



2015

**Homestead or
Property Tax
Refund for
Homeowners**

***For a fast refund,
file electronically!***

See back cover for details.

webtax.org

GENERAL INFORMATION

Filing a Claim

Homestead refunds are not available to renters. You must own your home to qualify.

The **Homestead** claim (K-40H) allows a rebate of a portion of the property taxes paid on a Kansas resident's homestead. A homestead is the house, mobile or manufactured home, or other dwelling subject to property tax that you own and occupy as a residence. Your refund percentage is based on your total household income and the refund is a percentage of your general property tax. The maximum refund is \$700.

The **Property Tax Relief** claim (K-40PT) allows a refund of property tax for low income senior citizens that own their home. The refund is 75% of the property taxes actually and timely paid on real or personal property used as their principal residence. Claimants that receive this refund **cannot** claim a Homestead refund.

The large purple boxes on Form K-40H and K-40PT allow us to process your refund claim faster and with fewer errors. Please follow these important instructions when completing your form:

- Use only **black** or **dark blue ink**.
- Do not use dollar signs, lines, dashes, or other symbols. If a line does not apply to you, leave it blank.
- **All entries must be rounded.** If less than \$.50 cents, round down. Round \$.50 to \$.99 to next higher dollar.
- Send the original claim form. Do not send a photocopy.
- If you are using an approved computer software program to prepare your claim, send the original form printed from your printer. Do not send a photocopy.

Qualifications

A person owning a homestead with an appraised valuation for property tax purposes that exceeds \$350,000 does NOT qualify for a homestead refund.

A homestead claim (K-40H) is for homeowners who own and occupy their homestead and were residents of Kansas all of 2015. This refund program is not available to renters. As an owner your name is on the deed for the homestead. As a resident the entire year and a homeowner, you are eligible if your total household income is \$34,000 or less and you: 1) were born before January 1, 1960, or 2) were blind or totally and permanently disabled all of 2015, or 3) have a dependent child who lived with you the entire year who was born before January 1, 2015, and was under the age of 18 all of 2015.

The property tax relief claim (K-40PT) is for homeowners that were 65 years of age or older, with a household income of \$19,100 or less, and a resident of Kansas all of 2015.

Only one refund claim (K-40H or K-40PT) may be filed for each household. A husband and wife OR two or more individuals who together occupy the same household may only file one claim. A husband and wife who own and occupy separate households may file separate claims and include only their individual income.

If you owe any delinquent property taxes on your home your homestead refund will be used to pay those delinquent taxes. The Kansas Department of Revenue will send your entire refund to the County Treasurer.

If you moved during 2015, you may claim the general property tax paid for the period of time you lived in each residence. Homeowners who rent out part of their homestead or use a portion of it for business may claim only the general property tax paid for the part in which they live.

Definition of a Household and Household Income

A household is you, or you and your spouse who occupy a homestead, or you and one or more individuals not related as husband and wife who together occupy a homestead. Household income is generally all taxable and nontaxable income received by all household members during 2015. If a household member lived with you only part of the year, you must include the income they received during the months they lived with you.

Household income includes, but is not limited to:

- Taxable and nontaxable wages, salaries, and self-employment income.
- *Federal* earned income tax credit (EITC).
- Taxable and nontaxable interest and dividends.
- Social Security and SSI benefits. The amount **included** depends on which refund claim you file:
 - **K-40H** – 50 percent of Social Security and SSI benefits (except disability payments – see *Excluded Income*).
 - **K-40PT** – 100 percent of Social Security and SSI benefits (except disability payments – see *Excluded Income*).
- Railroad Retirement benefits (except disability payments).
- Veterans' benefits and all other pensions and annuities (except disability payments).
- Welfare and Temporary Assistance to Family (TAF) payments.
- Unemployment, worker's compensation and disability income.
- Alimony received.
- Business and farm income.
- Gain from business or investment property sales and any long-term capital gains included in federal adjusted gross income.
- Net rents and partnerships (cannot be a negative figure).
- Foster home care payments, senior companion stipends, and foster grandparent payments.
- School grants and scholarships (unless paid directly to the school).
- Gambling winnings, jury duty payments, and other miscellaneous income.
- Business income as determined by the federal IRC and reported on federal Schedules C, E, or F and on lines 12, 17, or 18 of federal Form 1040. This income is reported as a subtraction modification on Kansas Schedule S.
- ALL OTHER INCOME received in 2015 not specifically excluded (as follows).

Excluded Income — DO NOT include these items as household income:

- 50 percent of Social Security and SSI payments. This exclusion **applies only to the Form K-40H**, Homestead Claim. K-40PT filers will report 100 percent of Social Security and SSI payments.
- Social Security disability payments.
- Social Security and SSI payments that were Social Security "**disability or SSI disability**" payments prior to a recipient reaching the age of 65. These Social Security payments, that were once Social Security disability (or SSI disability) payments, are NOT included in household income.

Net operating losses and net capital losses cannot be used to reduce total household income. DO NOT subtract these losses from the income amounts.

