Number 284-71-8728
Name—Last, First, Middle Initial (Joint return, give both names and initials.) PALADUGU HARI BABU	
Mailing Address (Number and Street including Apartment Number or P.O. Box) 1451 GLENWATER DR	
City, Town or Post Office CARY NC 27519	State ZIP Code



FILING STATUS (see instructions)	Check if applicable: <input type="checkbox"/> Amended <i>(Enclose copy of 1040X, if applicable.)</i> <input type="checkbox"/> Military Spouse	POLITICAL PARTY FUND <i>Designating \$2 will not change your refund or tax due.</i>
1 <input checked="" type="checkbox"/> Single		A. Spouse
2 <input type="checkbox"/> Married, filing joint return.		Democratic (1) <input type="checkbox"/>
3 <input type="checkbox"/> Married, filing separate returns. Enter spouse's Social Security number above and full name here. _____		Republican (2) <input type="checkbox"/>
		No Designation (3) <input type="checkbox"/>
		B. Yourself
		(4) <input type="checkbox"/>
		(5) <input type="checkbox"/>
		(6) <input checked="" type="checkbox"/>

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, 2018 NC.

5 Part-year resident. Complete appropriate line(s) below.
 Moved into Kentucky ____ / ____ / **18**. State moved from _____.
 Moved out of Kentucky ____ / ____ / **18**. 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 PAGE 3 BEFORE COMPLETING LINES 7 THROUGH 28.

INCOME/TAX							
7 Enter percentage from page 3, line 34..... ➡	7					9.9 %	
8 Enter amount from page 3, line 33, Column A. This is your Federal Adjusted Gross Income	8				45,510.	00	
9 Enter amount from page 3, line 33, Column B. This is your Kentucky Adjusted Gross Income	9				4,500.	00	
10 Nonitemizers: Enter \$2,530 (do not prorate). Skip lines 11 and 12	10				2,530.	00	
11 Itemizers: Enter itemized deductions from Kentucky Schedule A, Form 740-NP	11				00		
12 Multiply line 11 by the percentage on line 7.....	12				00		
13 Subtract line 10 or 12 from line 9. This is your Taxable Income	13				1,970.	00	
14 Tax Computation: Multiply line 13 by 5% (.05) enter tax.....	14				99.	00	
15 Enter amount from Schedule ITC, Section A, line 24.....	15					00	
16 Subtract line 15 from line 14.....	16				99.	00	
17 Enter personal tax credit amounts from Schedule ITC, Section B, line 3	17				00		
Note: Use only if 65 or over, blind, or in Kentucky National Guard.							
18 Multiply line 17 by the percentage on line 7	18				00		
19 Subtract line 18 from line 16.....	19				99.	00	
20 Check the box that represents your total family size (see instructions for lines 20 and 21)	20	1	<input checked="" type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>
21 Multiply line 19 by the Family Size Tax Credit decimal amount <u>0.00</u> (<u>0</u> %) from Schedule ITC.....	21				0.	00	
22 Subtract line 21 from line 19.....	22				99.	00	
23 Enter the Education Tuition Tax Credit from Form 8863-K.....	23					00	
24 Subtract line 23 from line 22	24				99.	00	
25 Enter Child and Dependent Care Credit from worksheet (see instructions).....	25					00	
26 Income Tax Liability. Subtract line 25 from line 24. If line 25 is larger than line 24, enter zero.....	26				99.	00	
27 Enter KENTUCKY USE TAX due on Internet, mail order, or other out-of-state purchases (see instructions). ..	27					00	
28 Add lines 26 and 27. Enter here and on page 2, line 29.....	28				99.	00	



