

DO NOT STAPLE

KANSAS PROPERTY TAX RELIEF CLAIM for Low Income Seniors



FILE THIS CLAIM AFTER DECEMBER 31, 2013, BUT NO LATER THAN APRIL 15, 2014

Claimant's Social Security Number

[Input box for Social Security Number]

First four letters of claimant's last name. Use ALL CAPITAL letters.

[Input box for last name initials]

Claimant's Telephone Number

[Input box for Telephone Number]

Name and Address

Form with fields: First Name of Claimant, Initial, Last Name, Home Address (number and street or rural route), City, State, Zip Code, County Abbreviation

Mark this box if claimant is deceased (See instructions) . . . . .

Date of Death \_\_\_\_\_

IMPORTANT: Mark this box if name or address has changed . . .

Mark this box if this is an amended claim . . . . .

Qualifications

To qualify for this property tax refund you must meet the household income limitation and you must have been:

- 1. A resident of Kansas during the entire year of 2013;
2. A home owner during 2013; and,
3. Age 65 or over for the entire year. Enter your date of birth (must be prior to 1948) . . . . .

NOTE: If you filed a Form K-40H for 2013, you DO NOT qualify for this property tax refund.

MONTH DAY YEAR [Input boxes for date of birth]

Household Income

Enter the total received in 2013 for each type of income. See instructions on the back of this form.

Table with 10 rows for household income items and columns for amount and total. Items include Wages, Social Security, Railroad Retirement, TAF payments, etc.

Refund

Table with 2 rows for refund calculation. Row 1: General property taxes paid timely in 2013. Row 2: PROPERTY TAX REFUND. Multiply the amount on line 11 by 75% (.75).

Mark this box if you wish to participate in the Refund Advancement Program (see instructions) . . . . .

Signature

I authorize the Director of Taxation or the Director's designee to discuss my K-40PT and any enclosures with my preparer. I declare under the penalties of perjury that to the best of my knowledge and belief, this is a true, correct and complete claim.

Claimant's signature Date Signature of preparer other than claimant Preparer's phone number

IMPORTANT: Please allow 20 to 24 weeks to process your refund.

COMPLETE THE BACK OF THIS FORM

[Input boxes for back of form]



Excluded Income

**Providing this information should speed the processing of your claim.** Income reported here should **not** be included on line 10 of this form.

13. Enter in the spaces provided the **annual amount of all other income** not included as household income on line 10:

(a) Food Stamps . . . . . \$ <input style="width: 150px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/>	(b) Nongovernmental Gifts . . . . . \$ <input style="width: 150px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/>
(c) Child Support . . . . . \$ <input style="width: 150px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/>	(d) Settlements (lump sum) . . . . . \$ <input style="width: 150px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/>
(e) Personal and Student Loans. . \$ <input style="width: 150px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/>	(f) SSI, Social Security, Veterans or Railroad Disability . . . . . \$ <input style="width: 150px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/> (enclose documentation)
(g) Other (See instructions) Source <input style="width: 250px;" type="text"/> Amount \$ <input style="width: 150px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/>	

Members of Household

14. List the names of **ALL persons who resided in your household at any time during 2013**. Specify the number of months they lived with you and report their portion of income **that is included in total household income** on line 10 of this form.

Name	Number of months resided in household	Their portion of income that is included on line 10	Social Security Number
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 40px; height: 25px;" type="text"/>	\$ <input style="width: 100px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/>	<input style="width: 95%; height: 25px;" type="text"/>
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 40px; height: 25px;" type="text"/>	\$ <input style="width: 100px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/>	<input style="width: 95%; height: 25px;" type="text"/>
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 40px; height: 25px;" type="text"/>	\$ <input style="width: 100px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/>	<input style="width: 95%; height: 25px;" type="text"/>
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 40px; height: 25px;" type="text"/>	\$ <input style="width: 100px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/>	<input style="width: 95%; height: 25px;" type="text"/>
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 40px; height: 25px;" type="text"/>	\$ <input style="width: 100px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/>	<input style="width: 95%; height: 25px;" type="text"/>
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 40px; height: 25px;" type="text"/>	\$ <input style="width: 100px;" type="text"/> <input style="width: 40px; text-align: right;" type="text" value="00"/>	<input style="width: 95%; height: 25px;" type="text"/>