

KANSAS 2023 Privilege Estimated Tax

WHAT ARE ESTIMATED TAX PAYMENTS

National banking associations, banks, trust companies, and savings and loan associations are required to pay an estimated tax if their tax liability for the Privilege tax year can reasonably be expected to exceed \$500. A Privilege taxpayer is not required to file estimated tax payments in its first year of existence in Kansas.

WHEN TO FILE YOUR ESTIMATED TAX VOUCHERS

Privilege estimated tax vouchers are due on or before the 15th day of the fourth, sixth, ninth, and twelfth months of the federal taxable year without any regard to an extension of time to file for the prior year's Privilege Tax return.

SHORT TAXABLE YEARS: Any estimated tax, payable in installments, not paid before the 15th day of the last month of a short taxable year (less than 12 months) must be paid on the 15th day of the last month of the short taxable year. If the short taxable year is less than three and one-half months, an estimated voucher and tax payment are not required.

When the due date falls on a Saturday, Sunday, or legal holiday, substitute the next regular workday.

ESTIMATED TAX PENALTY

If you do not pay enough estimated tax, a penalty may be charged unless you meet one of the exceptions. Use Schedule K-230 to figure any underpayment of estimated tax, to determine if you meet an exception to the penalty, and to figure any penalty due. The penalty is based on the unpaid balance of estimated tax from the due date of the installment to: 1) the date the installment was paid, or 2) the original due date of the return, whichever is earlier.

"Underpayment of tax" means the difference between the amount of tax actually paid and the amount of tax which would have been required to be paid to avoid penalty.

Schedule K-230 is available from the department's website at: ksrevenue.gov

HOW TO FILE YOUR ESTIMATED TAX

To ensure the most efficient processing of your payments, it is important that you **use only black ink** to complete the vouchers.

- 1) Complete the enclosed worksheet to calculate your estimated tax for tax year 2024.
- 2) Be sure to **use the correct voucher** for the quarter in which you are remitting payment. **Enter all required information**, including the amount of your payment.
- 3) Write your federal Employer Identification Number (EIN) on your check or money order and make payable to: Kansas Privilege Estimated Tax.
- 4) Send the voucher and payment to: KDOR - Privilege Estimated Tax, PO Box 3506, Topeka, KS 66625-3506.

If you need assistance completing your vouchers, contact the Kansas Department of Revenue at 785-368-8222.

AMENDED PAYMENTS

If you missed a payment or if you made a mistake which caused an underpayment in earlier installments, make an immediate payment to balance your account. The amendment of a voucher will not prevent imposition of a penalty on the previous installments.

Need to make a quick payment?

It's simple — pay your estimated tax electronically. Visit

ksrevenue.gov

and log in to the

Kansas Customer Service Center.

ESTIMATED TAX WORKSHEET

1. Estimated tax liability for tax year 2024 (federal year 2023)
2. Estimated tax credits
3. Kansas estimated privilege tax (subtract line 2 from line 1). If line 3 is less than \$500, no estimated tax payments are required
4. Computation of installment. If the original voucher is due to be filed on the 15th day of the 4th month, enter 25% of line 3 here and on each subsequent voucher. (Installments must be made by the due dates to avoid penalties. You should take into consideration any prior year overpayment credited forward.)

1	
2	
3	
4	

If the original voucher is due to be filed on the:

- 15th day of the 6th month enter 1/3 of line 3 on line 4 and on subsequent vouchers
- 15th day of the 9th month enter 1/2 of line 3 on line 4 and on subsequent vouchers
- 15th day of the 12th month enter the total amount of line 3 on line 4

RECORD OF ESTIMATED TAX PAYMENTS

Installment	Date Filed	Amount Paid (As shown on front of voucher)
15th day of 4th month		
15th day of 6th month		
15th day of 9th month		
15th day of 12th month		
Prior year carry forward		
Claim this amount on your 2024 Privilege Tax return (K-130)		

NOTE: If *any due* date falls on a Saturday, Sunday, or legal holiday, *substitute* the next regular workday.

DO NOT SEND A PHOTOCOPY OF THIS VOUCHER
(only the original form downloaded)

or risk the chance of our automated system not capturing your data correctly.

