

MOUNICA CHANDA 6602385450 CHAN 001236035
2904 SW 31CT APT 205 SN 501
TOPEKA KS 66614

Name or address has changed? Taxpayer or (spouse if filing joint) died during this tax year Taxpayer was engaged in commercial farming/fishing in 2020

Amended Return: Amended affects Kansas only Amended Federal tax return Adjustment by the IRS
Filing Status: Single Married Filing Joint (Even if only one had income) Married Filing Separate Head of Household (Do not check if filing joint return)
Residency Status: Resident NonResident (Complete Sch S, Part B) State of Legal Residence
Part-Year Resident (Complete Sch S, Part B) From To
Exemptions: 1 Enter the total exemptions for you, your spouse (if applicable), and each person you claim as a dependent. If filing status above is Head of Household, add one exemption. 1 **Total Kansas exemptions**

In the following spaces, provide the requested information for all persons you claimed as dependents. **DO NOT include you or your spouse.** If additional space is needed, enclose a separate sheet, only after completing all nine lines below.

Dependent Name - First, Middle and Last **Date of Birth - MMDDYYYY** **Relationship** **SSN**

Food Sales Tax Credit: You must have been a Kansas resident for **ALL** of 2020. Complete this section to determine your qualifications and credit. If you did not mark A, B, and C, **STOP HERE;** you do not qualify for this credit.

A. Had a dependent child who lived with you all year and was under the age of 18 all of 2020? **E.** Number of exemptions claimed
B. Were you (or spouse) 55 years of age or older all of 2020 (born prior to January 1, 1965)? **F.** Number of dependents that are 18 years of age or older (born on or before January 1, 2003)
C. Were you (or spouse) totally and permanently disabled or blind all of 2020, regardless of age? **G.** Total qualifying exemptions (subtract line F from line E)
D. If you answered YES to A, B, or C, enter your FAGI from line 1 of this return. If it is more than \$30,615 **STOP HERE,** you do not qualify for this credit. 0 **H.** Food Sales Tax Credit (multiply line G by \$125). Enter result here and on line 18 of this form. 0

MOUNICA

CHANDA

CHAN

001236035

1. Federal adjusted gross income	63236	23. Estimated tax paid	0
2. Modifications	0	24. Amount paid with Kansas extension	0
3. Kansas adjusted gross income	63236	25. Refundable portion of earned income tax credit	0
4. Standard or itemized deductions	3000	26. Refundable portion of tax credits	0
5. Exemption allowance	2250	27. Payments remitted with original return	0
6. Total deductions	5250	28. Overpayment from original return	0
7. Taxable income	57986	29. Total refundable credits	2969
8. Tax	2847	30. Underpayment	0
9. Nonresident percentage	0.0000	31. Interest	0
10. Nonresident tax	0	32. Penalty	0
11. KS tax on lump sum distributions	0	33. Estimated tax penalty	0
12. TOTAL INCOME TAX	2847	34. AMOUNT YOU OWE	0
13. Credit for taxes paid to other states	0	35. Overpayment	122
14. Credit for child and dependent care expenses	0	36. CREDIT FORWARD	0
15. Other credits	0	37. Chickadee Checkoff	0
16. Subtotal	2847	38. Senior Citizens Meals On Wheels Contribution Program	0
17. Earned Income Credit	0	39. Breast Cancer Research Fund	0
18. Food Sales Tax Credit	0	40. Military Emergency Relief Fund	0
19. Tax balance after credits	2847	41. Kansas Hometown Heroes Fund	0
20. Use Tax Due (Out-of-State and Internet Purchases)	0	42. Kansas Creative Arts Industry Fund	0
21. Total Tax Balance	2847	43. Local School District Contribution Fund. School District Number	0
22. KS income tax withheld from W-2, 1099 or K-19	2969	44. REFUND	122

I authorize the Director of Taxation or the Director's designee to discuss my K-40 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 return.