When and Where to File

File your claim after December 31, 2015, but **no later than** April 15, 2016. Mail your claim to the address shown on the back of your K-40H or K-40PT.

Late Claims – Claims filed after the due date may be accepted whenever good cause exists, provided the claim is filed within four years of the original due date. Examples of good cause include, but are not limited to, absence of the claimant from the state or country or temporary illness of the claimant at the time the claim was due. When filing a late claim, enclose an explanation with documentation as to why it is late. If your claim will be late because you have an extension of time to file your income tax return, enclose a copy of that **federal** extension with your claim.

Note: Kansas does not have a separate extension of time form.

Refund Advancement Program

This optional program provides eligible homeowners an opportunity to apply a portion of their anticipated 2015 Homestead or Property Tax Relief refund to help pay the first half of their 2015 property taxes. The amount of the advancement is based on the 2014 refund amount.

You may participate in this program by marking the Refund Advancement Program check box on your 2015 Form K-40H (or Form K-40PT). See instructions on page 6 for additional information.

Signature and Fraudulent Claims

If a claimant is incapable of signing the claim, the claimant's legal guardian, conservator, or attorney-in-fact may file the claim. When filing on behalf of an eligible claimant, a copy of your legal authority is required.

These refund programs are designed to provide tax relief only to those that qualify. Fraudulent claims filed will be denied and may result in criminal prosecution.

Deceased Claimant

Use the steps in the worksheet on page 6 to compute a refund for a deceased claimant.

When the person who has been the claimant for a household dies, another member of the household who qualifies as a claimant should file Form K-40H or K-40PT for the household. A separate claim on behalf of the decedent is not necessary.

If a member of the decedent's household (such as a surviving spouse) does NOT qualify to be the claimant, or when there are no other members of a decedent's household, a claim may be filed for a deceased claimant if the decedent was a resident of Kansas all of 2015 but died before filing a claim (after December 31, 2015) **or** died during 2015 and was a Kansas resident the entire portion of the year he or she was alive.

Required Enclosures for Decedent Claims. You must enclose a copy of the death certificate, funeral home notice, or obituary statement with a decedent's claim, **AND one** of the following:

- 1) If the estate is being probated, a copy of the Letters of Testamentary or letters of administration.
- 2) If the estate is not being probated, a completed Form RF-9, Decedent Refund Claim.

Signature on a Decedent's Claim. A decedent's claim should be signed by the surviving spouse; executor or executrix; administrator; or other authorized person.

Amending a Claim

If, after mailing your claim, you find there is an error that will affect your refund amount, file an amended claim after you receive your refund from the original filing. To file an amended claim, obtain another copy of Form K-40H or Form K-40PT, and mark the "amended" box located to the right of the county abbreviation. Enter the information on the claim as it should have been, and enclose an explanation of the changes. If an additional refund is due you will receive it in 10 to 12 weeks.

If the refund on the amended claim is LESS than the refund you received from the original claim, enclose a check or money order for the difference, made payable to *Kansas Department of Revenue*. Write *Homestead Repayment - Amended Claim* and include the last 4 digits of your Social Security number (example: XXX-XX-1234).

REFUND PERCENTAGE TABLE

(for use in computing your refund on line 14 of Form K-40H)

If amount on line 10, Form K-40H is:	Enter on line 14:	If amount on line 10, Form K-40H is:	Enter on line 14:	If amount on line 10, Form K-40H is:	Enter on line 14:
\$ 0 to \$ 6,000	100%	\$13,001 to \$14,000	68%	\$21,001 to \$22,000	30%
\$ 6,001 to \$ 7,000	96%	\$14,001 to \$15,000	64%	\$22,001 to \$23,000	25%
\$ 7,001 to \$ 8,000	92%	\$15,001 to \$16,000	60%	\$23,001 to \$24,000	20%
\$ 8,001 to \$ 9,000	88%	\$16,001 to \$17,000	55%	\$24,001 to \$25,000	15%
\$ 9,001 to \$10,000	84%	\$17,001 to \$18,000	50%	\$25,001 to \$26,000	10%
\$10,001 to \$11,000	80%	\$18,001 to \$19,000	45%	\$26,001 to \$34,000	5%
\$11,001 to \$12,000	76%	\$19,001 to \$20,000	40%	\$34,001 and over	0%
\$12,001 to \$13,000	72%	\$20,001 to \$21,000	35%		

LINE-BY-LINE INSTRUCTIONS

CLAIMANT INFORMATION

Social security number, name validation, and telephone number. Enter **your** Social Security number in the boxes above the name and address. (**Do not** enter the Social Security number under which you are receiving benefits if not your own.)

Using CAPITAL letters, enter the first four letters of your last name in the boxes provided. If your last name has less than four letters, leave the remaining boxes empty.

Enter the telephone number where you can be reached during our office hours so that we may contact you if a problem arises while processing your claim. The number will be kept confidential.

Name and address. PRINT or TYPE your name and complete address – the physical location of your residence (not a P.O. Box), including apartment number or lot number.