PALADUGU HARI BABU
284-71-8728

REFUND/TAX PAYMENT SUMMARY

29 Enter amount from page 1, line 28. This is your Total Tax Liability	29		99 . 00
30 For amended return: overpayment, if any, shown on original return	30		00
31 Add lines 29 and 30, enter here	31		99 . 00
32 a Enter Kentucky income tax withheld as shown on enclosed Schedule KW-2			
32a	218 . 00		
b Enter 2018 Kentucky estimated tax payments	32b		00
c Enter 2018 refundable certified rehabilitation credit	32c		00
d Enter Nonresident Withholding from Form PTE-WH, line 9	32d		00
e For amended return; enter amount paid with original return plus additional payment(s) made after it was filed	32e		00
33 Add lines 32(a) through 32(e)	33		218 . 00
34 If line 31 is larger than line 33, subtract line 33 from line 31, enter ADDITIONAL TAX DUE	34		00
35 a Estimated tax penalty <input type="checkbox"/> Check if Form 2210-K attached			
35a			00
b Estimated tax interest	35b		00
c Interest	35c		00
d Late payment penalty	35d		00
e Late filing penalty	35e		00
36 Add lines 35(a) through 35(e). Enter here	36		00
37 If the total of lines 31 and 36 are more than line 33, subtract line 33 from the total of lines 31 and 36. OWE This is the AMOUNT YOU OWE	37		00
38 If line 33 is more than line 31, subtract lines 31 and 36 from line 33. This is the AMOUNT YOU OVERPAID	38		119 . 00
39 Fund Contributions; see instructions.			
a Nature and Wildlife Fund	00	e Farms to Food Banks Trust Fund	00
b Child Victims' Trust Fund	00	f Local History Trust Fund	00
c Veterans' Program Trust Fund ..	00	g Special Olympics Kentucky	00
d Breast Cancer Research/ Education Trust Fund	00	h Pediatric Cancer Research Trust Fund ..	00
		i Rape Crisis Center Trust Fund	00
		j Court Appointed Special Advocate Trust Fund	00
40 Add lines 39(a) through 39(j)	40		00
41 Amount of line 38 to be CREDITED TO YOUR 2019 ESTIMATED TAX	41	CREDIT FORWARD	00
(Credit forwards not available for amended returns)			
42 Subtract lines 40 and 41 from line 38. Amount to be REFUNDED TO YOU	42	REFUND	119 . 00
REFUND OPTIONS (Not available for amended returns)			
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"/>			

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.

Sign Here	Signature of Taxpayer	Driver's License/State Issued ID No. 926175633PH1201M060220N	Date	Telephone Number (daytime) (816) 328-5691
	Signature of Spouse	Driver's License/State Issued ID No.	Date	
Paid Preparer Use	Signature of Preparer		Date	
	Name of Preparer or Firm GLOBAL TAXES LLC		ID Number P02090332	
	Email	Telephone No.	May the DOR discuss this return with this preparer? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Enclose	Include a complete copy of federal Form 1040 if you received farm, business, or rental income or loss. If not required, check here. <input type="checkbox"/>	Refund or No Payment	Kentucky Department of Revenue P. O. Box 856970 Louisville, KY 40285-6970
Payment	Check Payable: Kentucky State Treasurer E-Pay Options: www.revenue.ky.gov Include: Your Social Security number and "KY Income Tax—2018"	With Payment	Kentucky Department of Revenue P. O. Box 856980 Louisville, KY 40285-6980



	A. Total from Enclosed Federal Return		B. Kentucky		
INCOME					
1 Enter all wages, salaries, tips, etc. (<i>enclose Kentucky Schedule KW-2</i>) Do not include moving expense reimbursements	1	45,510.	00	4,500.	00
2 Moving expense reimbursement	2		00		00
3 Interest	3		00		00
4 Dividends.....	4		00		00
5 Taxable refunds, credits or offsets of state and local income taxes	5		00		00
6 Alimony received	6		00		00
7 Business income or loss (<i>enclose federal Schedule C or C-EZ</i>).....	7		00		00
8 Capital gain or loss (<i>enclose federal Schedule D</i>).....	8		00		00
9 Other gains or losses (<i>enclose federal Form 4797</i>).....	9		00		00
10 a Federally taxable IRA distributions, pensions and annuities	10a		00		00
b Pension income exclusion (<i>enclose Schedule P if more than \$31,110 per taxpayer</i>)	10b			(00)
11 Rents, royalties, partnerships, estates, trusts, etc. (<i>enclose federal Schedule E</i>)	11		00		00
12 Farm income or loss (<i>enclose federal Schedule F</i>)	12		00		00
13 Unemployment compensation (see instructions).....	13		00		00
14 Taxable Social Security benefits	14		00		
15 Gambling winnings	15		00		00
16 Other income (list type and amount) _____	16		00		00
17 Combine lines 1 through 16. This is your Total Income	17	45,510.	00	4,500.	00
ADJUSTMENTS TO INCOME					
18 Educator expenses.....	18		00		00
19 Certain business expenses of reservists, performing artists and fee-basis government officials (<i>enclose federal Form 2106 or 2106-EZ</i>).....	19		00		00
20 Health savings account deduction (<i>enclose federal Form 8889</i>)	20		00		00
21 Moving expenses for members of the armed forces.....	21		00		
22 Deductible part of self-employment tax.....	22		00		00
23 Self-employed SEP, SIMPLE, and qualified plans deduction	23		00		00
24 Self-employed health insurance deduction	24		00		00
25 Penalty on early withdrawal of savings	25		00		00
26 Alimony paid (enter recipient's name and Social Security number) _____	26		00		00
27 IRA deduction	27		00		00
28 Student loan interest deduction	28		00		00
29 RESERVED	29		00		00
30 RESERVED	30		00		00
31 Other deductions (list type and amount) _____	31		00		00
32 Add lines 18 through 31. Total Adjustments to Income	32		00		00
33 Subtract line 32 from line 17. This is your Adjusted Gross Income	33	45,510.	00	4,500.	00
34 Divide line 33, Column B, by line 33, Column A. If amount is equal to or greater than 100%, enter 100%. This is your Percentage of Kentucky Adjusted Gross Income to Federal Adjusted Gross Income	34			9	9 %