Taxpayer Signature (Required) _____ Date _____ Preparer Signature SYAM PRIYA RAM SAGAR GUPTA Preparer PTIN, EIN or SSN _____
 Spouse Signature (Required) _____ Date _____ Preparer Phone Number 6789659522 P02082703

IMPORTANT: 1) Form K-40 is a 2 PAGE FORM - BOTH PAGES REQUIRED. WHEN FILING; 2) Make sure your NAME, 1st 4-letters last name, and SSN are printed at the top of page 2 of 2; 3) Refunds are not issued for any unsigned returns. Signature(s) are required; 4) DO NOT USE RED or SHADES of RED INK on tax returns filed with Kansas

Kansas Information Worksheet

2020

Keep for your records

Part I - Personal Information

Taxpayer :

First Name MOUNICA
Middle Initial Suffix
Last Name CHANDA
Social Security No. 001-23-6035

Date of Birth 08/09/1996
Date of Death

Taxpayer Phone (660) 238-5450 * [X]
Home Phone (660) 238-5450 * []

Spouse:

First Name
Middle Initial Suffix
Last Name
Social Security No.

Date of Birth
Date of Death

Spouse Phone * []

* Check one of these boxes to print daytime phone number on the government forms..

Street Address . 2904 SW 31CT Apt No. 205
City TOPEKA State KS ZIP Code 66614
Foreign country

School District and County Code:

A-E F-M N-Z
[] [] Topeka Public Schools
School District Code 501
County SN

Part II - Main Form

[X] Form K-40 : Kansas Individual Income Tax Return for Resident Filers
[] Form K-40 : Kansas Individual Income Tax Return for Part-Year/Non-Resident Filers
Enter Nonresident and Part-Year Resident allocations on Schedule S
Dates of Kansas residence (if part-year resident): from to

Part III - Filing Status

Check only one box:
[X] Single
[] Married filing joint (even if only one had income)
[] Married filing separate
[] Head of household (or qualifying widow with dependent child)

Part IV - Other Information

[] Check if your name or address has changed from last year
[] Check if taxpayer authorizes Director of Taxation or the Director's designee to discuss return and attachments with preparer
[] Check here if you do not want to file Schedule K-210: Underpayment of Estimated Tax
[] Check this box to take the standard deduction even if less than itemized deductions
Yes No
[X] Taxpayer was engaged in commercial farming or fishing in 2020
[X] At least two-thirds of gross income derived from commercial farming or fishing

Part V - Paid Preparer Information

Enter the preparer's assigned code from Preparer's Information Worksheet 01

Self prepared and Non-paid prepared returns to be e-filed must have the following info for the submitter:

Preparer Name
Preparer PTIN Preparer SSN
Street Address Addr cont
City State ZIP Code
Signature Date
Firm Name Firm EIN (if applicable)
Phone Email

Part VI – Electronic Filing Information

New! State e-file disclosure consent:

By using a computer and software to prepare and transmit my client’s return electronically, I consent to the disclosure of all information pertaining to my use of the system and software to create my client’s return and to the electronic transmission of my client’s tax return to the Kansas Department of Revenue, as applicable by the law.

[X] The state return will be filed electronically

Electronic PDF Attachments

PDF’s that you have selected to attach to your state e-file return are listed below.

Table with 2 columns: Description, Filename. Contains 3 empty rows.

Date return was EFiled _____
Date return was accepted by the state _____
Enter the date Form K-40V was given to client. _____

Part VII – Direct Deposit Information or Electronic Funds Withdrawal Information

Yes No
[X] Do you want to elect direct deposit of state tax refund (Electronic Filing Only)?
Do you want electronic funds withdrawal of state tax payment (EF Only)?

Enter the following information if your client requests direct deposit or electronic funds withdrawal:

Name of Financial Institution (optional) US BANK

Check the appropriate box:

Checking [X] Routing number 101200453
Savings [] Account number 152318199451

Enter the payment date to withdraw from the account above _____
State balance-due amount from this return _____

International ACH Transactions

Yes No
[] [X] Will the funds for this refund (or payment) go to (or come from) an account outside the U.S.?

Part VIII - Extension Status

Yes No
[] [X] Has the tax return due date been extended?

