This is **not a current year tax form** and cannot be used to file a **2009 return**. If you use this form for a tax year other than is intended, it **will not be processed**. Instead, it will be returned to you with a request to submit your information on the proper form.

If you need a **current year Kansas tax form**, send your request through email at [forms@kdor.state.ks.us](mailto:forms@kdor.state.ks.us) or call our voice mail forms request line at 785-296-4937. Please allow 2 weeks for delivery.

FORM LOCATED BELOW, PLEASE SCROLL OR PAGE DOWN.
### Filing Information

- **Your Name**
  - Initial: [ ]
  - Last Name: [ ]

- **Spouse's First Name**
  - Initial: [ ]
  - Last Name: [ ]

- **Mailing Address (Number and Street, including Rural Route)**
  - City, Town, or Post Office: [ ]
  - State: [ ]
  - Zip Code: [ ]

- **School District**
  - [ ]

- **Daytime telephone number**
  - [ ]

#### Marking Your Return

- **If your name or address has changed** since last year, mark an "X" in this box.
- **If taxpayer (or spouse if filing joint) died during this tax year, mark an "X" in this box.**

#### Filing Status (Mark ONE)

- Single
- Married filing joint (Even if only one had income)
- Married filing separate
- Head of household (Do not mark this box if you are filing a joint return)

#### Residency Status (Mark ONE)

- Resident
- Nonresident or Part-year resident from ___/___/___ to ___/___/___
  - (Complete Schedule S, Part B)

#### Exemptions

- Number of exemptions claimed on your 2008 federal return
  - [ ]
- If filing status is head of household, add one exemption
  - [ ]
- Total Kansas exemptions
  - [ ]

### Income

- Federal adjusted gross income
  - [ ]
- Modifications (from Schedule S, line A19). **Enclose Schedule S.**
  - [ ]
- Kansas adjusted gross income (line 2 added to or subtracted from line 1; see instructions, page 15)
  - [ ]

### Deductions

- Standard deduction OR itemized deductions (see instructions, page 15)
  - [ ]
- Exemption allowance ($2,250 x number of exemptions claimed)
  - [ ]
- Total deductions (add lines 4 and 5)
  - [ ]
- Taxable income (subtract line 6 from line 3; if less than zero, enter 0)
  - [ ]

### Tax Computation

- Tax (from Tax Tables or Tax Computation Schedules beginning on page 25)
  - [ ]
- Nonresident allocation percentage (from Schedule S, line B23. If 100%, enter 100.0000. Enclose your completed Schedule S with this form)
  - [ ]
- Nonresident tax (multiply line 8 by line 9)
  - [ ]
- Kansas tax on lump sum distributions (residents only - see instructions, page 16)
  - [ ]
- TOTAL INCOME TAX (Residents: add lines 8 & 11; Nonresidents: enter amount from line 10)
  - [ ]

**PLEASE COMPLETE REVERSE SIDE**
TAX: Enter the income tax amount from line 12

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>Credit for taxes paid to other states</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Credit for child &amp; dependent care expenses</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other credits</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Total tax credits</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Income tax balance after credits</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Use tax due</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Total Tax Balance</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Kansas income tax withheld from W-2, 1099, or K-19</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Estimated tax paid</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Amount paid with Kansas extension</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Earned income credit</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Refundable portion of tax credits</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>FOOD SALES TAX REFUND (You must meet the qualifications listed on page 14)</td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Payments remitted with original return</td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Overpayment from original return</td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Total refundable credits</td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>UNDERPAYMENT (If line 19 is greater than line 28)</td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>Interest (See instructions, page 19)</td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>Penalty (See instructions, page 19)</td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>Estimated Tax Penalty (See instructions, page 19)</td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>AMOUNT YOU OWE (Add lines 20 through 26 and subtract line 27)</td>
<td></td>
</tr>
<tr>
<td>34</td>
<td>OVERPAYMENT (If line 19 is less than line 28)</td>
<td></td>
</tr>
<tr>
<td>35</td>
<td>CREDIT FORWARD (Enter the amount of line 34 you wish to be applied to your 2009 estimated tax)</td>
<td></td>
</tr>
</tbody>
</table>

If you wish to donate to any of the following contribution programs, enter your donation amount(s) on the appropriate line(s). These donations will reduce your refund or increase the amount you owe.

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>36</td>
<td>CHICKADEE CHECKOFF (Kansas Nongame Wildlife Improvement Program)</td>
</tr>
<tr>
<td>37</td>
<td>SENIOR CITIZENS MEALS ON WHEELS CONTRIBUTION PROGRAM</td>
</tr>
<tr>
<td>38</td>
<td>BREAST CANCER RESEARCH FUND</td>
</tr>
<tr>
<td>39</td>
<td>MILITARY EMERGENCY RELIEF FUND</td>
</tr>
<tr>
<td>40</td>
<td>REFUND (Subtract lines 35 through 39 from line 34. SIGN your return below.)</td>
</tr>
</tbody>
</table>

I authorize the Director of Taxation or the Director's designee to discuss my K-40 return 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 return.

Signature of taxpayer: ____________________________ Date: ____________
Signature of preparer other than taxpayer: ____________________________ Phone number of preparer: ____________________________
Tax preparer’s EIN (Employer Identification Number) OR SSN (Social Security Number): ____________________________

If joint return, BOTH taxpayer and spouse must sign even if only one had income

ENCLOSE any necessary documents with this form. DO NOT STAPLE.

 MAIL TO: KANSAS INCOME TAX KANSAS DEPARTMENT OF REVENUE 915 SW HARRISON ST TOPEKA, KS 66699-1000