

KANSAS DEPARTMENT OF REVENUE
RAFFLE RETURN AND RECONCILIATION
(Due by July 25th)

IMPORTANT: Save time and paper by filing electronically. See the electronic file and pay options available by visiting our website at https://www.kdor.ks.gov/Apps/kcsc.

Organization's Name
Organization's Mailing Address
Organization's License Number Reporting Year (yyyy)

Check One:

- Original Return and Reconciliation
Amended Return and Reconciliation

Check here if this is a new mailing address.

- 1. Total gross receipts for all raffle ticket sales for the reporting period...\$
2. License fee based on the fiscal year gross receipts...\$
3. Raffle license fee remitted with the application ...\$
4. Credit Amount (See instructions)...\$
5. Balance Due (See instructions)...\$

If there is a credit amount on line 4, check one of the following:

- Apply credit to the next fiscal year license fee. Refund the amount.

Names and address for all winners of prizes valued at \$1,199 or more:

Name:

Mailing Address: Street City State Zip

Name:

Mailing Address: Street City State Zip

Name:

Mailing Address: Street City State Zip

Name:

Mailing Address: Street City State Zip

Name:

Mailing Address: Street City State Zip

I certify this is a true, correct and complete return.

Signature Title Date

Printed Name Daytime Phone

INSTRUCTIONS

Report Type: Select the type of report you are filing: Original or Amended.

Organization Information: Enter the organization's name, mailing address, license number and reporting year.

Line 1. Enter the organization's total gross receipts for all raffle ticket sales during the fiscal year in which you are reporting.

Line 2. Enter the appropriate license fee amount based on the fiscal year gross receipts below:

<u>Fiscal Year Gross Receipts Amount</u>	<u>License Fee Amount</u>
\$0 to \$25,000	\$0
More than \$25,000 but do not exceed \$50,000	\$25.00
Exceeds \$50,000 but do not exceed \$75,000	\$50.00
Exceeds \$75,000 but do not exceed \$100,000	\$75.00
Exceeds \$100,000	\$100.00

Line 3. Enter the license fee that was remitted with the application.

Line 4 If Line 3 is greater than Line 2, enter the difference on Line 4 as this will be a credit

Line 5. If Line 2 is greater than Line 3, enter the amount on Line 5. Remit the balance due to the address below or file and pay online.

- If there is a credit amount on line 4, check one of the options "Apply credit to the next fiscal year license fee." or "Refund the amount."
- Enter the names and addresses for all winners of prizes valued at \$1,199 or more. If more space is needed, enter all necessary information on a separate sheet and attach it to this application.

GENERAL INFORMATION

- File and pay electronically by going to: <https://www.kdor.ks.gov/Apps/kcsc>.
- This form can be faxed to 785-296-4993 or emailed to kdor_bingo@ks.gov.
- If you have questions call 785-368-8222.
- For additional information, visit our website at: <https://www.ksrevenue.gov/bustaxtypesbingo.html>.
- When sending a check or money order, write your license number on your check or money order and make payable to Charitable Gaming. Send your return and payment to:

Kansas Department of Revenue
Charitable Gaming
120 SE 10th Ave
PO Box 750680
Topeka KS 66625-0680