

# FORM RD-107 2022

## City of Kansas City, Missouri - Revenue Division CONVENTION & TOURISM TAX FOOD ESTABLISHMENT



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

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

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

		DOLLARS	CENTS
1. Food Sales (excluding liquor)	1	\$	.
2. Liquor Sales	2	\$	.
3. Total Gross Receipts (Line 1 plus Line 2)	3	\$	.
4a. Increase in gross receipts - Other	4a	\$	.
4b. Increase in gross receipts - Other	4b	\$	.
4c. Total increase (Sum of Line 4a and 4b)	4c	\$	.
4d. Decrease in gross receipts - Tax Exempt Organizations	4d	\$	.
4e. Decrease in gross receipts - Other	4e	\$	.
4f. Total decrease (Sum of Line 4d and 4e)	4f	\$	.
5. Taxable Sales (Sum of Line 3 and 4c minus Line 4f)	5	\$	.
6. Tax Due (Line 5 times 2%)	6	\$	.
7. 2% Timely (Line 6 times 2%, only if paid before due date)	7	\$	.
8. Total Tax Due (Line 6 minus Line 7)	8	\$	.
9a. Penalty: "Failure to file return timely" (5% per month of the outstanding tax due) (maximum penalty 25%)	9a	\$	.
9b. Penalty: "Failure to pay amount due" (5% of tax due)	9b	\$	.
10. Interest (3% per annum until tax is paid)	10	\$	.
11. Previous credit or prior payment	11	\$	.
12. Total Amount Due (Sum of Lines 8, 9a, 9b, 10 minus Line 11)	12	\$	.
13. Amount Paid	13	\$	.
14. "X" Box if Amended return	14	<input type="checkbox"/>	
15. If no longer conducting business in Kansas City, MO enter date closed <b>DO NOT COMPLETE IF BUSINESS IS STILL OPERATING</b>	15		

MM / DD / YY

**DO NOT SEND CASH. Make check payable to: KCMO City Treasurer**

**Mail to: City of Kansas City, Missouri, Revenue Division, PO Box 804107 Kansas City, MO 64180-4107**

For changes to name, address or FEIN/SSN, please contact us at [revenue@kcmo.org](mailto: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-107**  
2022

City of Kansas City, Missouri - Revenue Division  
**CONVENTION & TOURISM TAX**  
**FOOD ESTABLISHMENT**



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

**INSTRUCTIONS FOR COMPLETING FORM RD-107**

- Line 1.** Enter total gross receipts - Food Sales.  
**Line 2.** Enter total gross receipts - Liquor Sales.  
**Line 3.** Enter gross receipts (Line 1 plus Line 2).  
**Line 4a.** Enter amount increasing gross receipts and description.  
**Line 4b.** Enter amount increasing gross receipts and description.  
**Line 4c.** Enter the sum of Lines 4a and 4b.  
**Line 4d.** Enter decrease to gross receipts from tax exempt organizations.  
**Exempt Organizations** - Agencies of government, qualifying organizations, and qualifying persons under RSMo 144.010 through 144.510 are applicable as long as exemption certificates required by RSMo 144.010 are maintained on file.  
**Line 4e.** Enter amount decreasing gross receipts and description.  
**Line 4f.** Enter the sum of Lines 4d and 4e.  
**Line 5.** Enter taxable sales (Sum of Lines 3 and 4c minus Line 4f).  
**Line 6.** Enter tax due (Line 5 times 2%).  
**Line 7.** If return is filed and paid prior to due date, enter discount amount (Line 6 times 2%).  
Return Due Date: **Form RD-107 is due on or before the last day of the next month.**  
**Line 8.** Enter total tax due (Line 6 minus Line 7).  
**Line 9a.** For failure to file return timely enter penalty of 5% of Line 6 per month (maximum penalty 25%).  
**Line 9b.** For failure to pay amount due enter amount of penalty due (Line 6 times 5%).  
**Line 10.** If return is delinquent, enter amount of interest due. Statutory prime interest rate based on RSMo Section 32.065.  
**Line 11.** Enter amount of credit or prior payment(s).  
**Line 12.** Enter amount due (Sum of Lines 8, 9a, 9b and 10 minus Line 11).  
**Line 13.** Enter amount paid.  
**Line 14.** Enter "X" if this amends a previously submitted return for the same period.  
**Line 15.** If this is a final return under this ownership, enter date business closed and/or no longer conducting business in Kansas City, Missouri.

**MAKE CHECK PAYABLE TO: KCMO City Treasurer**  
**MAIL TO: City of Kansas City, Missouri, Revenue Division, PO Box 804107 Kansas City, MO 64180-4107**

**(Retain copies for liquor license renewal, if applicable)**

Visit our website at [kcmo.gov/tax](http://kcmo.gov/tax) for more forms, instructions and the Convention and Tourism Regulations.