

2013 KANSAS INDIVIDUAL INCOME TAX

114513

	Initia	Last Name			Enter the first four letters of your last name. Use ALL CAPITAL letters.			
Spouse's First Name	Initia	l Last Name			Your Social Security number			
Mailing Address (Number and St	reet, including Rural Ro	ute)		School District No.	Enter the first four letter last name. Use ALL (
City, Town, or Post Office		State	Zip Code	County Abbreviation	-	SALTIAL IOLOGIS.		
If your name or addr	•	•			Daytime telephone			
Amended If the Return (Mark ONE)	his is an AMENDE Amended affect			one of the follow		ljustment by the IRS		
Filing Status (Mark ONE)	Single		ed filing joint n if only one ha	ad income)	Married filing separa		of household (Do not if filing a joint return)	
Residency Status (Mark ONE)	Resident		rear resident fr plete Sch. S, F		to		esident plete Sch. S, Part B)	
In the following spaces, space is needed, enclose	Total K	ansas exempt	ions.	ehold, add one e ns you claimed a	·	include you or your	snouse If additional	
Name	(please print)	quie.	Date of Birth	(mm/dd/yy)	Relationship	SSN (Social Se	•	

ENTER AMOUNTS IN WHOLE DOLLARS ONLY

Income	Federal adjusted gross income (as reported on your federal income tax return)								
Shade the box for negative amounts.	2. Modifications (from Schedule S, line A28; enclose Schedule S)	-							
Example:	3. Kansas adjusted gross income (line 2 added to or subtracted from line 1)								
Daduations		4							
Deductions	4. Standard deduction OR itemized deductions (if itemizing, complete Part C of Schedule S)	4							
	5. Exemption allowance (\$2,250 x number of exemptions claimed)	5							
	6. Total deductions (add lines 4 and 5)	6							
	7. Taxable income (subtract line 6 from line 3; if less than zero, enter 0)	7							
Tax	8. Tax (from Tax Tables or Tax Computation Schedule)	8							
Computation	9. Nonresident percentage (from Schedule S, line B23; or if 100%, enter 100.0000)	9							
•	10. Nonresident tax (multiply line 8 by line 9)	10		00					
	11. Kansas tax on lump sum distributions (residents only - see instructions)								
	• • • • • • • • • • • • • • • • • • • •	11							
	12. TOTAL INCOME TAX (residents: add lines 8 & 11; nonresidents: enter amount from line 10)	12							
Credits	13. Credit for taxes paid to other states (see instructions; enclose return(s) from other states)	13							
	14. Other credits (enclose all appropriate credit schedules)	14							
	15. Subtotal (subtract lines 13 and 14 from line 12)	15							
	16. Earned income tax credit (from worksheet on page 8 of instructions)	16							
	17. Food sales tax credit (from line H, front of this form)								
	18. Tax balance after credits (subtract lines 16 and 17 from line 15; cannot be less than zero)	17							
	Tex Parameter and Greater (captured into to and 17 Horn into 16, carried 56 look than 2010)	18							
	19. Use tax due (see instructions)	19							
	20. Total tax balance (add lines 18 and 19)	20							
Withholding	21. Kansas income tax withheld from W-2, 1099, or K-19 (enclose K-19; see instructions)	21							
and	22. Estimated tax paid	22							
Payments	·	23							
	23. Amount paid with Kansas extension.	24							
If this is an AMENDED return,	24. Refundable portion of earned income tax credit (from worksheet, page 8 of instructions).								
	25. Refundable portion of tax credits (K-60 only).	25							
complete lines 26 and 27.	26. Payments remitted with original return	26							
20 and 27.	27. Overpayment from original return (this figure is a subtraction; see instructions)	27							
	28. Total refundable credits (add lines 21 through 26; then subtract line 27)	_							
Balance	29. Underpayment (if line 20 is <i>greater</i> than line 28, enter the difference here)	29							
Due	30. Interest (see instructions)	30							
		31							
	31. Penalty (see instructions)								
	32. Estimated Tax Penalty Mark box if engaged in commercial farming or fishing in 2013.	32							
	33. AMOUNT YOU OWE (add lines 29 throught 32 and any entries on lines 36 through 41)	33							
1 3	34. Overpayment (if line 20 is <i>less</i> than line 28, enter the difference here)	34							
	35. CREDIT FORWARD (enter amount you wish to be applied to your 2014 estimated tax)	35							
	36. CHICKADEE CHECKOFF (Kansas Nongame Wildlife Improvement Program)	36							
to any of the	37. SENIOR CITIZENS MEALS ON WHEELS CONTRIBUTION PROGRAM	37							
programs on lines 36 through 41.		38							
The amount you enter will reduce	38. BREAST CANCER RESEARCH FUND								
your refund or	39. MILITARY EMERGENCY RELIEF FUND	39							
increase the amount you owe.	40. KANSAS HOMETOWN HEROES FUND	40							
	41. KANSAS CREATIVE ARTS INDUSTRY FUND	41							
	42. REFUND (subtract lines 35 through 41 from line 34)	42							
Signature(s)									
- g(e)	I authorize the Director of Taxation or the Director's designee to discuss my return and enclosures with my preparer. I declare under the penalties of perjury that to the best of my knowledge this is a true, correct, and complete return.								
	Signature of taxpayer Date Signature of preparer other the	nan taxpayer	Phone number of	of preparer					
	Signature of spages if Married Filing Joint Tax preparer's EIN or SSN:	\perp							