# SCHEDULE S

# KANSAS SUPPLEMENTAL SCHEDULE

Your I	First Name	Initial	Last Name		Enter the first four louse ALL CAPITAL			ast nam	ıe.				
					Your Social		Т						
				_	Security number L								-
Spous	e's First Name	Initial	Last Name		Enter the first four least name. Use AL				8				Ш
					Spouse's Social Security number								
	PART A - MODIFICA	TIOI	NS TO FEDERAL ADJUSTE	ΞD	GROSS INC	OM	E (Se	ee in	strı	ıctio	ons	)	
4.07		4 D II	IOTED ODGOO INCOME										
ADI	DITIONS TO FEDERAL A	ADJU	JSTED GROSS INCOME:										
A1.			pecifically exempt from Kansas income ta				$\perp$						00
A2.	Contributions to all KPERS (Kans	as Pul	olic Employee's Retirement Systems) (S	ee i	nstructions)		$\perp$						00
A3.	Federal net operating loss carry f	orward											00
A4.	Contributions to a Regional Found	dation	(See instructions)										00
A5.	Kansas expensing recapture (See	e instru	actions and enclose applicable schedules	s)									00
A6.	Other additions to Federal adjuste	ed gros	ss income (See instructions and enclose	list)									00
A7.	Total additions to Federal adjuste	d gros	s income (Add lines A1 through A6)										00
			AL ADJUSTED GROSS INC								_	_	Tool
A8.	Social Security benefits (See inst	ruction	s)			Щ	+	<u> </u>	Ļ		<u> </u>	<u></u>	00
A9.	KPERS lump sum distributions ex	xempt 1	from Kansas income tax (See instruction	s) .		Н.	+	<u> </u>	Ļ			<u></u>	00
A10.	Interest on U.S. Government obli	gations	s (Reduced by related expenses)			Ц.	+	<u> </u>	Ļ			<u></u>	00
A11.	State or local income tax refund (	If inclu	ded on line 1 of Form K-40)			Ц.	+	Ļ	Ļ		L	L	00
							_						00
A13.	Retirement benefits specifically e benefits or KPERS lump sum dist	xempt ribution	from Kansas income tax (Do not include ns)	Soc	cial Security	Ш	_						00
A14.	Military Compensation of a Nonre	esident	Servicemember (Nonresidents only; see	e ins	tructions)	Ш						L	00
A15.	Qualified Long-Term Care (LTC)	insurar	nce premiums (See instructions)			Ш						L	00
A16.	Contributions to Learning Quest of	or othe	r states' qualified tuition programs (See in	nstr	uctions)		_						00
A17.	Armed Forces Recruitment, Sign-	-up, or	Retention Bonus				_						00
A18.	Kansas expensing deduction (Se	e instru	uctions and enclose applicable schedules	s)			4					L	00
A19.	Other subtractions from Federal a	adjuste	d gross income (See instructions and en	clos	e list)		_						00
A20.	Total subtractions from Federal a	djusted	d gross income (Add lines A8 through A1	9).								L	00
	MODIFICATIONS:		_										
If amo	ount is negative, shade minus (-) in	n box.	Example:										
A21.			oss income (subtract line A20 from line A, shade minus (-) in box		🖪 📖	Ш							00

## PART B - INCOME ALLOCATION FOR NONRESIDENTS and PART-YEAR RESIDENTS

If amount is negative, shade the minus (-) in box. Example:	-
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### INCOME:

	To	otal From Fed	eral Return	):	P	Amount From Kansas Sources:				
B1. Wages, salaries, tips, etc				00				00		
B2. Interest and dividend income				00				00		
B3. Refunds of state and local income taxes				00				00		
B4. Alimony received				00				00		
B5. Business income or loss				00				00		
B6. Farm income or loss				00				00		
B7. Capital gain or loss				00				00		
B8. Other gains or losses				00	1			00		
B9. Pensions, IRA distributions, and annuities				00				00		
B10. Rental real estate, royalties, partnerships, S corporations, estates, trusts, etc				00	3			00		
B11. Unemployment compensation, taxable Social Security benefits, & other income				00				00		
B12. Total income from Kansas sources (Add lines B1	through E	B11)						00		

#### **ADJUSTMENTS AND MODIFICATIONS TO KANSAS SOURCE INCOME:**

	To	otal From Fed	eral Retu	Ar	Amount From Kansas Sources:						
B13. IRA Retirement Deductions				00				00			
B14. Penalty on early withdrawal of savings				00				00			
B15. Alimony paid				00				00			
B16. Moving expenses				00				00			
B17. Other federal adjustments				00				00			
B18. Total federal adjustments to Kansas source income	(Add line	es B13 through B	17)					00			
B19. Kansas source income after federal adjustments (S	ubtract lii	ne B18 from line	B12)					00			
B20. Net modifications applicable to Kansas source incor	ne (See	instructions)						00			
B21. Modified Kansas source income (Line B19 plus or n	ninus line	e B20)						00			
B22. Kansas adjusted gross income (From line 3, Form k	(-40)				-			00			
B23. Nonresident allocation percentage (Divide line B21 place; not to exceed 100.0000). Enter result here are					Ī						