

**KW-7**  
(Rev. 9/08)

**KANSAS**  
**Nonresident Owner**  
**Withholding Return**

Detach and send with payment

FOR OFFICE USE ONLY									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Number of KW-7S schedules included with this return.



Name of Partnership, S corporation, LLC or LLP			
Address			
City, Town, or Post Office		State	Zip Code
Name of Contact Person		Phone Number	

Tax Account Number	<b>037</b> _____ <b>F</b> _____
Employer ID Number (EIN)	_____
Tax Year Beginning Date	____ / ____ / ____
Tax Year Ending Date	____ / ____ / ____

Total withholding due from line 4 of Form KW-7S

Withholding Account Closed On:

M M D D Y Y

Amended Return  Additional Return  Name or Address Change

Payment Amount \$

Please Sign The Back of This Return



531003

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**Detach and send with payment**  
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I certify this return is correct.

SIGN HERE
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## NONRESIDENT OWNER WITHHOLDING SCHEDULE

For the taxable year beginning \_\_\_\_\_, 20\_\_\_\_; ending \_\_\_\_\_, 20\_\_\_\_

Name of Partnership, S corporation, LLC or LLP	EIN (Employer Identification Number)	Check box if this is an: Amended Return <input type="checkbox"/> Additional Return <input type="checkbox"/>
Address	Kansas Taxable Income of Partnership, S Corporation, LLC, or LLP	

(A) Enter the name and address of all Nonresident Owners of the Partnership, S Corporation, LLC or LLP shown above.	(B) Nonresident Owner's SSN or EIN	(C) Percent of Ownership	(D) Nonresident Owner's Share of Kansas Taxable Income	(E) Kansas Nonresident Withholding (6.45% of column D)	(F) Nonresident Owner's Share of Kansas Tax Credits	(G) Net Withholding Due
Nonresident Owner Option: <input type="checkbox"/> Withholding in lieu of filing Form K-40/K-40C. <input type="checkbox"/> Opt-out of Withholding. Enclose Form KW-7A or enter effective date of KW-7A _____.						
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**(If additional schedules are needed, copies can be made.)**

1. Total withholding this page (add amounts in column G) . . . . .
2. Number of additional schedules included \_\_\_\_\_ . Total of column G amounts of all additional schedules. . . . .
3. Amount paid with original KW-7S (amended filers ONLY) . . . . .
4. Total withholding due. Add lines 1 and 2 and subtract line 3. (If line 4 is a positive figure, enter here and on Form KW-7. If line 4 is a negative, place a minus (-) in front of amount.)

1		
2		
3		
4		

### NONRESIDENT OWNER WITHHOLDING SCHEDULE

For the taxable year beginning \_\_\_\_\_, 20\_\_\_\_; ending \_\_\_\_\_, 20\_\_\_\_

Name of Partnership, S corporation, LLC or LLP	EIN (Employer Identification Number)	Check box if this is an: Amended Return <input type="checkbox"/> Additional Return <input type="checkbox"/>
Address	Kansas Taxable Income of Partnership, S Corporation, LLC, or LLP	

(A) Enter the name and address of all Nonresident Owners of the Partnership, S Corporation, LLC or LLP shown above.	(B) Nonresident Owner's SSN or EIN	(C) Percent of Ownership	(D) Nonresident Owner's Share of Kansas Taxable Income	(E) Kansas Nonresident Withholding (6.45% of column D)	(F) Nonresident Owner's Share of Kansas Tax Credits	(G) Net Withholding Due
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**(If additional schedules are needed, copies can be made.)**

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2. Number of additional schedules included _____ . Total of column G amounts of all additional schedules. . . . .	2	
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4. Total withholding due. Add lines 1 and 2 and subtract line 3. (If line 4 is a positive figure, enter here and on Form KW-7. If line 4 is a negative, place a minus (-) in front of amount.)	4	