Deceased claimant. If you are filing on behalf of a claimant who is deceased, mark an “X” in the box, and enter the date of the claimant’s death. Use the worksheet for *Deceased Claimants* on page 6 to figure the decedent’s refund. Be sure to enclose the additional documents required (see page 3).

Name or address change. If you filed a refund claim last year and your name or address has changed, place an “X” in the box to the right of the address so we may update our records.

Amended claim. If you are filing an amended (corrected) claim, mark an “X” in the box. See further instructions on page 3.

QUALIFICATIONS — Lines 1 through 3


To qualify, you must first have been a resident of Kansas all of 2015. Next you must own and occupy your home – meaning that your name must be on the deed to the home. Contract for deed **does qualify** as ownership; however, a “rent to own” contract **does not**. If you were a Kansas resident all year and owned and occupied your home, complete **ONLY** the qualification line that applies to your situation (i.e., if you are age 60 and also blind, enter your birthdate in the boxes on line 1 and skip lines 2 and 3).

Line 1 — Age qualification. If you were born before January 1, 1960, enter the month, day, and year of your birth. Add a preceding “0” for months and days with only one digit.

Line 2 — Disabled or blind qualification. If you are blind or totally and permanently disabled, enter the month, day, and year you became blind or disabled. (**Veterans disability includes veterans 50 percent or more permanently disabled.**) The Kansas Department of Revenue must have on file documentation of permanent disability or blindness for your homestead claim. If you do not have documentation you must enclose with Form K-40H either **1)** a copy of your Social Security statement showing that your disability began prior to 2015, **or 2)** Schedule DIS (from page 11) completed by your doctor.

Line 3 — Dependent child qualification. If you have at least one dependent child, enter their name and date of birth (must be prior to January 1, 2015) in the spaces provided. **Note:** The child must have resided solely with the claimant the entire calendar year, be under age 18 all of 2015, AND is or may be claimed as a dependent by the claimant for income tax purposes.

Surviving spouse: Mark this box if filing as surviving spouse (and not remarried) of a disabled veteran or an active duty service member who died in the line of duty. The disabled veteran must meet the qualifications in line 2. Enclose with your K-40H a copy of the original Veterans Disability Determination Letter or letter from your regional Veterans Administration that includes the disability date prior to 2015 and the percentage of permanent disability being 50 percent or greater.

 If you are not a Kansas resident and homeowner and do not meet one of the other three qualifications, you do not qualify for this refund.

HOUSEHOLD INCOME — Lines 4 through 10

Lines 4 through 8 will contain the total annual income amounts received by you and your spouse during 2015. The income of ALL other persons who lived with you at any time during 2015 will be entered on line 9, All Other Income. If a minor child or incapacitated person holds legal title to the property, the income (wages, child support, etc.) will also be entered on line 9.

If the income amounts requested on lines 5 through 8 were included on line 4, **do not include** them again on lines 5 through 8.

Line 4 — 2015 Wages OR Kansas Adjusted Gross Income AND Federal Earned Income Tax Credit.

If you are not required to file an income tax return, enter in the first space the total of all wages, salaries, commissions, fees, bonuses, and tips received by you and your spouse during 2015. Enter this same amount in the purple boxes.

If you file a Kansas income tax return, enter in the first space your Kansas Adjusted Gross Income (KAGI) from line 3 of your Form K-40, adding back net operating losses or net capital losses. Enter in the second space, any federal Earned Income Tax Credit (EITC) received during 2015. This is generally the amount shown on your 2014 federal tax return, but could also include an EITC for a prior year that was received in 2015. Add your KAGI and EITC together and enter the total in the purple boxes. **Important**—If line 4 is your KAGI plus EITC, enter on lines 5 through 8 **only** the income amounts that are **not already included** in your KAGI on line 4.

Line 5 — All taxable income other than wages and pensions not included in Line 4. Enter all taxable interest and dividend income, unemployment, self-employment income, business* or farm income, alimony received, rental or partnership income, the gain from business or investment property sales, and any long term capital gains that were included in federal adjusted gross income. A net operating loss or net capital loss may not be used to reduce household income. If you have nontaxable interest or dividends, enter them on line 9, *All Other Income*.

If you used a portion of your homestead for rental or business income, enter the net rental or business income on line 5. **Note:** Also complete the worksheet on page 5 to determine the property tax amount to enter on line 12.

* Include all business income as determined by the federal IRC and reported on federal Schedules C, E, or F and on lines 12, 17, or 18 of federal Form 1040; and claimed as a subtraction modification on Kansas Schedule S.

Line 6 — Total Social Security and SSI benefits, including Medicare deductions. Enter in the *first space* of line 6 the total Social Security and Supplemental Security Income (SSI) benefits received by you and your spouse. Include amounts deducted for Medicare, any Social Security death benefits, and any SSI payments not shown on the annual Social Security benefit statement. **Do not include** Social Security or SSI “disability” payments.

Enter the annual amount of any Social Security or SSI disability benefits in the *Excluded Income* section on the back of Form K-40H. **First time filers** must enclose a copy of their benefit statement or award letter with their claim to verify that the Social Security income is excludable. If you are not required to enclose a copy, be sure to keep one for your records as KDOR reserves the right to request it at a later date.