➤ **Enclose with Form 740 or 740-NP**

Enter name(s) as shown on tax return.

Your Social Security Number

PALADUGU, HARI BABU

284-71-8728

SECTION A—BUSINESS INCENTIVES AND OTHER TAX CREDITS

A	B Preapproval Required	C Credit Name	D Required Attachment	E		F	
				Spouse		Yourself	
1	No	Nonrefundable Limited Liability Entity	Kentucky Limited Liability Entity Tax Credit Worksheet/Schedule K-1		00		00
2	Yes	Kentucky Small Business	Schedule K-1		00		00
3	Yes	Skills Training Investment	Schedule K-1		00		00
4	Yes	Certified Rehabilitation	Certification Copies		00		00
5	No	Tax Paid to Another State	Copy(ies) of Other State(s) return or Worksheet A		00		00
6	No	Unemployment	Schedule UTC		00		00
7	Yes	Recycling/Composting Equipment	Schedule RC		00		00
8	Yes	Kentucky Investment Fund	KEDFA notification		00		00
9	No	Qualified Research Facility	Schedule QR		00		00
10	No	GED Incentive	Form DAEL-31		00		00
11	Yes	Voluntary Environmental Remediation	Schedule VERB		00		00
12	Yes	Biodiesel	Schedule BIO		00		00
13	Yes	Clean Coal Incentive	Schedule CCI		00		00
14	Yes	Ethanol	Schedule ETH		00		00
15	Yes	Cellulosic Ethanol	Schedule CELL		00		00
16	No	Railroad Maintenance & Improvement	Schedule RR-I		00		00
17	Yes	Endow Kentucky	Schedule ENDOW		00		00
18	Yes	New Markets Development Program	Form 8874(K)-A		00		00
19	No	Food Donation (Carryover only)	Schedule FD		00		00
20	No	Distilled Spirits	Schedule DS		00		00
21	Yes	Angel Investor	Certification Letter		00		00
22	Yes	Film Industry	Film Office Certification		00		00
23	No	Inventory	Schedule INV		00		00
24	Total of Other Tax Credits (add lines 1 through 23). Enter here and on Form 740, page 1, line 15, Columns A and B, or enter combined totals of Columns E and F on Form 740-NP, page 1, line 15				00		00

SECTION B—PERSONAL TAX CREDITS—Only use if you or your spouse are 65 or over, blind, or in the Kentucky National Guard.

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

(b) Credits for spouse:

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

Spouse	Yourself
2A	2B
x \$10	x \$10
3A	3B

3 Multiply credits on line 2A by \$10 and enter on line 3A. Multiply credits on line 2B by \$10 and enter on line 3B. **Enter here and on Form 740, page 1, line 17, Columns A and B (Form 740-NP, page 1, line 17)**



SECTION C—FAMILY SIZE TAX CREDIT

Enter dependents qualifying for family size tax credit. See instructions to determine family size and qualifying dependents.

First and 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"/>

Use worksheet to compute Modified Gross Income. Modified Gross Income along with your family size will be used to determine your credit percentage on the Family Size Tax Table below.

