

BUSINESS LICENSE - DOWNTOWN ARENA FEE

Quarterly Return - Hotel/Motel/Tourist Court

City of Kansas City, Missouri
Revenue Division

Phone
(816) 513-1120

RD-206
(08/12)

Period From:

Period To:

Legal Name:

FEIN/SSN:

Mailing Address:

Account ID:

DBA Name:

SIC Code:

Business Address:

For changes to name, address or FEIN/SSN, please contact us at revenue@kcmo.org or (816) 513-1135.

1. Total number of occupied sleeping rooms in this period

1.																				
	DOLLARS														CENTS					

2. Fee due (multiply line 1 times \$1.50)

2.																				
3.																				
4.																				
5.																				

3. Penalty: 5% per month, maximum penalty is 25%
Interest: 3% per annum until tax is paid (add Penalty & Interest together)

4. Total amount due (sum of lines 2 and 3)

5. Amount paid

6. "X" Box if amended return

6.

7. Date if closed

7.

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D	D
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Y	Y
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Make check payable to CITY TREASURER/REVENUE DO NOT SEND CASH Mail to: PO Box 801206 Kansas City, MO 64180-1206

Under penalties of perjury, I declare this return to be a true, correct, and complete accounting for the taxable year stated.

I authorize the Commissioner of Revenue or delegate to discuss my return and attachments with my preparer. Yes No

Taxpayer Signature	Print Name	Title	Date	Phone
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Preparer's Signature (if other than taxpayer)	Print Name	Title	Date	Phone
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**Instructions for Preparing and Filing Quarterly Business License Return
Hotel / Motel/ Tourist Court (Form RD-206)**

Phone - 816-513-1135
RD-206(A) Rev (08/12)

- 1 For changes to name, address or FEIN/SSN complete form RD-100. For questions contact us at revenue@kcmo.org or call (816) 513-1135.
- 2 **Completion of Form.** Enter the following information: Tax filing periods, legal name and mailing address, business name and business location address, FEIN/SSN, and account ID.
- 3 **Taxable Definition.** Amount of fee. Every person engaged in the business of renting, leasing, or letting living quarters, sleeping accommodations, rooms, or a part thereof, in connection with any hotel, motel or tourist court shall pay to the city a license fee of \$1.50 per occupied room by transient guest per day on all hotels, motels and tourist court.
- 4 **Penalty.** There are two penalties:
 1. Penalty of 5% for failure to pay the amount due.
 2. Penalty of 5% per month for failure file a return timely (maximum penalty 25%).
- 5 **Quarterly Filing Schedule**

January through March	Due April 20
April through June	Due July 20
July through September	Due October 20
October through December	Due January 20
- 6 To correct a previously remitted form, it is necessary to submit and "amended" form. "X" line 6 on RD-206 to indicate that it is an amended return.
- 7 Where to file: Returns are to be filled with the Finance Department, Revenue Division, 414 E. 12th Street, Kansas City, Missouri 64106-2786. Mail completed returns to P. O. Box 801206, Kansas City, MO 64106-0623

Instructions for Completing RD-206

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|--------|---|
| Line 1 | Enter number of occupied sleeping rooms per day |
| Line 2 | Enter amount due (Multiply line 1 times \$1.50) |
| Line 3 | If return is delinquent, enter amount of penalty and interest due. |
| Line 4 | Enter total amount due (Sum of lines 2 and 3) |
| Line 5 | Enter amount paid |
| Line 6 | Enter "X" is this amends a previoulsy submitted return for the same period. |
| Line 7 | Enter date business closed or no longer conducting business in Kansas City, Missouri. |