

2201

COMMONWEALTH OF KENTUCKY  
DEPARTMENT OF REVENUE  
FRANKFORT, KY 40619

NOTICE DATE 04/30/2014	PERIOD 04/01/2013-12/31/2013	CASE XXXXXXXX	TAX INDIVIDUAL INCOME TAX
NOTICE # XXXXXXXX	RETURN VAL# XXXXXXXX	RETURN DUE 04/15/2014	TAXPAYER - ID XXXXXXXX
			TAXPAYER NAME LAST FIRST M & FIRST M

FOR QUESTIONS REGARDING THIS NOTICE, PLEASE CONTACT:

FIRST LAST  
DEPARTMENT OF REVENUE  
STATIONS NUMBER 58  
P O BOX 181, STATION 58  
501 HIGH STREET  
FRANKFORT KY 40602

TEL: (502) XXX-XXXX EXTENSION XXXX  
FAX: (502) XXX-XXXX  
OFFICE HOURS: 8:00 A.M. TO 5:00 P.M. EASTERN TIME

EXPLANATION OF NOTICE

YOUR KENTUCKY INDIVIDUAL INCOME TAX RETURN FOR THE ABOVE PERIOD HAS BEEN REVIEWED AND ADJUSTED.

MESSAGES: AMENDED RETURN NOT ACCEPTED.  
PLEASE SUBMIT VERIFICATION OF ITEMIZED DEDUCTIONS AS ORIGINALLY REQUESTED FOR REVIEW.

DEPENDENTS	SPOUSE 01	INDV/JOINT 04
TAXABLE INCOME PER RETURN OR AS ADJUSTED	32,582.00	39,647.00
ADJUSTMENT -- ADDITIONS ADJUSTMENT TO ITEMIZED DEDUCTIONS NO VERIFICATION SUBMITTED AS REQUESTED BY LETTER SENT 2/12 FOR PERSONAL PROPERTY TAXES, CONTRIBUTIONS, AND CASUALTY &	ADDITIONS 30,553.00	ADDITIONS 37,177.00

<<<< EXPLANATION OF NOTICE CONTINUED ON NEXT PAGE >>>>

DETACH VOUCHER AND RETURN WITH PAYMENT. MAKE CHECK PAYABLE TO KENTUCKY STATE TREASURER.

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VALIDATING NUMBER CASE NUMBER  
XXXXXXXXXX XXXXXXXXXXXX

#XXXXXXXX  
#XXXXX XXXX XXXXXX X#

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\* TOTAL DUE AS OF: \*  
\* 03/14/2014 \* \$0.00  
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LAST FIRST M & FIRST M  
STREET ADDRESS  
LEXINGTON KY 40504

ENTER AMOUNT PAID:

□□□□□□□□□□□□□□□□

1234567890 KENTUCKY DEPARTMENT OF REVENUE  
FRANKFORT, KY 40619

12345 678901234 5 678 912345467 8 910000000000 12345678 9

2203

EXPLANATION OF NOTICE, CONTINUED  
TAXPAYER ID: XXXXXXXXXXXX  
NOTICE NUMBER: XXXXXXXXXXXX

PAGE 2

				INDV/JOINT
THEFT LOSSES, INSTEAD TAXPAYER FILED AMENDED RETURN STATING HE HAD ENTERED THE WRONG AMOUNT FOR PORCH REPAIR FROM BUILDER NEGLIGENCE AND FLOOD. NOT ALLOWING AMENDED RETURN. DISALLOWED THE ITEMS ON SCHEDULE A THAT VERIFICATION WAS ORIGINALLY REQUESTED AND HAS NOT BEEN RECEIVED.				
	TOTAL ADDITIONS		30,553.00	37,177.00
	CORRECTED TAXABLE INCOME		53,135.00	76,824.00
	CORRECTED TAX LIABILITY		3,479.00	4,277.00
	PERSONAL TAX CREDITS		20.00	80.00
	ADJUSTED TAX LIABILITY		3,459.00	4,197.00
	COMBINED INCOME TAX LIABILITY			7,656.00
	LESS CHILD CARE CREDIT			80.00
TOTAL TAX LIABILITY	SHOWN ON RETURN:	3,640.00		TAX LIABILITY
TOTAL TAX LIABILITY	AS CALCULATED:			7,576.00
	TOTAL LIABILITY			7,576.00
TIMELY PAYMENTS AND CREDITS	CREDIT DATE	VALIDATING	TAX	AMOUNT TO
KENTUCKY TAX WITHHELD			TAX	8,748.00-
PAID WITH AMENDED RETURN/REPORT			TAX	1,820.00-
REFUND OVERPAYMENT			TAX	2,992.00
TOTAL PAYMENTS & CREDITS			TOTAL AMOUNT TO TAX	7,576.00-
			TOT	7,576.00-
TOTAL DUE AS OF	05/14/2014		TOTAL AMOUNT OF TAX	0.00
			INT	0.00
			FEE	0.00
			PEN	0.00
			ITOT	0.00
				BALANCE DUE
				0.00

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2204

EXPLANATION OF NOTICE, CONTINUED  
TAXPAYER ID: XXXXXXXXXX  
NOTICE NUMBER: XXXXXXXXXX

PAGE 3

ANY PROTEST MUST BE IN WRITING, STATING REASONS, AND BE FILED WITH THE DEPARTMENT OF REVENUE AT THE ADDRESS BELOW, BY 06/14/2014 OR YOU WILL LOSE ALL APPEAL RIGHTS.

