

# FORM RD-206 2021

City of Kansas City, Missouri - Revenue Division  
**BUSINESS LICENSE - DOWNTOWN ARENA FEE**  
**Quarterly Return - Hotel / Motel / Tourist Court**



KANSAS CITY  
MISSOURI

Phone: (816) 513-1120  
 E-file: kcmo.gov/quicktax

Legal Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 DBA Name: \_\_\_\_\_  
 FEIN or SSN: \_\_\_\_\_ Business Address: \_\_\_\_\_  
 Account ID: \_\_\_\_\_

Period From: \_\_\_\_\_ Period To: \_\_\_\_\_

1. Total number of occupied sleeping rooms in this period	1
2. Fee due (Line 1 times \$1.50)	2
3a. Penalty: "Failure to file return timely" (5% per month of the outstanding license fee due) (Maximum penalty 25%)	3a
3b. Penalty: "Failure to pay amount due" (5% of fee due)	3b
4. Interest (3% per annum until fee is paid)	4
5. Previous credits or prior payments	5
6. Total Amount Due (Sum of Lines 2, 3a, 3b and 4 minus Line 5)	6
7. Amount Paid	7
8. "X" if amended return	8
9. If no longer conducting business in Kansas City, MO enter date closed <b>DO NOT COMPLETE IF BUSINESS IS STILL OPERATING</b>	9

<input type="text"/>	DOLLARS	CENTS
\$	_____	_____
\$	_____	_____
\$	_____	_____
\$	_____	_____
\$	_____	_____
\$	_____	_____
\$	_____	_____
<input type="text"/>		
	MM	DD / YY

**DO NOT SEND CASH. Make check payable to: KCMO City Treasurer**  
**Mail to: City of Kansas City, Missouri, Revenue Division, 414 E 12th St., 2nd Floor - East, Kansas City, MO 64106-2786**

For changes to name, address or FEIN/SSN, please contact us at revenue@kcmo.org or (816) 513-1120.  
 I authorize the Commissioner of Revenue or delegate to discuss my return and attachments with my preparer.  
 Under penalties of perjury, I declare this return to be true, correct, and complete accounting for the taxable year stated.

Yes  No

Print Name of Taxpayer \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_

Preparer Name (if other than taxpayer) \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_

**FORM RD-206**  
2021

City of Kansas City, Missouri - Revenue Division  
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**GENERAL INSTRUCTIONS FOR COMPLETING FORM RD-206**

- For changes to name, address or FEIN/SSN complete Form RD-100. For questions contact the Revenue Division at [revenue@kcmo.org](mailto:revenue@kcmo.org) or (816) 513-1120.
- Taxable Definition.**  
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 courts.
- Penalty.** There are two penalties:
  - Penalty of 5% per month for failure to file a return timely (maximum penalty 25%)
  - Penalty of 5% for failure to pay the amount due
- Interest:** Any remaining unpaid tax after the due date is delinquent and shall be assessed interest. Statutory interest rate based on RSMo Section 32.065.
- Quarterly Filing Schedule**

January through March.....	Due April 30th
April through June.....	Due July 31st
July through September.....	Due October 31st
October through December.....	Due January 31st
- Place "X" on Line 8 of Form RD-206 if submitting an **amended return**.
- Where to file:** Mail completed return and payment to: City of Kansas City, Missouri, Revenue Division, 414 E 12th St., 2nd Floor - East, Kansas City, MO 64106-2786

**INSTRUCTIONS FOR COMPLETING FORM RD-206**

- Line 1.** Enter number of occupied sleeping rooms per day in the period.
- Line 2.** Enter amount due (Line 1 times \$1.50).
- Line 3a.** For failure to file return timely enter penalty of 5% of Line 2 per month (maximum penalty 25%).
- Line 3b.** For failure to pay amount due enter amount of penalty due (Line 2 times 5%).
- Line 4.** Enter interest due. Statutory interest rate based on RSMo Section 32.065.
- Line 5.** Enter amount of previous credit or prior payment(s).
- Line 6.** Enter total amount due (Sum of Lines 2, 3a, 3b, 4 minus Line 5).
- Line 7.** Enter amount paid.
- Line 8.** Enter "X" if this amends a previously submitted return for the same period.
- Line 9.** Enter date business closed or no longer conducting business in Kansas City, Missouri, if applicable.