## FORM K-41ES INSTRUCTIONS

In the spaces provided print your name, address, federal Employer Identification Number (EIN) **or** Trust number, and the beginning and ending dates for the taxable year. If your name or address changed since last year, place "X" in the *Name or Address Change* box.

Mail your payment and voucher to:

KANSAS FIDUCIARY TAX
KANSAS DEPARTMENT OF REVENUE
PO BOX 3506
TOPEKA KS 66625-3506

To ensure the most efficient processing of your payments, follow these steps when completing your vouchers:

- · Use only black ink to complete the vouchers.
- Use the correct voucher for the quarter in which you are remitting payment. Enter all required information, including the amount of your payment.
- Write your federal EIN or Trust number on your check or money order and make payable to *Kansas Fiduciary Estimated Tax*.

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

<b>K-41ES</b> (Rev. 7-22)	FOR OFFICE USE ONLY			2023 KAN FIDUCIARY EST VOUCHE	IMATED IN THE	
VOUCHER IS DUE BY THE 15TH	DAY OF THE 4TH MONTH OF	THE TAXAB	LE YEAR			
For the taxable year beginning	ending	]		Employer Identification Number		
Name of Estate or Trust						
Mailing Address (Number and Street, including	Rural Route)		Name or			
			Address			
City	State	Zip Code	Change	1		
Name of Trustee		Phone	e Number			
Make check or money order payable to:	Kansas Fiduciary Estimated Tax	<u> </u>		Payment \$ Amount		
Make check or money order payable to:		(				

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(Rev. 7-22	)		

FOR OFFICE USE ONLY

## 2023 KANSAS FIDUCIARY ESTIMATED **VOUCHER**





## VOUCHER IS DUE BY THE 15TH DAY OF THE 12TH MONTH OF THE TAXABLE YEAR

For the taxable year beginning	ending				Employer Identification Number	
Name of Estate or Trust						
Mailing Address (Number and Street, including Rural Route)				Name or Address		
City	State	Zip Code		change	4	
Name of Trustee			Phone N	Number	Payment (	3
Make check or money order payable to: Kansas Fiduciary E DO NOT SUBMIT PHOTOCOPIES OF THIS FORM		Гах			Amount 4	
	В	16023	3			

<b>K-41ES</b> Rev. 7-22)	FOR OFFICE USE ONLY			2023 KA FIDUCIARY ES VOUCH	STIMATED	-41ES 160 15E
VOUCHER IS DUE BY THE	15TH DAY OF THE 9TH MONTH	OF THE T	AXABLE YEAR	Frankries		
or the taxable year beginning	end	ing		Employer Identification Number		
Name of Estate or Trust						
Mailing Address (Number and Street, in	cluding Rural Route)		Name or			
City	State	Zip Code	Address	•		
Name of Trustee			Phone Number	_ <b>ა</b> _		
				Payment \$ Amount		

<b>K-41ES</b> (Rev. 7-22)	FOR OFFICE USE ONLY			2023 KA FIDUCIARY VOUC	ESTIMATED	K-41ES 8160
VOUCHER IS DUE BY THE 15T	H DAY OF THE 6TH MONTH C	F THE TAXAB	LE YEAR			
For the taxable year beginning	endir	ng		Employer Identification Number		
Name of Estate or Trust	ing Dural Douba					
Mailing Address (Number and Street, includi	ing Rurai Route)		Name or Address			
City	State	Zip Code	change	2		
Name of Trustee	I	Phon	e Number	Powment A		
Make check or money order payable to		- Tax		Payment \$ Amount		