WORKSHEET FOR COMPUTATION OF MODIFIED GROSS INCOME FOR FAMILY SIZE TAX CREDIT

- (a) Enter your federal adjusted gross income from Form 740, page 1, line 5 (Form 740-NP, page 1, line 8). **If zero or less, enter zero** (a) _____
- (b) If married filing separate returns and living in the same household, enter your spouse's federal adjusted gross income from Form 740, page 1, line 5 (Form 740-NP, page 1, line 8). **If zero or less, enter zero** (b) _____
- (c) Enter tax-exempt interest from municipal bonds (non-Kentucky) (c) _____
- (d) Enter amount of lump-sum distributions not included in federal adjusted gross income (federal Form 4972) (d) _____
- (e) Enter total of lines (a), (b), (c) and (d) (e) _____
- (f) Enter your Kentucky adjusted gross income from Form 740, page 1, line 9 (Form 740-NP, page 1, line 9). **If zero or less, enter zero** (f) _____
- (g) If married filing separate returns and living in the same household, enter your spouse's Kentucky adjusted gross income from Form 740, page 1, line 9 (Form 740-NP, page 1, line 9). **If zero or less, enter zero** (g) _____
- (h) Enter amount of lump-sum distributions not included in adjusted gross income (Kentucky Form 4972-K)..... (h) _____
- (i) Enter total of lines (f), (g) and (h) (i) _____
- (j) Enter the **greater** of line (e) or (i). This is your **Modified Gross Income**. Use this amount to determine if you qualify for the Family Size Tax Credit..... (j) _____

Use this **Family Size Table** to determine the percentage of credit and enter in the space provided on Form 740 or 740-NP, line 21.

Family Size	One		Two		Three		Four or More		Credit Percentage is
	is over	is not over	is over	is not over	is over	is not over	is over	is not over	
2018	\$ ---	\$ 12,140	\$ ---	\$ 16,460	\$ ---	\$ 20,780	\$ ---	\$ 25,100	100
	12,140	12,626	16,460	17,118	20,780	21,611	25,100	26,104	90
	12,626	13,111	17,118	17,777	21,611	22,442	26,104	27,108	80
	13,111	13,597	17,777	18,435	22,442	23,274	27,108	28,112	70
	13,597	14,082	18,435	19,094	23,274	24,105	28,112	29,116	60
	14,082	14,568	19,094	19,752	24,105	24,936	29,116	30,120	50
	14,568	15,054	19,752	20,410	24,936	25,767	30,120	31,124	40
	15,054	15,418	20,410	20,904	25,767	26,391	31,124	31,877	30
	15,418	15,782	20,904	21,398	26,391	27,014	31,877	32,630	20
	15,782	16,146	21,398	21,892	27,014	27,637	32,630	33,383	10
16,146	---	21,892	---	27,637	---	33,383	---	0	

Multiply tax from Form 740 or 740-NP, line 19, by the applicable percentage and enter on Form 740 or 740-NP, line 21. This is your **Family Size Tax Credit**.



Complete this Schedule KW-2 to determine the total Kentucky income tax withholding to be entered on Kentucky Form 740, 740-NP, or 740-NP-R. This schedule must be fully completed in order to receive proper credit for Kentucky income tax withheld. Include multiple Schedule KW-2(s) as needed to report all Kentucky income tax withholdings. Do not send in your W-2, 1099, or W2-G forms; keep them with your tax records.

NAME(S) AS SHOWN ON THE TAX RETURN

SPOUSE'S SOCIAL SECURITY NUMBER

YOUR SOCIAL SECURITY NUMBER

PALADUGU, HARI BABU

284-71-8728

Part I-Form W-2 Enter all W-2s with Kentucky income tax withheld. Do not include other state withholding or local income tax.

	A Employee's Social Security Number	B Employer's Identification Number (EIN)	C State	D Employer's State I.D. Number (Box 15 of Form W-2)	E KY State Wages (Box 16 of Form W-2)	F KY Income Tax Withheld (Box 17 of Form W-2)
1	284-71-8728	47-5256911	KY	991811	4,500.	218.
2						
3						
4						
5						
6						
7						
8						
9						
10						
11	TOTAL FROM ALL W-2s				4,500.	218.

Part II-Form 1099 and W-2G Enter all 1099s and W-2Gs with Kentucky income tax withheld.

	A Recipient's Social Security Number	B Payer's Identification Number (EIN)	C State	D Payer's State I.D. Number	E KY Income Amount	F KY Income Tax Withheld
12						
13						
14						
15						
16						
17	TOTAL FROM ALL 1099s AND W2-Gs					

Part III-Totals Enter total Kentucky income tax withheld from line 18, Column F on your Kentucky income tax return (Form 740 and 740-NP, line 32(a) or 740-NP-R, line 1).

		F Total Kentucky Income Tax Withheld
18	Enter combined totals from Column F, lines 11 and 17	218.

Enclose with your Kentucky tax return.

