

# FORM K-40V INSTRUCTIONS

Type your name, address, Social Security number, and the first four letters of your last name in the spaces provided.

If you are filing a joint return, type your spouse's name, Social Security number, and first four letters of their last name in the spaces provided.

If your name or address information has changed since last year, be sure to mark the "Name or Address Change" box with "XX".

If you are paying for an amended return, mark the appropriate box with "XX".

If you are filing an extension of time to file your return, mark the appropriate box with "XX". Note that an extension of time is an extension to file, NOT an extension to pay.

Make your check or money order payable to "Kansas Income Tax" for the full amount of your tax due. Write the last 4 digits

of your Social Security number on your check or money order, ensure it contains a valid telephone number, and make it payable to "Kansas Income Tax."

If you are making a payment for someone else (i.e., daughter, son, parent), write that person's name, telephone number and the last 4 digits of their Social Security number on the check. DO NOT send cash. If payment is not made on or before **April 15, 2024**, the tax due is subject to penalty and interest.

**Do not attach** the payment voucher or payment to your return or to each other. **Place them loosely** in the envelope with your return. If you have already mailed your return, or you filed electronically and didn't pay electronically, mail your payment and the voucher to:

KANSAS INCOME TAX  
KANSAS DEPARTMENT OF REVENUE  
PO BOX 750260  
TOPEKA KS 66699-0260

**NOTE: If any due date falls on a Saturday, Sunday, or legal holiday, substitute the next regular work day.**

**K-40V**  
Rev. 9-23

**2023 Kansas**  
INDIVIDUAL INCOME  
PAYMENT VOUCHER

REV 11/29/23 PRO

305

K-40V  
1122



SHARATH CHANDRA GUDUMASU  
SRAVYA PAPOLU  
4949 PRINTERS WAY APT 168  
FRISCO TX 75033  
Daytime Phone Number: 9898178700

GUDU

PAPO

705874735

Name or Address  
Change

329551297

- If married filing a joint return, include both names and Social Security numbers  
- Make check or money order payable to: Kansas Income Tax

Amended  
Return

Extension  
Payment

Payment  
Amount \$

35.00

112223GUDU705874735PAP0329551297



|                           |          |            |      |           |
|---------------------------|----------|------------|------|-----------|
| SHARATH CHAN              | GUDUMASU | 9898178700 | GUDU | 705874735 |
| SRAVYA                    | PAPOLU   |            |      |           |
| 4949 PRINTERS WAY APT 168 |          |            | PAPO | 329551297 |
| FRISCO                    | TX 75033 |            |      |           |

Name or address has changed?  Taxpayer or (spouse if filing joint) died during this tax year  Taxpayer was engaged in commercial farming/fishing in 2023

**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)  TX State of Legal Residence

Part-Year Resident (Complete Sch S, Part B) From \_\_\_\_\_ To \_\_\_\_\_

**Exemptions:** 2 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. If claiming the Disabled Veteran Personal Exemption allowance, enter the total here. (See instructions for qualifications)

2 **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 2023. Complete this section to determine your qualifications and credit.

- |   |   |
|---|---|
| <p><b>A.</b> Had a dependent child who lived with you all year and was under the age of 18 all of 2023?</p> <p><b>B.</b> Were you (or spouse) 55 years of age or older all of 2023 (born prior to January 1, 1968)?</p> <p><b>C.</b> Were you (or spouse) totally and permanently disabled or blind all of 2023, regardless of age? If you answered NO to A, B, and C, <b>STOP HERE</b>, you do not qualify for this credit.</p> <p><b>D.</b> If you answered YES to A, B, or C, enter your FAGI from line 1 of this return. <span style="float: right;">0</span><br/>If Line D is more than \$30,615 <b>STOP HERE</b>, you do not qualify for this credit.</p> | <p><b>E.</b> Number of exemptions claimed</p> <p><b>F.</b> Number of dependents that are 18 years of age or older (born on or before January 1, 2006)</p> <p><b>G.</b> Total qualifying exemptions (subtract line F from line E)</p> <p><b>H.</b> Food Sales Tax Credit (multiply line G by \$125). Enter result here and on line 18 of this form. <span style="float: right;">0</span></p> |
|---|---|



SHARATH CHAN GUDUMASU GUDU 705874735

|   |        |   |    |
|---|--------|---|----|
| 1. Federal adjusted gross income                                      | 195431 | 23. Refundable portion of earned income tax credit                  | 0  |
| 2. Modifications  | 0      | 24. Refundable portion of tax credits                               | 0  |
| 3. Kansas adjusted gross income                                       | 195431 | 25. Payments remitted with original return                          | 0  |
| 4. Standard or itemized deductions. (If itemizing, complete KS Sch A) | 8000   | 26. Credit for tax paid on the K-120S                               | 0  |
| 5. Exemption allowance  | 4500   | 27. Overpayment from original return. This figure is a subtraction. | 0  |
| 6. Total deductions   | 12500  | 28. Total refundable credits  | 37 |
| 7. Taxable income   | 182931 | 29. Underpayment  | 35 |
| 8. Tax  | 9512   | 30. Interest  | 0  |
| 9. Nonresident percentage   | 0.7573 | 31. Penalty   | 0  |
| 10. Nonresident tax   | 72     | 32. Estimated tax penalty   | 0  |
| 11. KS tax on lump sum distributions                                  | 0      | 33. AMOUNT YOU OWE  | 35 |
| 12. TOTAL INCOME TAX  | 72     | 34. Overpayment   | 0  |
| 13. Credit for taxes paid to other states                             | 0      | 35. CREDIT FORWARD  | 0  |
| 14. Credit for child and dependent care expenses                      | 0      | 36. Chickadee Checkoff  | 0  |
| 15. Other credits   | 0      | 37. Senior Citizens Meals On Wheels Contribution Program            | 0  |
| 16. Subtotal  | 72     | 38. Breast Cancer Research Fund                                     | 0  |
| 17. Earned Income Credit  | 0      | 39. Military Emergency Relief Fund                                  | 0  |
| 18. Food Sales Tax Credit   | 0      | 40. Kansas Hometown Heroes Fund                                     | 0  |
| 19. Total Tax Balance   | 72     | 41. Kansas Creative Arts Industry Fund                              | 0  |
| 20. KS income tax withheld from W-2, 1099 or K-19                     | 37     | 42. Local School District Contribution Fund. School District Number | 0  |
| 21. Estimated tax paid  | 0      | 43. Kansas Historic Site Contribution Fund. Historic Site Number    | 0  |
| 22. Amount paid with Kansas extension                                 | 0      | 44. REFUND  | 0  |