If you do not have your annual Social Security benefits statement, use the following method to compute the total received for 2015. Add the amount of your December 2015 check, plus the 2015 Medicare deduction of \$110.50 (if applicable), and multiply by 12.

EXAMPLE: Your December, 2015 social security check is \$795.20. You are covered by Medicare. Compute your benefits as follows:
 $\$795.20 + \$110.50 = \$905.70$. $\$905.70 \times 12 \text{ months} = \$10,868.40$
(Round result to **\$10,868.00** and enter in the first space on line 6.)

Multiply the total Social Security and SSI benefits received in 2015 by 50 percent (.50) and enter result in the purple boxes on line 6.

Line 7— Railroad Retirement benefits and all other pensions, annuities, and veterans benefits. Enter the amounts received during 2015 from railroad retirement benefits (including Tier I— Social Security equivalent benefits) and veterans’ pensions and benefits. DO NOT include veteran or railroad retirement “disability” payments. **Note:** Veterans disability includes veterans 50 percent or more permanently disabled and surviving spouses of deceased disabled veterans. Also include on line 7 the total of all other taxable and nontaxable pensions and annuities received by you or your spouse that is not already entered on line 4 or line 6, except Veterans’ and Railroad Retirement “disability” payments.

Line 8 — TAF payments, general assistance, worker’s compensation and grants and scholarships. Enter the amounts received during 2015 in the form of: TAF (Temporary Assistance to Families); welfare or general assistance payments; worker’s compensation; disability payments (**excluding** disability payments received from Social Security, SSI, Veterans and Railroad Retirement, or pensions that you entered on line 4 or line 7); and grants, scholarships, and foster grandparent payments.

Line 9 — All other income. Enter the total amounts from the following list. Enclose with your claim a list showing the recipient(s), source(s), and amount(s) for the income entered on line 9.

- All income (regardless of source) received by adult individuals other than you and your spouse who lived in the homestead at any time during 2015. For those who lived with you less than 12 months, include only the income they received during the months they lived with you. Also list these individuals in the *Members of Household* section on the back of the claim.
- The income (child support, SSI, wages, etc.) of a minor child or incapacitated person, when that person is an owner of the homestead or is on the rental agreement.
- Any other income outlined as “household income” on page 2 that is not already entered on lines 4 through 8.

Line 10 — Total Household Income. Add lines 4 through 9 and enter total. If more than \$34,000 you do not qualify for a homestead refund. **Important**—To expedite your refund, enclose a copy of pages 1 and 2 of your federal Form 1040, 1040A or 1040EZ; statements from DCF (formerly SRS) and Social Security; and other documentation for income amounts shown on lines 4 through 9.

REFUND — Lines 11 through 15

Line 11 — Percent of property for rental or business use. If part of your homestead was rented to others or used for business purposes during 2015, you may claim only the property taxes paid on the portion that was used for personal purposes. Complete the following worksheet to determine the percent of rental or business use to enter on line 11 and property tax amount to enter on line 12, Form K-40H. **Note:** Include the income received from the rental or business use of your homestead on lines 4 or 5 of Form K-40H.

WORKSHEET for RENTAL or BUSINESS USE of HOME	
If you filed Schedule C or C-EZ, Form 1040, complete only lines 4, 5 and 6.	
1. Total number of rooms in your homestead	_____
2. Number of rooms rented or used for business	_____
3. Rental/business use percentage. Divide line 2 by line 1. Enter result here and line 11 of Form K-40H	_____ %
4. Total 2015 general property tax	_____
5. Multiply line 4 by line 3 (also include any property tax deduction claimed on federal Schedule C or C-EZ). This is the rental/business portion of the property taxes	_____
6. Subtract line 5 from line 4. This is the general property tax on the nonbusiness portion of your homestead. Enter result on line 12, Form K-40H	_____

Line 12 — 2015 general property taxes. Enter the total 2015 general property tax you have paid or will pay, as shown on your real estate tax statement (taxes on property valued at \$350,000 or more does not qualify). **Do not include** special assessment taxes, such as those levied for streets, sewers, or utilities; charges for services, such as sewer services; interest or late charges; or taxes on agricultural or commercial land. **Note:** The 2015 property tax is payable in two installments – the first is due December 20, 2015 and the second is due May 10, 2016. It is the total of both installments (whether paid or not) that is entered on line 12.

If you are filing on behalf of a claimant who died during 2015, the property tax must be prorated based on the date of death. To determine the property tax amount to enter here, use the steps for computing a decedent’s refund on the next page.

If you have delinquent property tax, mark the box on line 12. Your homestead refund will be used to pay the delinquent tax. **Note:** The entire refund will be sent to your county treasurer.