Kentucky Information Worksheet

2018

► Keep for your records

Part I – Personal Information

Taxpayer:

First Name HARI BABU
Middle Initial Suffix
Last Name PALADUGU
Social Security No. 284-71-8728
Occupation SOFTWARE ENGINEER
Date of Birth 06/15/1993 (mm/dd/yyyy)
Age 65 or over Blind
Date of Death
Work Phone (816) 328-5691 *
Home Phone *

Spouse:

First Name
Middle Initial Suffix
Last Name
Social Security No.
Occupation
Date of Birth (mm/dd/yyyy)
Age 65 or over Blind
Date of Death
Work Phone *

* Check one of these boxes to print daytime phone number on the government forms.

Street Address 1451 GLENWATER DR Apt No.
City CARY State NC ZIP Code 27519
County County Code

*Check to confirm social security number(s) and address information above are correct

Part II – Main Form

Form 740: Resident Tax Return (Long form) ►
 Form 740-NP: Nonresident Tax Return ►
 Form 740-NP: Part-Year Resident Tax Return ►
Your state of residence on December 31, 2018 ► NC
Were you a Kentucky resident for part of the year during 2018? ► Yes No
Enter date moved into And/OR out of Kentucky during 2018
Enter state or foreign country moved from And/OR moved to
 Form 740-NP-R: Nonresident-Reciprocal State Tax Return

*Only income from sources within Kentucky was from wages and salaries

*If married, each spouse must file a separate Form 740-NP-R

*Not a resident of Kentucky at any time during 2018 and a resident of:

	Taxpayer	Spouse
1	<input type="checkbox"/> Illinois	<input type="checkbox"/> Illinois
2	<input type="checkbox"/> Indiana	<input type="checkbox"/> Indiana
3	<input type="checkbox"/> Michigan	<input type="checkbox"/> Michigan
4	<input type="checkbox"/> Ohio	<input type="checkbox"/> Ohio
5	<input type="checkbox"/> Virginia	<input type="checkbox"/> Virginia
6	<input type="checkbox"/> West Virginia	<input type="checkbox"/> West Virginia
7	<input type="checkbox"/> Wisconsin	<input type="checkbox"/> Wisconsin

QuickZoom to Forms 740-NP-R

Part III – Filing Status

Single
 Married, filing separate on combined return
 Married, filing joint
 Married, filing separate

Part IV – Political Party Fund

You may designate \$2 of your taxes to a political party if you have a tax liability of at least \$2 (\$4 for married filing joint returns). *This designation will not change your refund or tax due.*

Taxpayer	Spouse	
<input type="checkbox"/>	<input type="checkbox"/>	Democratic
<input type="checkbox"/>	<input type="checkbox"/>	Republican
<input checked="" type="checkbox"/>	<input type="checkbox"/>	No Designation

Part V — Other Information

KY National Guard information

Taxpayer Spouse
[] []

A member of the Kentucky National Guard on December 31, 2018

- Mail taxpayer the Kentucky tax packet next year
Taxpayer was married and lived apart from spouse the entire year
Check this box to allow the Kentucky Department of Revenue to discuss this return with preparer

Farmer information:

Enter Kentucky total gross income
Enter Kentucky total farming income
Total tax is being paid in full
Return is being filed on or before March 1, 2019

Form 2210-K information:

Do not file Kentucky Form 2210-K
Either taxpayer or spouse died during the taxable year
Enter tax liability from 2017 return from Form 740, line 26 or Form 740-NP, line 26

Part VI — Electronic Filing Information

New! State e-file disclosure consent:

By using a computer system and software to prepare and transmit my client's return electronically, I consent to the disclosure of all information pertaining to my use of the system and software to create my client's return and to the electronic transmission of my client's tax return to the Kentucky Department of Revenue, as applicable by law.

[X] The state return will be filed electronically

Electronic PDF Attachments

PDF's that you have selected to attach to your state e-file return are listed below.

Table with 2 columns: Description, Filename

Yes No

[X] [] Use the Federal PIN(s) in place of Form 8879-K? (See help)

Note: If the "Yes" box is checked above, Form 8879 is not required.

Date return was EFiled 02/27/2019

Date return was accepted by the state 03/02/2019

Enter the date Form 740-V was given to the client

QuickZoom to Form 8879-K Additional Information Smart Worksheet

Part VII — Direct Deposit, Debit Card, and Direct Debit Information

Yes No

[] [X] Do you want to elect direct deposit of state tax refund (Electronic Filing only)?