SEND THE ORIGINAL

K-130ES

Rev. 7-22

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2024 Kansas

PRIVILEGE ESTIMATED
TAX VOUCHER



Voucher is due by the 15th day of the 4th month of the taxable year

01012023

12312023

551234560

CORPORATIONNAMEXXXXXXXXXXXXXXXXXXXX
CORPORATIONADDRESSXXXXXXXXXXXXXXXXXX
CORPORATIONADDRESS2XXXXXXXXXXXXXXXXXX
CITYXXXXXXXXXXXXXXXXXX ST 66429-1712
Daytime Phone Number: 7855551212
CONTACTPERSONNAMEXXXXXXXXXXXXXXXXXXXX

Name or Address
Change

XX

1

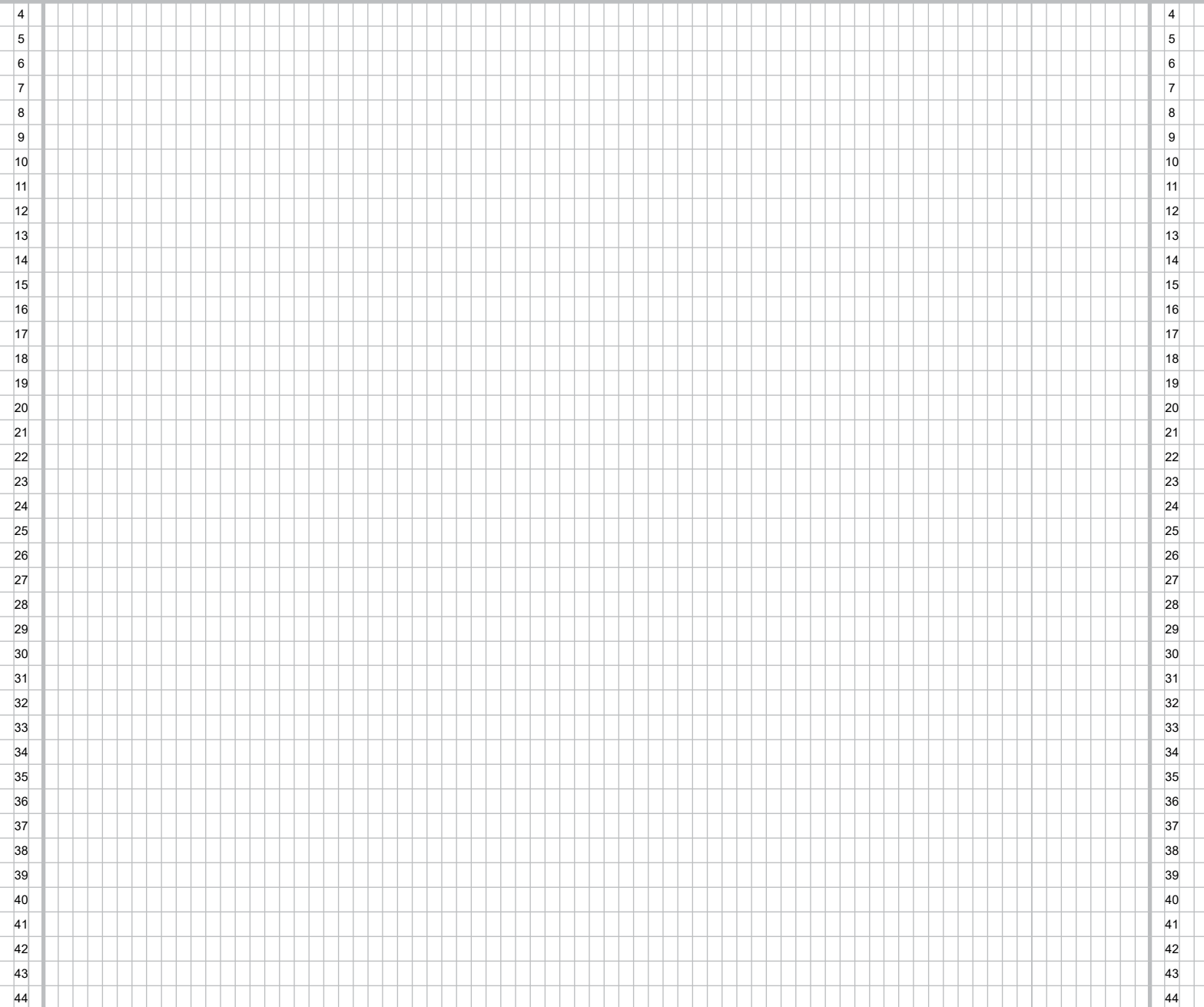
Payment Amount

\$

2567189.00



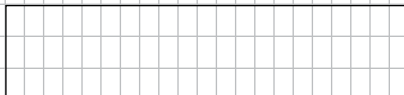
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K-130ES

