

DO NOT STAPLE

KANSAS PROPERTY TAX RELIEF CLAIM for Low Income Seniors



FILE THIS CLAIM AFTER DECEMBER 31, 2008, BUT NO LATER THAN APRIL 15, 2009

Claimant's Social Security Number [] [] [] [] [] [] [] [] [] []

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

Claimant's Telephone Number [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []

Name and Address

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 2008; 2. A home owner during 2008; and, 3. Age 65 or over for the entire year. Enter your date of birth (must be prior to 1943)

NOTE: If you filed a Form K-40H for 2008, you DO NOT qualify for this property tax refund.

MONTH DAY YEAR [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []

Household Income

Enter the total received in 2008 for each type of income. See instructions on the back of this form.

- 4. 2008 Wages OR Kansas Adjusted Gross Income \$ _____ plus Federal Earned Income Credit \$ _____. Enter the total.
5. All taxable income other than wages and pensions not included in Line 4. Do not subtract net operating losses and capital losses.
6. Total Social Security and SSI benefits, including Medicare deductions, received in 2008 (do not include disability payments from Social Security or SSI)
7. Railroad Retirement benefits and all other pensions, annuities, and veterans benefits (do not include disability payments from Veterans and Railroad Retirement).
8. TAF payments, general assistance, worker's compensation, grants and scholarships
9. All other income, including the income of others who resided with you at any time during 2008.
10. TOTAL HOUSEHOLD INCOME. Add lines 4 through 9. If line 10 is more than \$16,800, you do not qualify for a refund.

Table with 5 columns and 10 rows for entering household income amounts.

Refund

- 11. General property taxes paid timely in 2008 (see instructions on the back of this form).
12. PROPERTY TAX REFUND. Multiply the amount on line 11 by 45% (.45). This is the amount of your refund. Important: If you filed Form ELG with your county, your refund will be reduced by the ELG amount applied to the first half of your 2008 property tax. See page 23.

Refund amount input boxes [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []

Mark this box if you wish to participate in the Refund Advancement Program (see instructions on page 24) []

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 10 to 12 weeks to process your refund.

PLEASE COMPLETE THE BACK OF THIS FORM

[] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []



Providing this information should speed the processing of your claim. Income reported here should not be included on line 8 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 8:

(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 on page 17): Source _____ Amount \$													00	

Members of Household

14. List the names of ALL persons who resided in your household at any time during 2008. 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
		\$ 00	
		\$ 00	
		\$ 00	
		\$ 00	
		\$ 00	
		\$ 00	
		\$ 00	

INSTRUCTIONS