

TESTMELXXXXX A	TESTWATERSXXXXXXXXXX	TEST	234007891
TESTGERTRUDE B	TESTGIBSONXXXXXXXXXX	TEST	987004321

PART A - MODIFICATIONS TO FEDERAL ADJUSTED GROSS INCOME**ADDITIONS TO FEDERAL ADJUSTED GROSS INCOME:**

A1. State and municipal bond interest not specifically exempt from KS income tax (reduced by related expenses)	111114695124
A2. Contributions to all KPERS (Kansas Public Employee's Retirement Systems)	211114695124
A3. Kansas Expensing Recapture (enclose applicable schedules)	311114695124
A4. Low income student scholarship contribution (enclose Schedule K-70)	411114695124
A5. Other additions to FAGI (enclose list)	511114695124
A6. Total additions to FAGI (add lines A1 through A5)	611114695124

SUBTRACTIONS FROM FEDERAL ADJUSTED GROSS INCOME:

A7. Social Security benefits	751114695124
A8. KPERS lump sum distributions exempt from income tax	861114695124
A9. Interest on U.S. Government obligations (reduced by related expenses)	971114695124
A10. State or local income tax refund (if included in line 1 of Form K-40)	101114695124
A11. Retirement benefits specifically exempt from Kansas Income Tax	111114695124
A12. Military compensation of a nonresident servicemember (Non-Residents only)	121114695124
A13. Contributions to Learning Quest or other states' qualified tuition program	131114695124
A14. Armed forces recruitment, sign-up, or retention bonus	141114695124
A15. Contributions to an ABLE savings account	151114695124
A16. Other subtractions from FAGI (enclose list)	161114695124
A17. Total subtractions from FAGI (add lines A7 through A16)	171114695124

NET MODIFICATIONS:

A18. Net modifications to FAGI (subtract line A17 from line A6). Enter total here and on line 2, Form K-40.	-18114695124
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12	ADDITIONS TO FEDERAL ADJUSTED GROSS INCOME:																																																																																12
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23	A5. Other additions to FAGI (enclose list)																				511114695124											23																																																	
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26	A6. Total additions to FAGI (add lines A1 through A5)																				611114695124											26																																																	
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TESTMELXXXXX A TESTWATERSXXXXXXXXXXXX

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PART B - PART-YEAR RESIDENT/NONRESIDENT ALLOCATION

INCOME:	Total From Federal Return:	Amount From Kansas Sources:
B1. Wages, salaries, tips, etc	311114695124	421114695124
B2. Interest and dividend income	321114695124	431114695124
B3. Pensions, IRA distributions and annuities	331114695124	441114695124
Additional Income: (Lines B4 - B12)		
B4. Refunds of state and local income taxes	341114695124	451114695124
B5. Alimony received	352114695124	462114695124
B6. Business income or loss	-36114695124	-47114695124
B7. Capital gain or loss	-37114695124	-48114695124
B8. Other gains or losses	-38114695124	-49114695124
B9. Rental real estate, royalties, partnerships, S corps, trusts, estates, REMICS, etc	-39114695124	-50114695124
B10. Farm income or loss	-40114695124	-51114695124
B11. Unemployment compensation, taxable social security benefits and other income	-41114695124	-52114695124
B12. Total income from Kansas sources (Add lines B1 through B11)		-53114695124

ADJUSTMENTS AND MODIFICATIONS TO KANSAS SOURCE INCOME: Total From Federal Return:	Amount From Kansas Sources:
B13. IRA Retirement Deductions	541114695124
B14. Penalty on early withdrawal of savings	551114695124
B15. Alimony paid	561114695124
B16. Moving expenses	571114695124
B17. Other federal adjustments	581114695124
B18. Total federal adjustments to Kansas source income (Add lines B13 through B17)	641114695124
B19. Kansas source income after federal adjustments (Subtract line B18 from line B12)	-65114695124
B20. Net modifications from Part A that are applicable to Kansas source income	-66114695124
B21. Modified Kansas source income (Line B19 plus or minus line B20)	-67114695124
B22. Kansas adjusted gross income (From line 3, Form K-40)	-68114695124
B23. Nonresident allocation percentage (Divide line B21 by line B22 and round to the fourth decimal place: not to exceed 100.0000). Enter result here and on line 9 of Form K-40.	100.0000

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11	PART B - PART-YEAR RESIDENT/NONRESIDENT ALLOCATION																																																																																11
12	INCOME:												Total From Federal Return:																				Amount From Kansas Sources:										12																																						
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14			B1. Wages, salaries, tips, etc										111114695124																				111114695124										14																																						
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20	(Lines 4 - 12)		B4. Refunds of state and local income taxes										111114695124																				111114695124										20																																						
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PART C - KANSAS ITEMIZED DEDUCTIONS

C1. Medical and dental expenses from line 4 of federal Schedule A: \$ _____ Enter 50% of this amount. 701114695101

C2. Real estate taxes from line 5b of federal Schedule A: \$ _____ Enter 50% of this amount. 711114695102

C3. Personal property taxes from line 5c of federal Schedule A: \$ _____ Enter 50% of this amount. 721114695103

C4. Qualified residence interest and mortgage insurance premiums you paid and reported on line 15 of federal Schedule A. (See instructions) \$ _____ Enter 50% of this amount. 731114695104

C5. Gifts to charity from line 14 of federal Schedule A. 741114695105

C6. Kansas itemized deductions (add lines C1 through C5). Enter result here and line 4 of Form K-40. 751114695106

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4	SCH S 2018 KANSAS 000 122418
5	Rev. 7-18 SUPPLEMENTAL SCHEDULE
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9	TESTGERTRUDE B TESTGIBSONXXXXXXXXXX TEST 987004321
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11	PART C - KANSAS ITEMIZED DEDUCTIONS
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14	C1. Medical and dental expenses from line 4 of federal Schedule A: \$ Enter 50% of this amount. 701114695101
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17	C2. Real estate taxes from line 5b of federal Schedule A: \$ Enter 50% of this amount. 711114695102
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19	
20	C3. Personal property taxes from line 5c of federal Schedule A: \$ Enter 50% of this amount. 721114695103
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22	C4. Qualified residence interest and mortgage insurance premiums you paid and reported on line 15 of federal
23	Schedule A. (See instructions) \$ Enter 50% of this amount. 731114695104
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26	C5. Gifts to charity from line 14 of federal Schedule A. 741114695105
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29	C6. Kansas itemized deductions (add lines C1 through C5). Enter result here and line 4 of Form K-40. 751114695106
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