Rev. 7-22

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2024 Kansas

PRIVILEGE ESTIMATED
TAX VOUCHER

Voucher is due by the 15th day of the 4th month of the taxable year

01012023

12312023

551234560

CORPORATIONNAMEXXXXXXXXXXXXXXXXXXXX

CORPORATIONADDRESSXXXXXXXXXXXXXXXXXXXX

CORPORATIONADDRESS2XXXXXXXXXXXXXXXXXXXX

CITYXXXXXXXXXXXXXXXXXXXX ST 66429-1712

Daytime Phone Number: 7855551212

CONTACTPERSONNAMEXXXXXXXXXXXXXXXXXXXX

Name or Address
Change

XX

1

Payment Amount

\$

2567189.00

186523551234560551234560010123123123



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2024 Kansas

PRIVILEGE ESTIMATED
TAX VOUCHER



Voucher is due by the 15th day of the 6th month of the taxable year

01012023

12312023

551234560

CORPORATIONNAMEXXXXXXXXXXXXXXXXXXXXX
CORPORATIONADDRESSXXXXXXXXXXXXXXXXXXXXX
CORPORATIONADDRESS2XXXXXXXXXXXXXXXXXXXXX
CITYXXXXXXXXXXXXXXXXXXXXX ST 66429-1712
Daytime Phone Number: 7855551212
CONTACTPERSONNAMEXXXXXXXXXXXXXXXXXXXXX

Name or Address
Change

XX

2

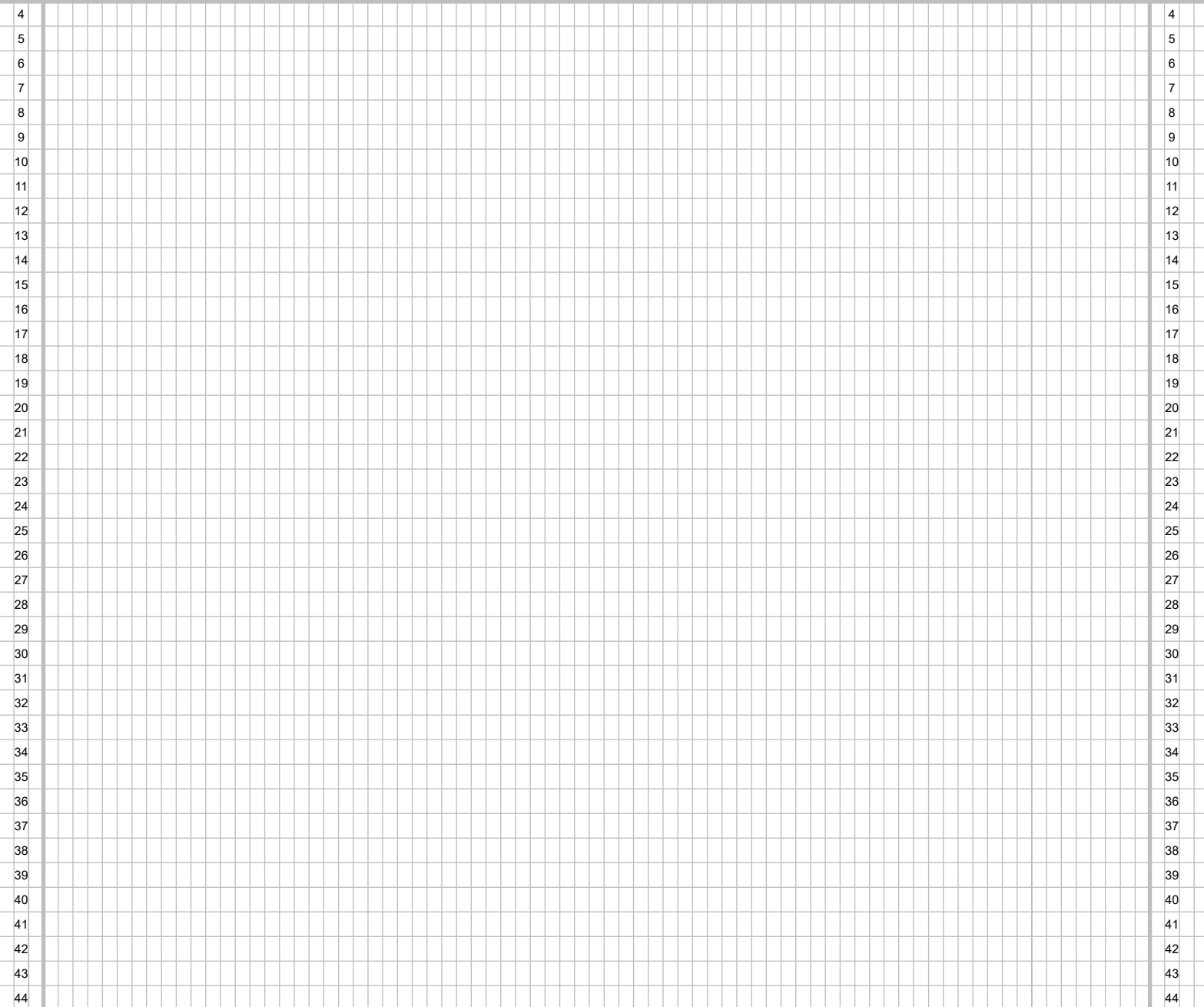
Payment Amount

\$

2567189.00



186523551234560551234560010123123123



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2024 Kansas
PRIVILEGE ESTIMATED
TAX VOUCHER

