	KENTUCKY ESTIMATED TAX VOUCHER INSTALLMENT <b>1</b>		VIDUAL INCOM Form 740-ES Due April 15, 2024	ΙΕ ΤΑΧ	Check if Estate or Trust ☐ Fiduciary Ta×
	Your Social Security No./FEIN		<b>12/31/2024</b> Year Ending	Spouse's So	cial Security No.
	LAST NAME F	RSTNAME		SPOUS	SE'S NAME
	Mailing Address (Number and Street incl	uding Apartment No.		nount Paid	0 0 42A740ES0003
	City, Town or Post Office State	zip Code		Department of KY 40620-0009	
Make Kentu	check payable to: cky State Treasurer.	DO NOT	ATTACH CHECK TO VOUC	HER 42A7	740ES (10/23)
	KENTUCKY ESTIMATED TAX VOUCHER INSTALLMENT <b>2</b>		VIDUAL INCOM Form 740-ES Due June 17, 2024	ΙΕ ΤΑΧ	Check if Estate or Trust ☐ Fiduciary Tax
	Your Social Security No./FEIN		<b>12/31/2024</b> Year Ending	Spouse's So	cial Security No.
	LAST NAME F	IRST NAME			SE'S NAME
	Mailing Address (Number and Street incl	uding Apartment No.		nount Paid	0 0 42A740ES0003
	City, Town or Post Office State	Zip Code		Department of KY 40620-0009	
Make Kentu	check payable to: cky State Treasurer.	DO NOT /	ATTACH CHECK TO VOUC	HER 42A7	740ES (10/23)
	KENTUCKY ESTIMATED TAX VOUCHER INSTALLMENT <b>3</b>		VIDUAL INCOM Form 740-ES		Check if Estate or Trust ☐ Fiduciary Tax
	ESTIMATED TAX VOUCHER			4	
	ESTIMATED TAX VOUCHER INSTALLMENT 3		Form 740-ES e September 16, 202 12/31/2024	4 Spouse's So	Fiduciary Tax
	ESTIMATED TAX VOUCHER INSTALLMENT 3	Du	Form 740-ES e September 16, 202 12/31/2024 Year Ending	4 Spouse's So	Fiduciary Tax
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	ESTIMATED TAX VOUCHER INSTALLMENT 3 Your Social Security No./FEIN LAST NAME F Mailing Address (Number and Street Incl City, Town or Post Office State check payable to: cky State Treasurer.	IRST NAME Uding Apartment No. Tip Code DO NOT A	Form 740-ES e September 16, 202 12/31/2024 Year Ending An or P.O. Box) Kentucky E Frankfort, I ATTACH CHECK TO VOUC	4 Spouse's Sou sPous nount Paid Department of KY 40620-0009 HER 42A7 IE TAX	Fiduciary Tax cial Security No. SE'S NAME 000 42A740ES0003 Revenue
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	ESTIMATED TAX VOUCHER INSTALLMENT 3 Your Social Security No./FEIN LAST NAME F Mailing Address (Number and Street incl City, Town or Post Office State check payable to: cky State Treasurer. KENTUCKY ESTIMATED TAX VOUCHER INSTALLMENT 4 Your Social Security No./FEIN LAST NAME F	IRST NAME Uding Apartment No. DO NOT A DO NOT A DO NOT A DO NOT A IRST NAME Uding Apartment No. D IRST NAME UDING Apartment No.	Form 740-ES e September 16, 202 12/31/2024 Year Ending An or P.O. Box) Kentucky E Frankfort, I ATTACH CHECK TO VOUCH VIDUAL INCOM Form 740-ES ue January 15, 2025 12/31/2024 Year Ending An	4 Spouse's Sou nount Paid Department of KY 40620-0009 HER 42A7 IE TAX Spouse's Sou Spouse's Sou	☐ Fiduciary Tax cial Security No. SE'S NAME 0 0 42A740ES0003 Revenue <sup>740ES (10/23)</sup> Check if Estate or Trust ☐ Fiduciary Tax cial Security No. SE'S NAME 0 0 42A740ES0003