Extended due date _____

QuickZoom to Form K-40V: Payment Voucher for Extension Request ► _____

QuickZoom here to Form K-40 ► _____

Tax Payments Worksheet

2020

▶ Keep for your records

Name MOUNICA CHANDA	Social Security Number 001-23-6035
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Tax Payments for the Current Year

		State	
		Date	Payment
1	First Payment		
2	Second Payment		
3	Third Payment		
4	Fourth Payment		
Additional Payments			
5	Payment		
	Payment		
	Payment		
	Payment		
	Payment		
6	Overpayment from previous year applied to current year	6	
7	Amount paid with current year extension	7	
8	Total tax payments	8	

Income Taxes Withheld for the Current Year

9	State withholding on Forms W-2	9	2,969.
10	State withholding on Forms W-2G	10	
11	State withholding on Forms 1099-R	11	
12 a	State withholding on Forms 1099-MISC	12 a	
b	State withholding on Forms 1099-NEC	b	
c	State withholding on Forms 1099-G	c	
d	State withholding on Forms 1099-K	d	
13	Other state tax withholding	13	
14	Total income tax withheld	14	2,969.
15	Date return will be filed and balance paid	15	

STATE REQUIRED INFORMATION

State Required Information

The Kansas Department of Revenue requires the following information be presented to all taxpayers:

Refund Status: Taxpayers expecting refunds that filed electronically can expect a deposit in 10 to 14 business days. Taxpayers expecting a refund that filed using a paper form should allow at least 16 to 20 weeks to receive a refund back by mail. To check your current year tax refund go to our website or call 1-800-894-0318 for automated refund information. You will need your Social Security number(s) and the expected amount of your refund. Any errors, inaccurate forms or information, photocopied forms, or incomplete information will delay the processing of a return and can extend the timeframe for you to expect your refund.

Tax Due Expectations:

Make a direct payment using your banking information allows you to "file now, pay later" by choosing the date you would like your bank account debited. Go to the Kansas Department of Revenue Customer Service Center at <https://www.kdor.ks.gov/Apps/kcsc/login.aspx> to create a login and make an electronic payment. To create a login you will need access to your email and an access code that is assigned by the department or your prior year's tax information. To avoid any penalties or interest you must have the balance due paid in full no later than the April 15th due date. Payments can be made on the due date no later than 11:59pm to be considered timely submitted. If you need the access code or assistance, please call 1-785-368-8222 to send an email to: kdor_tac@ks.gov.

A credit card payment for your Kansas tax can be done online through third-party vendors. Services and fees vary, but all vendors accept major credit cards. Go to <https://ksrevenue.org/faqs-credit.html> for a list of vendors authorized to accept payments for Kansas. To make sure your payment is timely you can create the payment on the due date of April 15th no later than 11:59pm.

If you are unable to pay the full amount due, you should file your Kansas income tax return then pay as much as you can before the filing due date by making smaller payments to Kansas using our Customer Service Center for bank account withdraws at <https://www.kdor.ks.gov/Apps/kcsc/login.aspx> or our credit card payment options at <https://ksrevenue.org/faqs-credit.html>. Penalties and interest will accrue on any unpaid balance due after the due date until fully paid. If you cannot get the tax debit paid by the due date there is an option to set up a payment plan once the debit is considered past due. For the payment plan request information go to <https://ksrevenue.org/payplan.html> or call 1-785-296-6121 for payment plan assistance.

Taxpayer Identity and Security: The state of Kansas is requesting additional information in an effort to combat stolen-identity tax fraud to ensure that your hard-earned tax refund goes to you. Please provide the requested information from your driver's license or state issued identification card. This information has been requested in prior years on electronically filed Kansas returns but is not required to be provided. Your return will not be rejected if you do not have a driver's license or identification card or choose not to enter the information.

Smart Worksheets from your 2020 Kansas Tax Return

SMART WORKSHEET FOR: Form 40: Individual Income Tax and/or Food Sales Tax Refund

Food Sales Tax Credit Smart Worksheet	
<i>To qualify for a tax credit on sales tax paid on food purchases, taxpayer must meet the qualifications for residency, taxpayers status and qualifying income.</i>	
Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
Did you have a dependent who lived with you all year and was under the age of 18 during all of 2020?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>
Were you (or spouse) 55 years of age or older all of 2020 (born prior to January 1, 1965)?	
<input type="checkbox"/>	<input type="checkbox"/>
Were you (or spouse) totally and permanently disabled or blind all of 2020, regardless of age?	
Qualifying income (limited to \$30,615 for 2020):	
A	Federal adjusted gross income _____