* See tax help for refund expectation

[] [] Do you want electronic funds withdrawal of state tax payment (EF only)?

[] [] Check here if you would like your refund issued on a Bank of America Prepaid Debit Card.

[] [] Check here if you would like to receive your Debit Card material in Spanish.

Enter the following information if you want to directly deposit the state tax refund:

Name of Financial Institution (optional) . . Bank of America

Check the appropriate box:

Checking [X] Routing number . . 081000032

Savings [] Account number . . 355004440463

Enter the following information only if you are requesting direct debit of balance due:

Enter the payment date to withdraw from the account above

State balance-due amount from this return

International ACH Transactions

Yes No

[] [] Will the funds for this refund (or payment) go to (or come from) an account outside the U.S.?

Bank name for International ACH Transaction

Part VIII — Paid Preparer Information

Enter Preparer Code from Firm/Preparer Info . . . 1

Part IX — Extension Status

Yes No

- Tax return due date extended?
- Federal Form 4868 "Out of the Country" checkbox checked?
- Has the tax return due date been extended by filing a KY extension using Form 740-EXT?
Extended due date _____

Filing and acceptance information (Electronic Filing Only)

- File extension electronically?
- Extension accepted?
Extension filing date _____
Extension acceptance date _____

Electronic funds withdrawal amount due with extension information (Electronic Filing Only)

- Yes No**
- Use electronic funds withdrawal of extension tax payment?
Enter settlement date to withdraw the extension amount from the account above _____
Balance-due amount paid with this extension _____

QuickZoom to Kentucky Form 740-EXT Application for Extension of Time to File ▶ _____

QuickZoom to Kentucky Form 740 ▶ _____

QuickZoom to Income Allocation Worksheet ▶ _____

QuickZoom to Kentucky Form 740-NP. ▶ _____

QuickZoom to Kentucky Form 740-NP-R (Taxpayer) ▶ _____

QuickZoom to Kentucky Form 740-NP-R (Spouse) ▶ _____

Tax Payments Worksheet

2018

▶ Keep for your records

Name PALADUGU, HARI BABU	Social Security Number 284-71-8728
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Tax Payments for the Current Year

		State	
		Date	Payment
1	First Payment		
2	Second Payment		
3	Third Payment		
4	Fourth Payment		
Additional Payments			
5	Payment		
	Payment		
	Payment		
	Payment		
	Payment		
6	Overpayment from previous year applied to current year	6	
7	Amount paid with current year extension	7	
8	Total tax payments	8	

Income Taxes Withheld for the Current Year

9	State withholding on Forms W-2	9	218.
10	State withholding on Forms W-2G	10	
11	State withholding on Forms 1099-R	11	
12 a	State withholding on Forms 1099-MISC	12 a	
b	State withholding on Forms 1099-G	b	
c	State withholding on Forms 1099-K	c	
13	Other state tax withholding	13	
14	Total income tax withheld	14	218.
15	Date return will be filed and balance paid	15	

Smart Worksheets from your 2018 Kentucky Tax Return

SMART WORKSHEET FOR: Schedule ITC: Individual Tax Credits

Computation of Modified Gross Income for Family Size Tax Credit Smart Worksheet <i>If federal adjusted gross income is \$33,383 or less, you may qualify for the Family Size Tax Credit.</i>		
a	Enter your federal adjusted gross income from Form 740, page 1, line 5 (Form 740-NP, page 1, line 8). If zero or less, enter zero	45510.
b	If married filing separate returns and living in the same household, enter your spouse's federal adjusted gross income from Form 740, page 1, line 5 (Form 740-NP, page 1, line 8). If zero or less, enter zero	
c	Enter tax-exempt interest from municipal bonds (non-Kentucky).	
d	Enter amount of lump-sum distributions not included in federal adjusted gross income (federal Form 4972)	
e	Total of lines a, b, c and d	45510.
f	Enter your Kentucky adjusted gross income from Form 740 or 740-NP, page 1, line 9. If zero or less, enter zero	4500.
g	Enter your spouse's Kentucky adjusted gross income, if married filing separate returns and living in the same household, enter your spouse's Kentucky adjusted gross income from Form 740 or 740-NP, page 1, line 9. If zero or less, enter zero	
h	Enter amount of lump-sum distributions not included in Kentucky adjusted gross income (Kentucky Form 4972-K).	
i	Total of lines f, g and h.	4500.
j	Enter the greater of lines e or i. This is your modified gross income . Use this amount to determine if you qualify for the Family Size Tax Credit	45510.