

K-18

(Rev. 7/03)

2003

FIDUCIARY REPORT OF NONRESIDENT BENEFICIARY TAX WITHHELD KANSAS DEPARTMENT OF REVENUE

COPY A
To Be Filed with
Beneficiary's Kansas
Income Tax Return

ENDING DATE OF ESTATE OR TRUSTS TAX YEAR _____

		NAME OF ESTATE OR TRUST
NONRESIDENT BENEFICIARY'S NAME	SOCIAL SECURITY NO.	NONRESIDENT BENEFICIARY'S SHARE OF DISTRIBUTABLE INCOME FROM KANSAS SOURCES:
STREET ADDRESS OR RURAL ROUTE		Taxable income.....\$ _____
CITY	STATE	Modifications as if Kansas resident.....\$ _____
	ZIP CODE	Amount of tax withheld.....\$ _____ *

* Enter this amount on the "Kansas Income Tax Withheld" line of the Kansas Individual Income Tax return.

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FIDUCIARY REPORT OF NONRESIDENT BENEFICIARY TAX WITHHELD KANSAS DEPARTMENT OF REVENUE

COPY B
For Beneficiary's Record

ENDING DATE OF ESTATE OR TRUSTS TAX YEAR _____

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NONRESIDENT BENEFICIARY'S NAME	SOCIAL SECURITY NO.	NONRESIDENT BENEFICIARY'S SHARE OF DISTRIBUTABLE INCOME FROM KANSAS SOURCES:
STREET ADDRESS OR RURAL ROUTE		Taxable income.....\$ _____
CITY	STATE	Modifications as if Kansas resident.....\$ _____
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NONRESIDENT BENEFICIARY'S NAME	SOCIAL SECURITY NO.	NONRESIDENT BENEFICIARY'S SHARE OF DISTRIBUTABLE INCOME FROM KANSAS SOURCES:
STREET ADDRESS OR RURAL ROUTE		Taxable income.....\$ _____
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CITY		Modifications as if Kansas resident.....\$ _____
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		* Enter this amount on the "Kansas Income Tax Withheld" line of the Kansas Individual Income Tax return.

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