

DO NOT STAPLE

KANSAS PROPERTY TAX RELIEF CLAIM for Low Income Seniors



FILE THIS CLAIM AFTER DECEMBER 31, 2014, BUT NO LATER THAN APRIL 15, 2015

Claimant's Social Security Number

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

Claimant's Telephone Number

Name and Address section with fields for First Name, Initial, Last Name, Home Address, City, State, Zip Code, and County Abbreviation.

Checkboxes for deceased claimant, name/address change, and amended claim.

Qualifications: To qualify for this property tax refund you must meet the household income limitation and you must have been:

NOTE: If you filed a Form K-40H for 2014, you DO NOT qualify for this property tax refund.

- 1. A resident of Kansas during the entire year of 2014;
2. A home owner during 2014; and,
3. Age 65 or over for the entire year. Enter your date of birth (must be prior to 1949)

MONTH DAY YEAR date entry fields

Enter the total received in 2014 for each type of income. See instructions on the back of this form.

Table with 10 rows for household income items and columns for amount and total.

Refund section with lines 11 and 12, and an important note about Form ELG.

Mark this box if you wish to participate in the Refund Advancement Program (see instructions)

Signature section with fields for Claimant's signature, Date, Signature of preparer other than claimant, and Preparer's phone number.

IMPORTANT: Please allow 20 to 24 weeks to process your refund.

COMPLETE THE BACK OF THIS FORM

Barcode area with empty boxes for tracking.



Excluded Income

Providing this information should speed the processing of your claim. Income reported here should not be included on line 10 of this form.

13. Enter in the spaces provided the annual amount of all other income not included as household income on line 10:

(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	\$		00
(g) Other (See instructions) Source				(enclose documentation)			00
				Amount	\$		00

Members of Household

14. List the names of ALL persons who resided in your household at any time during 2014. 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	