**Kansas Corporate Tax Credit Qualifying Vendor**

Statues have been modified to include Tax Credit Qualifying Vendor as described below.

Legal Name of Person, Firm or Corporation

**CERTIFIED BUSINESSES [for Tax Credit Qualifying Purchases]**

* *Vendors must meet statutory guidelines to be a* ***CERTIFIED BUSINESS***
* For an application to become a ***CERTIFIED BUSINESS***, visit <https://admin.ks.gov/offices/procurement-and-contracts/>
	+ A Vendor must apply for and receive certification BEFORE they can qualify their sales for a tax credit.
* There are five (5) other conditions now to include:
	+ Condition: Nonprofit Certified Business or Use Law Vendor that meets the additional criteria as a qualifying vendor for offering Kansas corporate tax credits under this statute;
	+ Condition: Business activity conducted primarily in Kansas or substantially all of its production in Kansas
	+ Condition: At least 30% of employees must be individuals with disabilities who reside in Kansas;
	+ Contribute 75% of health insurance premium (or alternative – see statute)
	+ Pays minimum wage or greater
* Condition: Subcontracting within the contract limited to 25% of the total bid cost

**Link for more information:** [**https://admin.ks.gov/offices/procurement-and-contracts/**](https://admin.ks.gov/offices/procurement-and-contracts/bidder-preference-program/)

***HB 2044 (2019 Kansas Legislature) Section 1, subparagraph (d),*** *application to be designated a Corporate Tax Credit Qualifying Vendor*

*Initial Here*

*\_\_\_\_\_* ***Yes, I am submitting this application to be designated a Corporate Tax Credit Qualifying Vendor on behalf of a CERTIFIED BUSINESS as defined in and I request designation as a CERTIFIED BUSINESS.***

*\_\_\_\_\_ \_\_\_\_\_*

*\_\_\_\_\_ Yes, I understand and agree that as a CERTIFIED BUSINESS, I must provide* ***annual*** *reports that show the composition of the workforce remains within the statutory requirements;*

*\_\_\_\_\_ Yes, I understand and agree that as a CERTIFIED BUSINESS, I must provide* ***annual*** *reports that describe the CERTIFIED BUSINESS health insurance program for the workforce and that the program remains within the statutory requirements (HB 2044 (2019 Kansas Legislature****)****;*

*\_\_\_\_\_ Yes, I agree and understand that my status of as a CERTIFIED BUSINESS* ***must be renewed every year****, and that failure to maintain such status may result in the State of Kansas denying the tax credit for purchases made;*

*\_\_\_\_\_ Yes, I agree, that based on current law, once I have received CERTIFIED BUSINESS Status that I will work with those businesses seeking the tax credit to confirm their sales to claim a tax credit based upon purchases of goods and/or services from a* ***Certified Business.***