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 \_\_\_\_\_ Spouse Signature (Required) \_\_\_\_\_ Date \_\_\_\_\_

Preparer Signature (Required) SYAM PRIYA RAM SAGAR GUPT Preparer Phone Number 6789659522 Preparer PTIN, EIN or SSN (Required) P02082703



|              |          |      |           |
|--------------|----------|------|-----------|
| SHARATH CHAN | GUDUMASU | GUDU | 705874735 |
| SRAVYA       | PAPOLU   | PAPO | 329551297 |

**PART A - MODIFICATIONS TO FEDERAL ADJUSTED GROSS INCOME**

**ADDITIONS TO FEDERAL ADJUSTED GROSS INCOME:**

- A1. State and municipal bond interest not specifically exempt from KS 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 contribution (enclose Sch K-70)
- A5. Business interest expense carryforward deduction (I.R.C. § 163(J))
- A6. Unqualified withdrawals from First Time Home Buyer Savings Account
- A7. Other additions to FAGI (enclose list)
- A8. Total additions to FAGI (add lines A1 - A7)

**SUBTRACTIONS FROM FEDERAL ADJUSTED GROSS INCOME:**

- A9. Social Security benefits
- A10. KPERS lump sum distributions exempt from income tax
- A11. Interest on U.S. Government obligations (reduced by related expenses)
- A12. State or local income tax refund (if included in line 1 of Form K-40)
- A13. Retirement benefits specifically exempt from Kansas Income Tax
- A14. Military compensation of a nonresident servicemember (Non-Residents only)
- A15. Contributions to Learning Quest or other states' qualified tuition program
- A16. Armed forces recruitment, sign-up, or retention bonus
- A17. Global Intangible Low-Taxed Income (GILTI) (I.R.C. § 951A)
- A18. Disallowed business interest deduction (I.R.C. § 163(J))
- A19. Disallowed business meal expenses (I.R.C. § 274)
- A20. Contributions to an ABLÉ savings account
- A21. Kansas Expensing Deduction (Enclose K-120EX)
- A22. Qualified Contributions from First Time Home Buyer Savings Account
- A23. Other subtractions from FAGI (enclose list)
- A24. Total subtractions from FAGI (add lines A9 - A23)

**NET MODIFICATIONS:**

A25. Net modifications to FAGI (subtract line A24 from line A8). Enter total here and on line 2, Form K-40.





|              |          |      |           |
|--------------|----------|------|-----------|
| SHARATH CHAN | GUDUMASU | GUDU | 705874735 |
| SRAVYA       | PAPOLU   | PAPO | 329551297 |

**PART B - PART-YEAR RESIDENT/NONRESIDENT ALLOCATION**

| INCOME:   | Total From Federal Return: | Amount From Kansas Sources: |
|---|----------------------------|-----------------------------|
| B1. Wages, salaries, tips, etc  | 191814                     | 1480                        |
| B2. Interest and dividend income  | 3617                       | 0                           |
| B3. Pensions, IRA distributions and annuities   |                            |                             |
| <b>Additional Income:</b><br><b>(Lines B4 - B12)</b>                                      |                            |                             |
| B4. Refunds of state and local income taxes   |                            |                             |
| B5. Alimony received  |                            |                             |
| B6. Business income or loss   |                            |                             |
| B7. Capital gain or loss  |                            |                             |
| B8. Other gains or losses   |                            |                             |
| B9. Rental real estate, royalties, partnerships,<br>S corps, trusts, estates, REMICS, etc | 0                          | 0                           |
| B10. Farm income or loss  |                            |                             |
| B11. Unemployment compensation, taxable<br>social security benefits and other income      |                            |                             |
| B12. Total income from Kansas sources (Add lines B1 - B11)                                |                            | 1480                        |

| ADJUSTMENTS AND MODIFICATIONS TO KANSAS SOURCE INCOME:  | Total From Federal Return: | Amount From Kansas Sources: |
|---|----------------------------|-----------------------------|
| B13. IRA Retirement Deductions  |                            |                             |
| B14. Penalty on early withdrawal of savings   |                            |                             |
| B15. Alimony paid   |                            |                             |
| B16. Moving expenses for members of the armed forces  |                            |                             |
| B17. Other federal adjustments  |                            |                             |
| B18. Total federal adjustments to Kansas source income (Add lines B13 through B17)  |                            |                             |
| B19. Kansas source income after federal adjustments (Subtract line B18 from line B12)   |                            | 1480                        |
| B20. Net modifications from Part A that are applicable to Kansas source income  |                            |                             |
| B21. Modified Kansas source income (Line B19 plus or minus line B20)  |                            | 1480                        |
| B22. Kansas adjusted gross income (From line 3, Form K-40)  |                            | 195431                      |
| 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. |                            | 0.7573                      |