2015 PROPERTY TAX STATEMENT

You are not required to send a copy of your 2015 property tax statement with your completed K-40H; however, you may be asked to provide it at a later date. **If requested, submit a copy of your 2015 statement – NOT a basic receipt –** to verify the property tax entered on line 12. The copy will not be returned. A property tax receipt that contains a *breakdown* of property tax among the general tax, special tax, fees, etc. (such as a receipt that is an exact copy of the statement) is acceptable. **Note:** The annual statement from your mortgage company and property tax *receipts* are NOT acceptable. If you need a copy of your property tax statement, you may request one through the office of your county clerk.

MOBILE AND MANUFACTURED HOMEOWNERS

If you own your mobile home/manufactured home, enter on line 12 the personal property taxes you paid on your home, and the general property tax paid on the land. If you own your mobile home, but rent the land or lot on which it sits, enter on line 12 the personal property tax you paid on the mobile home. You may not claim the general property tax paid on the rented property.

FARM OWNERS

If your homestead is part of a farm covered by a single property tax statement, you may use only the general property tax paid on the HOMESITE.

Line 13 — Amount of property tax allowed (cannot exceed \$700). Enter amount reported on line 12 or \$700, whichever is less.

Line 14— Homestead refund percentage. Your refund percentage is based on your total household income on line 10. Using the table at the bottom of page 3, find your income and enter the corresponding percentage on line 14. If the percentage is less than 100 percent, leave the first box blank.

Line 15 — Homestead Refund. Multiply line 13 by the percentage on line 14 and enter the result. If the amount is less than \$5, it will not be refunded. You will receive a refund in the amount shown on line 15 if there are no corrections made to your claim; you did not participate in the optional refund advancement program (see page 3); you have no delinquent property taxes due to your County Treasurer; and you owe no other debt to the State of Kansas (see *Debtor Set-Off* that follows).



Instructions for the back of your claim are on page 6. Before mailing it be sure to complete all sections, sign the claim, and enclose all required documentation.

DEBTOR SET-OFF

If you owe a delinquent debt to the State of Kansas (such as child support, student loan, medical bills, or income tax), your refund will be applied to that debt first and any remaining refund will be sent to you. Be advised that the set-off process will cause a delay of up to 12 weeks for any remaining refund.

DECEASED CLAIMANTS

If filing on behalf of a claimant who died during 2015, the refund amount is prorated based on the decedent's date of death. The taxes (line 12) are also prorated based on the decedent's date of death. Use the following steps to compute a refund on behalf of a decedent. See page 3 for required enclosures.

REFUND COMPUTATION FOR DECEASED CLAIMANT

- Complete lines 1 through 11 of K-40H or 1 through 10 of K-40PT.
- Compute allowable property tax paid by decedent to date of death. Using the table below, multiply the total 2015 property taxes by the applicable percentage for the month of the decedent's death. Enter result on line 12 of K-40H or line 11 of K-40PT.
EXAMPLE: If claimant died in August 2015 and the 2015 taxes were \$645, the property tax paid to date of death is 8/12ths (.667) of \$645 for a result of \$430 (\$645 X .667 = \$430).
- Complete lines 13 and 14 of the K-40H; then continue by completing lines 4 through 6 of this worksheet. If filing a K-40PT, skip lines 4 through 6 and follow the instructions for K-40PT below.
- Multiply line 13 of K-40H by line 14 of K-40H. Enter result _____.
- Enter percent from table below for month of decedent's death _____.
- Multiply the result from line 4 by the percent in line 5. Enter the result here _____ and on line 15 of K-40H.

K-40PT: Multiply amount on line 11 of K-40PT by 75 percent (.75). Multiply the result by the percentage from the following table for the month of the decedent's death. Enter this amount on line 12 of K-40PT.

MONTH	PERCENT	MONTH	PERCENT	MONTH	PERCENT
January	.083	May	.417	September	.750
February	.167	June	.500	October	.833
March	.250	July	.583	November	.917
April	.333	August	.667	December	1.000

2016 REFUND ADVANCEMENT PROGRAM BOX

(See additional information about this program on page 3)

By checking this box, you are requesting that the Kansas Department of Revenue electronically transfer your 2016 advancement information directly to the County Treasurer to help pay the first half of your property taxes. **If you do not check this box, you cannot participate in the 2016 advancement program**, in which case none of your 2016 refund will be used to pay your 2016 property taxes.

As a participant in this program, your 2015 refund will be used to pay back the amount the Kansas Department of Revenue advanced the county for your property taxes in December 2015. If there is a refund amount left over, it will be sent to you in a check. To determine the amount of your refund check, complete the following worksheet.

REFUND ADVANCEMENT WORKSHEET

- 2015 refund from line 15 of Form K-40H or line 12 of Form K-40PT \$ _____
- 2015 refund advancement amount from advancement letter \$ _____
- Subtract line 2 from line 1 \$ _____

You will receive the amount on line 3 in a check from the Kansas Department of Revenue if you have no other delinquent debts due the state of Kansas (see *Debtor Set-Off* above).

If your 2015 refund (line 15, K-40H or line 12, K-40PT) is LESS than the advancement amount (line 2 of the Refund Advancement Worksheet), you should pay the difference when you file your 2015 K-40H or K-40PT. Make your check or money order payable to the Kansas Department of Revenue and include the tax year and last 4 digits of your Social Security number (example: XXX-XX-1234).

