Kentucky

IRS DCN 0 0 – 3 8 1 3 7 1 – – 6

8453-K

42A740-S22

Revenue Cabinet

KENTUCKY INDIVIDUAL INCOME TAX DECLARATION FOR ELECTRONIC FILING

➤ **For calendar year January 1, 2005, through December 31, 2005.**

2005

Use Kentucky label if correct. Otherwise print or type.	➤ LABEL ➤	Last name	First name (Joint or combined return, give both names and initials.)	Your Social Security number B.
		Mailing address—Number and street or P.O. box	Apt. number	Spouse's Social Security number A.
		City, town or post office	State / ZIP code	

PART I—Tax Return Information (Whole Dollars Only)

				A Spouse	B Taxpayer
1. Kentucky taxable income	740, line 15	740-EZ, line 3	1	.00	.00
2. Total tax liability	740, line 24	740-EZ, line 8	2		.00
3. Total Kentucky withholding	740, line 25a	740-EZ, line 9	3		.00
4. Total estimated payments	740, line 25b		4		.00
5. Refunded to you	740, line 34	740-EZ, line 13	5		.00
6. Amount you owe	740, line 37	740-EZ, line 14	6		.00

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PART II—Direct Deposit of Refund (See Instructions)

7. Routing transit number (RTN) — **The first two numbers of the RTN must be 01 through 12 or 21 through 32.**

8. Depositor account number (DAN)

9. Type of account: ☐ Savings ☐ Checking

Attach Copy of Forms W-2, W-2G and 1099-R Here

PART III—Declaration of Taxpayer *(Sign only after Part I is completed.)*

☐ I consent that my refund be directly deposited as designated in Part II, and declare that the information shown on lines 7 through 9 is correct. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.

☐ I do not want direct deposit of my refund or am not receiving a refund.

If I have filed a balance due return, I understand that if the Kentucky Revenue Cabinet does not receive my full and timely payment of my tax liability, I will remain liable for the tax liability and all applicable interest and penalties.

Under penalties of perjury, I declare that the information I have given my ERO or transmitter and the amounts in Part I above agree with the amounts on the corresponding lines of the electronic portion of my Kentucky income tax return. To the best of my knowledge and belief, my return is true, correct and complete. I consent to my ERO or transmitter sending my return and accompanying schedules and statements to the Kentucky Revenue Cabinet. I also consent to the Kentucky Revenue Cabinet sending my ERO and/or transmitter an acknowledgment of receipt or transmission and an indication of whether or not my return is accepted, and, if rejected, the reason(s) for the rejection.

➤ Your Signature (If joint or combined return, both must sign) ➤ Spouse's Signature ☎ Telephone Number (daytime) Date Signed

PART IV—Declaration and Signature of Electronic Return Originator and Paid Preparer

I declare that I have reviewed the above taxpayer's return and that the entries on Form 8453-K are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on this return. If Part II is completed, I declare that I have verified the taxpayer's proof of account and it agrees with the name shown on this form. The taxpayer will have signed this form before I submit the return. I will give the taxpayer a copy of all forms and information to be filed with the Kentucky Revenue Cabinet, and have followed all other requirements in Kentucky Publication KY-1345, Kentucky Handbook for Electronic Filers of Individual Income Tax Returns. If I am also the paid preparer, under penalties of perjury I declare that I have examined the above taxpayer's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and complete. This declaration is based on all information of which I have any knowledge.

Check ☐ if also paid preparer. Check ☐ if self-employed.

ERO's Use Only

Signature Date I.D. Number of ERO

Firm's name (or yours if self-employed) and address: Express File, Inc. FEIN 38 2957030

Express File, Inc. P.O. Box 131007, Ann Arbor, MI 48113 ZIP code

Paid Preparer's Use Only

Check ☐ if self-employed.

Preparer's Signature Date I.D. Number of Preparer

Firm's name (or yours if self-employed) and address: FEIN

ZIP code

➤ **Keep this form with your tax return. *Do not mail!***