Voucher is due by the 15th day of the 6th month of the taxable year

01012023

12312023

551234560

CORPORATIONNAMEXXXXXXXXXXXXXXXXXXXXX
CORPORATIONADDRESSXXXXXXXXXXXXXXXXXXXXX
CORPORATIONADDRESS2XXXXXXXXXXXXXXXXXXXXX
CITYXXXXXXXXXXXXXXXXXXXXX ST 66429-1712
Daytime Phone Number: 7855551212
CONTACTPERSONNAMEXXXXXXXXXXXXXXXXXXXXX

Name or Address
Change

XX

2

Payment Amount

\$

2567189.00

186523551234560551234560010123123123



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2024 Kansas

PRIVILEGE ESTIMATED
TAX VOUCHER



Voucher is due by the 15th day of the 9th month of the taxable year

01012023

12312023

551234560

CORPORATIONNAMEXXXXXXXXXXXXXXXXXXXX

CORPORATIONADDRESSXXXXXXXXXXXXXXXXXXXX

CORPORATIONADDRESS2XXXXXXXXXXXXXXXXXXXX

CITYXXXXXXXXXXXXXXXXXXXX ST 66429-1712

Daytime Phone Number: 7855551212

CONTACTPERSONNAMEXXXXXXXXXXXXXXXXXXXX

Name or Address
Change

XX

3

Payment Amount

\$

2567189.00



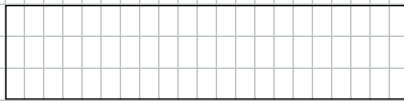
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Rev. 7-22

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2024 Kansas

PRIVILEGE ESTIMATED
TAX VOUCHER

Voucher is due by the 15th day of the 9th month of the taxable year

01012023

12312023

551234560

CORPORATIONNAMEXXXXXXXXXXXXXXXXXXXX

CORPORATIONADDRESSXXXXXXXXXXXXXXXXXXXX

CORPORATIONADDRESS2XXXXXXXXXXXXXXXXXXXX

CITYXXXXXXXXXXXXXXXXXXXX ST 66429-1712

Daytime Phone Number: 7855551212

CONTACTPERSONNAMEXXXXXXXXXXXXXXXXXXXX

Name or Address
Change

XX

3

Payment Amount

\$

2567189.00

186523551234560551234560010123123123



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NOTE: If **any due** date falls on a Saturday, Sunday, or legal holiday, **substitute** the next regular workday.

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2024 Kansas

PRIVILEGE ESTIMATED
TAX VOUCHER



Voucher is due by the 15th day of the 12th month of the taxable year

01012023

12312023

551234560

CORPORATIONNAMEXXXXXXXXXXXXXXXXXXXXX
CORPORATIONADDRESSXXXXXXXXXXXXXXXXXXXXX
CORPORATIONADDRESS2XXXXXXXXXXXXXXXXXXXXX
CITYXXXXXXXXXXXXXXXXXXXXX ST 66429-1712
Daytime Phone Number: 7855551212
CONTACTPERSONNAMEXXXXXXXXXXXXXXXXXXXXX

Name or Address
Change

XX

4

Payment Amount

\$

2567189.00



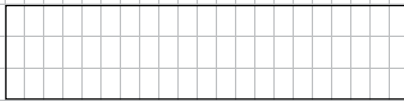
186523551234560551234560010123123123



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Rev. 7-22

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2024 Kansas

PRIVILEGE ESTIMATED
TAX VOUCHER

Voucher is due by the 15th day of the 12th month of the taxable year

01012023

12312023

551234560

CORPORATIONNAMEXXXXXXXXXXXXXXXXXXXX

CORPORATIONADDRESSXXXXXXXXXXXXXXXXXXXX

CORPORATIONADDRESS2XXXXXXXXXXXXXXXXXXXX

CITYXXXXXXXXXXXXXXXXXXXX ST 66429-1712

Daytime Phone Number: 7855551212

CONTACTPERSONNAMEXXXXXXXXXXXXXXXXXXXX

Name or Address
Change

XX

4

Payment Amount

\$

2567189.00

186523551234560551234560010123123123



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