

BUSINESS LICENSE - DOWNTOWN ARENA FEE

Quarterly Return - Hotel/Motel/Tourist Court

City of Kansas City, Missouri
Revenue Division

Phone
(816) 513-1135

**RD-206
(11/07)**

Period From:

Period To:

Legal Name:

EIN:

Mailing Address:

Account ID:

DBA Name:

SIC Code:

Business Address:

Please call (816) 513-1135 if there is a change to name, address or FEIN/SSN

Please print numbers carefully as shown and avoid contact with the edges of the box. Do not use dollar signs.

0	1	2	3	4	5	6	7	8	9
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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: 10% of line 2, if paid after due date, plus 2% per month for subsequent months (maximum penalty is 30%)

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

5. Amount paid

6. "X" box 6 if amended return

6.

7. Date if closed

7.

M	M	/	D	D	/	Y	Y

Make check payable to CITY TREASURER DO NOT SEND CASH Mail to PO Box 15623 Kansas City, MO 64106-0623

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

Preparer's Signature (if other than taxpayer)

Print Name

Title

Date

Phone



**Instructions for Preparing and Filing Business License Return-Downtown Arena Fee
Hotel / Motel/ Tourist Court (Form RD-206)**

RD-206A Rev (11/07)

Phone (816) 513-1135

- 1 **Prepared forms.** Please call if there is a change in name, address, FEIN or sales tax number.
- 2 **Blank forms.** Enter the following information: Business and legal name, business location, mailing address, tax period or FEIN/ SSN
- 3 **Taxable Definition.** Amount of tax. 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 tax of \$1.50 per occupied room by transient guest per day on all hotels, motels and tourist court.
- 4 **Penalty.** 10 % of tax due will be assessed on the date of delinquency plus 2% per month thereafter up to a maximum of 30%
- 5 **Quarterly Filing Schedule**

January through March	Due April 20th
April through June	Due July 20th
July through September	Due September 20th
October through December	Due January 20th
- 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 Revenue Division, 414 E. 12th Street, Kansas City, Missouri 64106-2786. Mail completed returns to P. O. Box 15623, Kansas City, MO 64106-0623

Instructions for Completing RD 206

- | | |
|--------|-----------------------------------------------------------------------------|
| Line 1 | Enter number of occupied sleeping rooms in this period during the quarter. |
| Line 2 | Enter taxable amount due (Multiply line 1 times \$1.50) |
| Line 3 | If return is delinquent, enter amount of penalty 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 previously submitted return for the same period. |
| Line 7 | Enter date business closed. |