

SCHEDULE S

(Rev. 7-20)

2020

114320



DO NOT STAPLE

KANSAS SUPPLEMENTAL SCHEDULE

Your First Name	Initial	Last Name
Spouse's First Name	Initial	Last Name

Enter the first four letters of your last name. Use ALL CAPITAL letters.

Your Social Security number

Enter the first four letters of your spouse's last name. Use ALL CAPITAL letters.

Spouse's Social Security number

IMPORTANT: Refer to the **Schedule S instructions** before completing Parts A, B, or C of this form. You must enclose all supportive documentation where indicated in the instructions.

PART A - Modifications to Federal Adjusted Gross Income

Additions

- A1. State and municipal bond interest not specifically exempt from Kansas income tax (reduced by related expenses)
- A2. Contributions to all KPERS (Kansas Public Employee's Retirement Systems).....
- A3. Kansas expensing recapture (enclose applicable schedules)
- A4. Low income student scholarship contributions (enclose Schedule K-70)
- A5. **Other additions** to federal adjusted gross income (see instructions and enclose list)
- A6. **Total additions** to federal adjusted gross income (add lines A1 through A5).....

A1		00
A2		00
A3		00
A4		00
A5		00
A6		00

Subtractions

- A7. Social Security benefits.....
- A8. KPERS lump sum distributions exempt from Kansas income tax.....
- A9. Interest on U.S. Government obligations (reduced by related expenses)
- A10. State or local income tax refund (if included in line 1 of Form K-40)
- A11. Retirement benefits specifically exempt from Kansas income tax (do NOT include social security benefits or KPERS lump sum distributions).....
- A12. Military compensation of a nonresident servicemember (nonresidents only)
- A13. Contributions to Learning Quest or other states' qualified tuition program
- A14. Armed forces recruitment, sign-up, or retention bonus
- A15. Contributions to an ABLÉ savings account
- A16. Other subtractions from federal adjusted gross income (see instructions and enclose list)
- A17. **Total subtractions** from federal adjusted gross income (add lines A7 through A16).....

A7		00
A8		00
A9		00
A10		00
A11		00
A12		00
A13		00
A14		00
A15		00
A16		00
A17		00

Net Modification

- A18. **Net modification** to federal adjusted gross income (subtract line A17 from line A6). Enter total here and on line 2, Form K-40. If negative, shade minus box

A18	<input type="checkbox"/>	00
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PART B - Income Allocation for Nonresidents and Part-Year Residents

Income

Shade box for negative amounts.
Example:

	Total from federal return:		Amount from Kansas sources:	
B1. Wages, salaries, tips, etc.	B1	00	B1	00
B2. Interest and dividend income	B2	00	B2	00
B3. Pensions, IRA distributions & annuities	B3	00	B3	00

Additional Income

B4. Refund of state & local income taxes	B4	00	B4	00
B5. Alimony received	B5	00	B5	00
B6. Business income or loss	B6	00	B6	00
B7. Capital gain or loss	B7	00	B7	00
B8. Other gains or losses	B8	00	B8	00
B9. Rental real estate, royalties, partnerships, S corps, trusts, estates, REMICS etc	B9	00	B9	00
B10. Farm income or loss	B10	00	B10	00
B11. Unemployment compensation, taxable social security benefits & other income	B11	00	B11	00
B12. Total income from Kansas sources (add lines B1 through B11)	B12	00	B12	00

Adjustments to Income

Shade box for negative amounts.
Example:

	Total from federal return:		Amount from Kansas sources:	
B13. IRA retirement deductions	B13	00	B13	00
B14. Penalty on early withdrawal of savings	B14	00	B14	00
B15. Alimony paid	B15	00	B15	00
B16. Moving expenses for members of the armed forces	B16	00	B16	00
B17. Other federal adjustments	B17	00	B17	00
B18. Total federal adjustments to Kansas source income (add lines B13 through B17)	B18	00	B18	00
B19. Kansas source income after federal adjustments (subtract line B18 from line B12)	B19	00	B19	00
B20. Net modifications from Part A that are applicable to Kansas source income	B20	00	B20	00
B21. Modified Kansas source income (line B19 plus or minus line B20)	B21	00	B21	00
B22. Kansas adjusted gross income (from line 3, Form K-40)	B22	00	B22	00

Nonresident Allocation Percentage

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	
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PART C - Kansas Itemized Deductions

Itemized Deduction Computation

C1. Medical and dental expenses from line 4 of federal Schedule A	C1	00
C2. Real estate taxes from line 5b of federal Schedule A	C2	00
C3. Personal property taxes from line 5c of federal Schedule A	C3	00
C4. Qualified residence interest you paid and reported on federal Schedule A (see instructions)	C4	00
C5. Gifts to charity from line 14 of federal Schedule A	C5	00
C6. Kansas itemized deductions (add lines C1 through C5). Enter result here and line 4 of Form K-40.	C6	00