**IMPORTANT REMINDER:** INCLUDE YOUR **TAXPAYER IDENTIFICATION NUMBER, TYPE OF TAX AND TAX PERIOD** ON ANY PAYMENT OR LETTER SENT TO THE DEPARTMENT OF REVENUE. THIS ENABLE THE DEPARTMENT TO REVENUE TO CORRECTLY CREDIT YOUR ACCOUNT FOR THE TAX PERIOD AND TYPE OF TAX FOR WHICH YOU INTENDED.

**REPLY TO:** FIRST LAST  
DEPARTMENT OF REVENUE  
STATION NUMBER 58  
P O BOX 181, STATION 58  
501 HIGH STREET  
FRANKFORT KY 40802

TEL: (502) 564-6945 EXTENSION 7548  
FAX: (502) 564-3685  
OFFICE HOURS: 8:00 A.M. TO 5:00 P.M. EASTERN TIME

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**NOTICE REQUIREMENT FOR INTERNET POSTING**

IF YOUR TAX LIABILITY REMAINS UNPAID FOR MORE THAN 90 DAYS AFTER THE DATE OF THIS ORIGINAL NOTICE, THE DEPARTMENT OF REVENUE MAY POST YOUR NAME AND THIS LIABILITY FOR PUBLIC INSPECTION, INCLUDING POSTING IN YOUR LOCAL NEWSPAPER AND/OR ON THE INTERNET. HOWEVER, IF YOU NOTIFY THE DEPARTMENT IN WRITING DURING THIS PERIOD OF ANY OF THE FOLLOWING, THE DEPARTMENT MUST EXCLUDE YOU NAME FROM ANY PUBLIC POSTING:

1. YOU HAVE AN APPEAL PENDING OR INTEND TO FILE AN APPEAL PURSUANT TO KRS 131.110 ET SEQ. WITH RESPECT TO THIS LIABILITY;
2. YOU ARE CURRENTLY PAYING THIS TAX LIABILITY THROUGH A VALID PAY AGREEMENT;
3. THE DEPARTMENT IS REVIEWING OR ADJUSTING THIS TAX LIABILITY;
4. YOU ARE IN BANKRUPTCY AND THE AUTOMATIC STAY IS STILL IN EFFECT.

ADDITIONALLY, A TAXPAYER'S NAME WILL BE EXCLUDED OR REMOVED FROM ANY PUBLIC POSTING IN THE EVENT THE DEPARTMENT IS NOTIFIED IN WRITING THAT THE TAXPAYER IS DECEASED.

PLEASE PROVIDE WRITTEN BASIS FOR EXCLUSION TO THE **DIVISION OF COLLECTIONS, P.O. BOX 491, FRANKFORT, KY 40802**, OR E-MAIL IT TO [KRS.WEBRESPONSENOTICEOFTAXDUE@KY.GOV](mailto:KRS.WEBRESPONSENOTICEOFTAXDUE@KY.GOV).

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**NOTICE OF INTENT TO OFFSET**

IF ANY PORTION OF YOUR LIABILITY REMAINS UNPAID AFTER 60 DAYS FROM THE DATE OF THIS NOTICE, THE DEPARTMENT MAY SUBMIT YOUR DEBT TO THE TREASURY OFFSET PROGRAM (TOP). ONCE YOUR DEBT IS SUBMITTED TO TOP FOR OFFSET, THE UNITED STATES DEPARTMENT OF TREASURY MAY REDUCE OR WITHHOLD ANY OF YOUR ELIGIBLE FEDERAL TAX REFUND OR VENDOR PAYMENTS BY THE AMOUNT OF YOUR DEBT. THESE OFFSET PROCESSES ARE AUTHORIZED BY 31 U.S.C. 3716, 26 U.S.C. 6402, KRS 44.065 AND KRS 44.030.

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**NOTICE FOR LICENSE AND MOTOR VEHICLE REGISTRATION REVOCATION**

KENTUCKY STATUTES ENABLE THE DEPARTMENT OF REVENUE TO REQUEST THE REVOCATION OR SUSPENSION OF ANY PROFESSIONAL LICENSE. LICENSE TO PRACTICE LAW, OR DRIVER'S LICENSE ISSUED BY ANY LICENSING AGENCY OF THE COMMONWEALTH OR THE KENTUCKY SUPREME COURT TO ANY PERSON THAT IS DETERMINED BY THE