KANSAS DEPARTMENT OF REVENUE
DIVISION OF TAXATION

RETAILERS' SALES TAX
EVENT REGISTRATION CERTIFICATE

Junction City Main Street Market 2023

Event Tax Rate	9.7500%
Event Food Tax Rate	7.2500%

Event Certificate Only.
Not valid for tax-exempt purchases.

Registration Certificate valid for this Event only.
Tax Account Number is assigned to the Event.
Sales Tax Return must be filed within 30 days of Event.

State of Kansas
www.ksrevenue.gov
ST-51 (Rev.11-22)

…… **FOLD HERE AND DISPLAY CERTIFICATE AT EVENT** ……

Instructions for displaying Event Registration Certificate:
This Event Certificate is intended for vendors selling at Special Events in Kansas four or fewer times each year who are not registered with a Kansas tax account number starting with 004 or 005. Contact KDOR staff at KDOR_special.events@ks.gov with any questions.

- Display the Event Registration Certificate in a visible place at your location during the event.
- You must collect and remit sales tax at the rate shown on the event tax return.
- This return and tax account number are specific to the event that appears on the Event Certificate.
- You must file a return even if there were no taxable sales.
- Sales tax is due within 30 days of the event.
- The name and event tax account number appears at the top of the return form.
- Write the event tax account number on your check or money order.
- Make a copy of the return for your records.
- Visit www.ksrevenue.gov for more information about Special Events, tax bracket cards, and forms.
- Most vendors in Kansas are required to collect and remit sales tax, including not-for-profit groups.
- If you sell goods or taxable services in Kansas more than four times per year and do not have a Kansas tax account number, contact us at the email above.

If you have received this packet and are registered with a Kansas tax account number starting with 004 or 005, check the appropriate box on the second page and write in your Kansas sales tax number. Return the page in the envelope provided. Report your sales from this event on your next regular tax return.

Event Name: Junction City Main Street Market 2023 **Begin Date:** 05/06/2023
Jurisdiction Code Sales: JUNGE **| Code Food:** GEJUN **End Date:** 09/30/2023
Event Tax Account Number: SENK00408849F01 **Due Date:** 10/30/2023

Dear Vendor,
You are reported as a vendor for the above event. Below are instructions for reporting and paying Kansas Tax.

☐ Check this box **if you are registered with a tax account number starting with 004 or 005.**
Do not enter your event sales on this form. You must report event sales on your next tax return using your registered account. Enter your Kansas tax account number below and return this letter in the envelope provided.

Kansas Tax Account Number:_____ Phone: _____

Name: _____ Email: _____

☐ Check this box **if you do not have a tax account number starting with 004 or 005**.
Complete the Event Tax Return and payment information below. Make separate remittance for each tax rate where it applies. A tax on Food sales column has been added, complete this section only if you are reporting retailers' sales on food and food ingredients and/or prepared food items that are subject to the reduced state sales tax rate.

Event Tax Return (Complete only if you **do not** have a tax account number starting with 004 or 005.)

		Total Sales	Tax Rate	Total Sales Tax Collected
Line 1	Gross Sales amount of Food and Food Ingredients (Minus amount paid via government voucher)	**$**	0.072500	**$**
Line 2	Gross Sales amount of Non-Food items	**$**	0.097500	**$**
Line 3	Multiply Gross sales by applicable tax rate and add line 1 & 2			**$**

I certify this tax return is correct.

Printed Name:_____ Signature: _____

Business Name (if applicable): _____ Phone: _____

Address _____

City/State/Zip _____ Email: _____

Choose one of the following payment options:

You have payment options: check, cashier's check, money order **DO NOT SEND CASH.**

☐ I have enclosed a check for the total tax due made out to Kansas Sales Tax. I authorize the Department of Revenue to process my check via Electronic Funds Transfer.

Printed Name:_____ Signature:_____

Card payments are available using Official Payments: www.officialpayments.com/pay-kansas-taxes.jsp

☐ To process payment on a there will be a 2.5% fee added by the processing company This Official Payment option can be used as a guest user with no account setup required. Use the drop-down selections below to complete the correct payment processing:

State or Territory: Kansas **Payment Entity:** Kansas Dept of Revenue **Payment Type:** Sales and Use Tax
KS Taxpayer Account ID (15 characters) SENK00408849F01

Tax Amount Paid_____ **Confirmation Number**: _____

Mail completed form with payment information and amount of total tax due to the return address shown. If no response is received within 30 days, sales tax may be assessed. Contact us by phone, fax, or email with any questions.

Mail the completed form in the envelope provided to: **Kansas Department of Revenue**
Attn: Special Events
7600 W 119th St Suite A, Overland Park KS 66213

Contact 913-942-3063 **or email KDOR_special.events@ks.gov for assistance.**