



KANSAS Liquor Enforcement Tax Return

Form LE-3 (Rev. 2-22)

Need to make a quick payment?

It's simple — pay your liquor drink tax electronically. Visit ksrevenue.gov and log in to the *Kansas Customer Service Center*.

GENERAL INFORMATION

- The due date is the 25th day of the month following the ending date of this return.
- You must file a return even if there were no taxable sales.
- Keep a copy of your return for your records.
- Be sure the tax return has been signed and provide a **daytime phone number** on the front of the return below.
- Write your tax account number on your check or money order and make payable to Kansas Liquor Enforcement Tax. Mail your return and payment to: KDOR-Miscellaneous Tax, PO Box 3506, Topeka, KS 66625-3506.
- For assistance contact our office at the address shown to the right or call 785-368-8222.

LINE - BY - LINE INSTRUCTIONS

Line 1 – Gross Receipts from all retail sales. Enter the total gross receipts from all retail sales, including alcoholic liquor.

Line 2 – Gross Receipts from the sales of alcoholic liquor.

Enter the total gross receipts from the sale of alcoholic liquor.

Line 3 – Tax Due This Month. Amount of tax due for this month (8 % of line 2).

Line 4 – Credit Memo. If you received a credit memo from the Kansas Department of Revenue, enter the amount from that memo on line 4. If filing an amended return, enter total amount previously paid for this filing period.

Line 5 – Amount Tax Due. Amount of tax due (line 3 minus line 4.)

Line 6 – Penalty. If filing a late return, enter the amount of penalty due. See our website for current penalty rates.

Line 7 – Interest. If filing a late return, enter the amount of interest due. See our website for current interest rates.

Line 8 – Total Due. Add lines 5, 6, and 7 and enter result.

TAXPAYER ASSISTANCE

If you have questions or need assistance completing this form, contact our office.

Taxpayer Assistance Center
PO Box 3506
120 E 10th Avenue
Topeka, KS 66625-3506
Phone: 785-368-8222
ksrevenue.gov

..... Detach and send with payment

LE-3 Liquor Enforcement Tax Return

(6-19)

FOR OFFICE USE ONLY

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| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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|--|----------------------|-------------------|-------------------------------|--|--|
| Tax Account Number 022- _____ F _____ | | EIN _____ | | | |
| Beginning Date _____ | Ending Date _____ | Due Date _____ | Jurisdiction Code _____ | | |
| Business Name _____ | | | | | |
| Mailing Address _____ | | | | | |
| City _____ | | State _____ | Zip Code _____ | | |
| Signature _____ | | | Contact Phone Number _____ | | |

- Gross receipts from all retail sales
- Gross receipts from the sale of alcoholic liquor
- Amount of tax due for this month (8% of line 2)
- Credit Memo
- Amount of tax due (line 3 minus line 4)
- Penalty
- Interest
- Total amount due (add lines 5, 6, & 7)

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Date Business Closed

Amended Return

Additional Return

Name or Address Change

Payment Amount \$

494419

LE-3
4944