EXCLUDED INCOME (back of claim form)

Enter in this section the total received during 2015 by all household members (including minor children) from each of the sources listed in (a) through (f).

On line (g), enter wages received by a minor child and any other income not considered "household income" as outlined on page 2. **First time filers** must enclose a copy of their benefit statement or award letter with their claim to verify that the Social Security income is excludable. **Previous filers** should keep a copy for their records as the Kansas Department of Revenue reserves the right to request it at a later date.

MEMBERS OF HOUSEHOLD (back of claim form)

All claimants must complete this section. As the claimant, enter your information on the first line. Then enter the name, date of birth, and other requested information for EACH PERSON (adults and children) who lived with you **at any time** during 2015.

If the person lived with you all year, enter "12" in the *Number of months resided in household* column and indicate whether their income is included as part of the *Household Income* reported on lines 4 through 9 of K-40H. **Note:** For a child born during 2015, enter only the number of months from the date of birth to the end of the year. For example, enter "6" for a child born July 10, 2015.

SIGNATURE. You, as the claimant, **MUST** sign the claim. If the claim was prepared by another, the preparer should also sign in the space provided, and supply a daytime phone number.

Preparer authorization box: It may be necessary for the Kansas Department of Revenue to contact you about your claim. By marking the box above the signature line, you are authorizing the director or his/her designee to discuss your claim and any enclosures with your preparer.

If the claim is being filed on behalf of a decedent, the surviving spouse or executor/executrix must sign it. See *Deceased Claimants* on page 3 for additional information and required enclosures.

If the claimant is incapable of signing the claim, the person authorized to sign **MUST** sign and enclose a copy of the appointing documentation (i.e., guardian, conservator, power of attorney).

MAILING YOUR CLAIM. To prevent a delay in your receiving your refund, be sure that you have a correct and complete claim. Before mailing it, please be sure you have:

- ✓ written your numbers clearly in each box;
- ✓ completed all required information and signed the claim;
- ✓ kept a complete copy of your claim for your records;
- ✓ enclosed, with Form K-40H, a copy of your Social Security disability award letter or Schedule DIS completed by your physician indicating date the disability began (disabled or blind claimants);
- ✓ placed all forms **loosely** in the envelope. **DO NOT staple, tape or use any type of fastening device** on documents.

AFTER YOU FILE. Keep a copy of your claim and all supporting documents. If you have a problem later and need to contact the Kansas Department of Revenue, it will save time if you have a copy of your claim with you. Keep copies of all documents for at least four years.

PROCESSING REFUND CLAIMS

Normal processing time for an error-free and complete *paper-filed* homestead refund claim is 20 to 24 weeks. Claims requiring correspondence will take longer. Information for checking the status of your refund can be found on the back cover of this booklet.

If you have a refund due on the K-40H (or K-40PT) and K-40 forms, wait until both returns are processed before expecting a refund check. Your refund(s) are subject to debtor set-off for other delinquent debts owed to the State of Kansas or County Treasurer.

CORRESPONDENCE FROM THE KANSAS DEPARTMENT OF REVENUE

Should you receive a letter from the Kansas Department of Revenue about your claim, please respond to it immediately. Processing time necessary for a typical refund claim starts the day the missing information is received by the department. If you have questions about the letter or wish to discuss your claim in person, contact our Taxpayer Assistance Center at 785-368-8222.



DO NOT STAPLE

FILE THIS CLAIM AFTER DECEMBER 31, 2015, BUT NO LATER THAN APRIL 15, 2016

Claimant's Social Security Number, First four letters of claimant's last name, Claimant's Telephone Number

Name and Address section: Your First Name, Initial, Last Name, Mailing Address, City, Town, or Post Office, State, Zip Code, County Abbreviation. Includes checkboxes for deceased claimant and amended claim.

Qualifications section: TO QUALIFY YOU MUST HAVE BEEN A RESIDENT OF KANSAS THE ENTIRE YEAR OF 2015 AND OWN YOUR HOME. Answer ONLY the questions that apply to you: 1. Age 55 or over... 2. Disabled or blind... 3. Dependent child... Includes checkbox for surviving spouse of a disabled veteran.

Household Income section: ENTER THE TOTAL RECEIVED IN 2015 FOR EACH TYPE OF INCOME. See instructions. 4. 2015 Wages OR Kansas Adjusted Gross Income... 5. All taxable income other than wages... 6. Total Social Security and SSI benefits... 7. Railroad Retirement benefits... 8. TAF payments... 9. All other income... 10. TOTAL HOUSEHOLD INCOME

Refund section: 11. Percent of the homestead property that was rented or used for business... 12. 2015 general property taxes... 13. Amount of property tax allowed... 14. Using your total household income... 15. HOMESTEAD REFUND... Includes checkbox for Refund Advancement Program.

Signature section: I authorize the Director of Taxation or the Director's designee to discuss my K-40H and 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. Includes lines for Claimant's signature, Date, Signature of preparer other than claimant, and Preparer's phone number.

