92A205 (7-03) Commonwealth of Kentucky DEPARTMENT OF REVENUE

Kentucky Inheritance Tax Return

FOR DEPART	MENT USE	ONLY
Account Number	/ <u>4 6</u> /	

(Simplified Format)

This form is designed for small, uncomplicated estates. Requirements for use of this return—This form may be used when (1) a federal estate tax return is not required to be filed, (2) the assets of the estate consist of 10 items or less, (3) no gifts or transfers were made within three years of death without full consideration, (4) no real or personal property was transferred with a retained
life interest, (5) the decedent did not possess any power to appoint any real or personal property or have the use of any qualified terminable interest property, and (6) the decedent had not received any real or personal property from another decedent within five years and paid inheritance tax on the property.

Return Status (check one):					
□ Original Return					
☐ Amended Return—Refund					
☐ Amended Return—Tax Due					

Decedent's Name Last	Fi	First			Date of Death		
Social Security Number Occupation (If decedent retired at death, state of pation prior to retirement)		Age at Death	Cause	of Death	HR Code Number (if known)		
Residence (Domicile) at Tir	me of Death						
Number and S	treet	City		State	ZIP Code	County	
Name and Address of Exec	cutor/Administrator/Benefic	iary Nar	ne and Addr	ess of Prep	oarer		
□ Exec			tty				
□ Admr			:PA				
<u> </u>							
oid the decedent have a v	vill? □ No □ Yes <i>If</i>	Yes, attach	a copy of t	he will.			
	Section III on reverse side . Fpaid within 9 months froi						
						\$	
nterest and Penalty						Ψ	
-	(see general information) .					\$	
Late filing penalty (see ge	eneral information)					\$	
	ee general information)					\$	
	est and penalties, if applical						
						\$	
Balance due/Refund						\$	
=	Attach check payable to "Kentu Kentucky Departmer				ail to		
	ties, I declare that this return, nowledge and belief, true, c	, including ac	companying	g documen	ts, has been e	xamined by me, a	
Signature of Executor/Ac	dministrator/Beneficiary	D	ate	* (Telephone N	Number	
				~ ()		
Signature o	of Preparer	D	ate		Telephone N	Number	

SECTION I—GROSS ESTATE

List all items which decedent owned or in which the decedent had an interest. Complete Form 92A204, Real Estate Valuation Information Form, for each parcel of real estate.

							· · · · · · · · · · · · · · · · · · ·	
		Owners	hip <i>(Check o</i>	or fill in applicabl	le blocks)		Fair Cach	
Description and Location of Real or Personal Property	1			Joint			Fair Cash Value of 100%	Decedent's
	Indi-	Survivorship		Date	Name	of	Interest at	Interest
	vidual	With	Without	Placed in Joint Names	Co-Owr		Date of Death	
							 	
							 	
TOTAL GROSS ESTATE	ı		<u> </u>	<u> </u>			<u>1 </u>	
TOTAL GROSS ESTATE							\$	
		S	ECTION II	I—DEDUCTI	ONS			
Funeral expenses				\$				
Monument								
Cemetery lot and maintenance of lo								
Subtotal (not to exceed \$5,000)							\$	
Personal representatives' commission								
Attorneys' fees								
Appraisers' fees and court costs								
Mortgages and liens (decedent's sha								
Other debts of decedent (itemize on								
`	,						\$	
							\$	
							\$	
							\$	
TOTAL DEDUCTIONS								
INLI LO	AIL (/	otal Glos	is Estate Les	s Total Deductio	iris) (eriter	on pag	ge 1) \$	
		SECT	T—III NOI	TAX COMPU	TATION	J		
List Names of Heirs and Beneficiar				Relationship	Age	Di	istributive Share	Tax
Itemize shares of property receive	d. <i>(See G</i>	eneral In	formation)	(If Any)				
						\$		\$
				1	-			1
Total distributive shares (must equa	ii net esta	ate)				\$		4
Cotal Inheritance Tay Due (enter on	nage 1)							•