

K-37

(Rev. 7-23)

KANSAS DISABLED ACCESS CREDIT

K-37
Attach
190618



For the taxable year beginning _____, 20____; ending _____, 20____

Name of taxpayer (as shown on return)	Social Security Number or Employer ID Number (EIN)
If partner, shareholder or member, enter name of partnership, S corporation, LLC or LLP	Employer ID Number (EIN)

PART A – GENERAL INFORMATION

- Are alterations in compliance with the Americans with Disabilities Act of 1990? Yes No If no, you do not qualify for this credit.
- Address of property altered _____
Street Address _____ City _____
- Date alterations were completed: _____

PART B – RESIDENCE

- This is a: Personal residence
 Residence of a lineal ancestor or descendant

- Tax year.
- Amount of expenditures incurred this tax year.
- Percentage of expenditures eligible for credit.
- Allowable expenditures (multiply line 6 by line 7).
- Credit limit (amount on line 8 or \$16,050, whichever is less).
- Carry forward from prior year's K-37 (line 18 from prior year).
- Tax liability for current year, after other nonrefundable credits.
- Credit used in this tax period (see instructions).
- Refundable portion of credit (see instructions).
- Allowable credit. If this is your 1st year, enter amount from line 9; otherwise enter amount from line 10 (see instructions).
- Refundable percentage.
- Multiply line 14 by line 15.
- Refund (subtract line 11 from line 16; cannot be less than zero).
- Carry forward (add lines 12 and 17 and subtract that sum from the amount on line 14; cannot be less than zero).

	Qualified Year	Carry Fwd Year	Carry Fwd Year	Carry Fwd Year
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15	25%	33%	50%	100%
16				
17				
18				

PART C – BUSINESS

- Expenditures attributable to removal or equivalent facilitation of an existing architectural barrier. 19a _____
- Have you made all or any portion of an existing facility accessible to individuals with a disability? 19b Yes No
- Expenditures attributable to modification or adaptation of an existing facility in order to employ individuals with a disability. 20a _____
- Have you modified/adapted an existing facility or piece of equipment to employ individuals with a disability? 20b Yes No
- Total costs incurred. 21 _____
- 50% of expenditures. 22 _____

- Tax Year.
- Credit (line 22 or \$10,000, whichever is less).
- Proportionate share percentage.
- Your share of credit.
- Carry forward.
- Total credit available (add lines 26 & 27).
- Tax liability for this year.
- Amount of credit this year (lesser of lines 28 or 29).
- Carry forward (subtract line 30 from line 28).

	Qualified Year	Carry Fwd Year	Carry Fwd Year	Carry Fwd Year	Carry Fwd Year
23					
24					
25					
26					
27					
28					
29					
30					
31					

PART D – MODIFICATIONS TO FEDERAL TAXABLE INCOME

- Depreciation claimed on capitalized expenditures deducted on federal return. 32 _____
- Attributable expenses deducted on federal return. 33 _____
- Total (must be added back in each subsequent year the entity files a Kansas return; see instructions). 34 _____