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

COMPLETE THE BACK OF THIS FORM

Barcode area with empty boxes for tracking.



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

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

Excluded Income

(a) Food Stamps.....	\$		00	(b) Nongovernmental Gifts	\$		00
(c) Child Support.....	\$		00	(d) Settlements (lump sum)	\$		00
(e) Personal and Student Loans.....	\$		00	(f) SSI, Social Security, Veterans or Railroad Disability (enclose documentation)	\$		00
(g) Other (See instructions) Source				Amount	\$		00

Complete the information below for ALL persons (including yourself) who resided in your household **at any time** during 2015. Indicate the number of months they lived with you and whether or not their income is included on lines 4 through 9 of Form K-40H.

Members of Household

Name	Date of Birth	Relationship	Number of months resided in household	Income included on lines 4-9, Yes/No	Social Security Number

2015 KANSAS PROPERTY TAX RELIEF CLAIM for Low Income Seniors



FILE THIS CLAIM AFTER DECEMBER 31, 2015, BUT NO LATER THAN APRIL 15, 2016

Claimant's Social Security Number, First four letters of claimant's last name, Claimant's Telephone Number

Name and Address section: Your First Name, Initial, Last Name, Mailing Address, City, Town, or Post Office, State, Zip Code, County Abbreviation. Includes checkboxes for deceased claimant and amended claim.

Qualifications section: 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 2015; 2. A home owner during 2015; and, 3. Age 65 or over for the entire year. Includes a date of birth input field and a note about Form K-40H.

Household Income section: ENTER THE TOTAL RECEIVED IN 2015 FOR EACH TYPE OF INCOME. See instructions. Includes lines 4 through 10 for various income types and a total household income line.

Refund section: 11. General property taxes paid timely in 2015, excluding specials. 12. PROPERTY TAX REFUND. Multiply the amount on line 11 by 75% (.75). Includes a checkbox for the Refund Advancement Program.

Signature section: I authorize the Director of Taxation or the Director's designee to discuss my K-40PT and 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. Includes lines for signature, date, preparer signature, and phone number.

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

COMPLETE THE BACK OF THIS FORM

Barcode area with empty boxes for tracking.



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

Excluded Income

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 type="text"/>	00	(b) Nongovernmental Gifts	\$	<input type="text"/>	00
(c) Child Support.....	\$	<input type="text"/>	00	(d) Settlements (lump sum)	\$	<input type="text"/>	00
(e) Personal and Student Loans.....	\$	<input type="text"/>	00	(f) SSI, Social Security, Veterans or Railroad Disability (enclose documentation)	\$	<input type="text"/>	00
(g) Other (See instructions) Source		<input type="text"/>		Amount	\$	<input type="text"/>	00

Members of Household

14. List the names of **ALL persons who resided in your household at any time during 2015**. Specify the number of months they lived 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 type="text"/>	<input type="text"/>	\$ <input type="text"/> 00	<input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/> 00	<input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/> 00	<input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/> 00	<input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/> 00	<input type="text"/>
<input type="text"/>	<input type="text"/>	\$ <input type="text"/> 00	<input type="text"/>

FORM K-40PT LINE-BY-LINE INSTRUCTIONS

If you filed a Form K-40H for 2015, you cannot claim this refund.

NAME AND ADDRESS

Use the instructions for Form K-40H on page 4 to complete the personal information at the top of Form K-40PT.

QUALIFICATIONS

Lines 1 through 3: You must have been **65 years of age or older** (born before January 1, 1950), a **resident** of Kansas **all of 2015** and a **home owner during 2015**. If you meet these qualifications, enter your date of birth on line 3.

HOUSEHOLD INCOME

Enter on lines 4 through 10 the annual income amounts received by you and your spouse during 2015. Enter on line 9 the income of ALL other persons who lived with you at any time during 2015.

Lines 4 and 5: Use the instructions for lines 4 and 5 of Form K-40H that begin on page 4 to complete lines 4 and 5 of Form K-40PT.

Line 6: Enter the total Social Security and Supplemental Security Income (SSI) benefits received by you and your spouse. Include amounts deducted for Medicare, any Social Security death benefits, and any SSI payments not shown on the annual benefit statement. **Do not include Social Security or SSI "disability" payments.** (Note: Social Security disability or SSI payments become regular Social Security payments when a recipient reaches age 65. These Social Security disability payments, that were once Social Security disability or SSI payments, are NOT included in household income.) Enter the annual amount of any Social Security **disability** benefits and Social Security payments of a person who has reached age 65 who had previously been receiving Social Security disability payments, in the Excluded Income section on the back of Form K-40PT and enclose a benefit statement or award letter with your claim.

If you do not have your statement of Social Security benefits, use the method given for line 6 of Form K-40H to compute your total received in 2015. Instructions are on page 4.

Lines 7 through 9: Use the instructions for lines 7 through 9 of Form K-40H on page 5 to complete these lines on Form K-40PT.

Line 10: Add lines 4 through 9 and enter the result. If line 10 is more than \$19,100, you **do not qualify** for a refund.

REFUND

Line 11: Enter the total 2015 general property tax you paid as shown on your real estate tax statement. Enter only **timely paid** tax amounts. For a list of items that you **cannot include** see the instructions for line 12 of Form K-40H on page 5.

If you are filing on behalf of a claimant who died during 2015, the property tax must be prorated based on the date of death. To determine the property tax amount to enter here, follow the instructions for deceased claimants on page 6.

Line 12: Multiply the amount on line 11 by 75 percent (.75). This is the amount of your property tax refund.

EXCLUDED INCOME

Line 13: To speed the processing of your refund, list in items (a) through (g) all other income that you **did not include** on line 10. For more information on what to include here, see *Excluded Income* on page 5.

Line 14: List all persons who resided in your household at any time during 2015. Complete all requested information for each person. If more space is needed, enclose a separate sheet.

SIGNATURE

You, as the claimant, **MUST sign the claim**. See the instructions for *Signature* on page 6.

If you are claiming homestead benefits because of disability, this form must be completed by a duly licensed physician and enclosed with your Homestead Claim, Form K-40H. Instead of this schedule, you may enclose a copy of your Social Security certification of disability letter that shows you are receiving benefits based upon a **total** and permanent disability which prevented you from being engaged in any substantial gainful activity during the entire calendar year of 2015. You may enclose a copy of your original Veterans Disability Statement or request a letter from your regional Veterans Administration that includes your disability date and percentage of permanent disability. Annual income derived from any substantial gainful activity during 2015 must not exceed the limits set by the Social Security Administration for 2015: \$13,080 if the impairment is other than blindness; \$21,840 if the individual is blind.

NAME OF PERSON EXAMINED _____

SOCIAL SECURITY NUMBER _____

ADDRESS _____

Street or RR (Include apartment number or lot number)

City

State

Zip Code

1. Does the individual qualify as having a disability preventing them from engaging in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death and/or has lasted for the entire year of 2015?

YES

NO

2. Nature of disability. _____

3. When was the condition originally diagnosed? _____

CERTIFICATION OF PHYSICIAN

I, _____, certify that I have personally examined the physical and mental condition of the above named individual.

I declare under the penalties of perjury that to the best of my knowledge and belief, this is a true, correct and complete statement.

SIGNATURE OF PHYSICIAN _____

PHYSICIAN'S NAME _____

Please type or print

BUSINESS ADDRESS _____

Street or RR

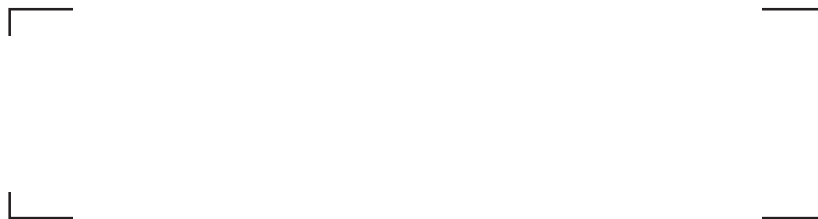
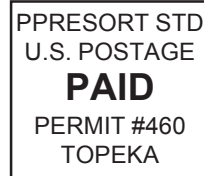
City

State

Zip Code

PHONE _____

DATE _____



Taxpayer Assistance

ksrevenue.org

Filing. If you need help completing your claim, contact our Tax Assistance Center. If you are eligible, free tax preparation is available through programs such as VITA (offered by the IRS), AARP-Tax Aide, and TCE. These programs have sites throughout the state of Kansas. To find a site near you, call 1-800-829-1040 or visit a local Internal Revenue Service office. To find an AARP site, call 1-888-227-7669 or visit their website at: aarp.org/money/taxes/aarp_taxaide

Tax Assistance Center
Docking State Office Building - 1st floor
915 SW Harrison Street
Topeka, KS 66612-1588

PHONE: 785-368-8222
FAX: 785-291-3614

HOURS: 8 a.m. to 4:45 p.m. (M-F)

Refunds. You can **check the status of your refund** from our web site or by phone. You will need the Social Security number and the expected amount of your refund. When you have this information, go to ksrevenue.org and click on **Check your refund online** or call 1-800-894-0318 for automated refund information and follow the recorded instructions.

Forms. If you choose to file paper use the **original** form printed by the Kansas Department of Revenue, not a copy; or a form from an *approved* software package. Visit our website for a list of *approved* software vendors.

Electronic Filing Options

webtax.org

Forms **K-40H** and **K-40PT** may be filed electronically using Kansas **WebFile** or through **IRS e-File**. Both filing options are **safe** and **secure** and you will get your refund faster if you use direct deposit.

WebFile requires internet access and you must have filed a 2014 claim. You will need to enter your last year's refund amount to verify your identity. Go to our website to get started.

IRS e-File is a **fast, accurate, and safe** way to file your claim online using an authorized IRS e-File provider. Ask your tax preparer about e-File or visit our website for a list of authorized e-File providers and software products.