Electronic Services
915 SW Harrison St.
Topeka, KS 66612-1588

Kansas Department of Revenue

phone: 785-296-6993
fax: 785-296-0153
www.webtax.org

Samuel M. Williams, Secretary
Steve Stotts, Director of Taxation

Sam Brownback, Governor

2016 KW-3/KW-3E SPECIFICATIONS FOR ELECTRONIC FILING

The Kansas Department of Revenue no longer accepts W-2s filed on magnetic media. Entities reporting for 51 or more employees or payees must file by electronic means.

In instances when it is determined it is <u>not</u> feasible to file using the Department's on-line web application, withholding information will be accepted on CD-ROM. <u>Approval must be received from the Department</u> in order to file on CD-ROM. Regardless of the submission method, records must meet the specifications outlined in the K-2MT and K-99MT documents for W-2 and 1099 electronic filing or the Department-defined comma separated value (CSV) file formats.

ELECTRONIC RECORDS THAT DO NOT CONFORM TO THE SPECIFICATIONS DEFINED IN THESE INSTRUCTIONS WILL NOT BE ACCEPTED.

Filers uploading withholding information for individual companies on the Department's website should complete the on-line KW-3 Annual Withholding Tax Return supplying applicable W-2 and 1099 information for those reports submitted. Filers submitting withholding information through an alternative method must submit KW-3 information in the Comma Separated Value (CSV) format outlined below. **Filers must contact Electronic Services when submitting information on CD-ROM.**

KW-3/KW-3E CSV Record Layout – State of Kansas

1	Form_Type	13	(A)_Total_Tax_Withheld
2	KS_Withholding_Tax_Num	14	(B)_Total_Pmts
3	SSN_FEIN	15	(C)_Overpayment
4	Year_Ending	16	(D)_Total_Withholding
5	Bus_Name	17	(E)_Net_Amt
6	Street1	18	(F)_Penalty
7	Street2	19	(G)_Interest
8	City	20	(H)_Total
9	State	21	(I)_Number_W2s
10	Zip	22	Change_of_Address
11	Withholding_Acct_Clsd_Date	*23*	*Period_End_Dt*
12	Return_Indicator	*24*	*Amt*
		…	*(Repeat as Needed)*

All information must be submitted as required by this document. For **technical questions** concerning electronic filing, call **Electronic Services** at 785-296-6993 or e-mail eservices@kdor.ks.gov. Questions concerning **filing requirements** should be directed to **Customer Relations** at 785-368-8222.

KW-3E_CSV Rev 20161031

Note: There are no changes in the KW-3 CSV layout from tax year 2015.

KW-3/KW-3E CSV Record Layout – State of Kansas (Detail)			
Column #	Field Name	Field Type	Description
1	Form_Type	Alphanumeric	Form type should be “KW3”
2	KS_Withholding_Tax_Num	Alphanumeric	Company’s tax account number.
3	SSN_FEIN	Alphanumeric	Company’s Employer Identification Number
4	Year_Ending	Date	yyyy
5	Bus_Name	Alphanumeric	Maximum of 50 characters
6	Street1	Alphanumeric	Maximum of 40 characters
7	Street2	Alphanumeric	Maximum of 40 characters
8	City	Alphanumeric	Maximum of 40 characters
9	State	Alphanumeric	Must be 2 characters
10	Zip	Alphanumeric	9 digit zip, if known, with or without hyphen. #####-#### or #########
11	Withholding_Acct_Clsd_Date	Date	mmddyyyy
12	Return_Indicator	Numeric	“0” for original, “1” for amended, and “2” for additional.
13	(A)_Total_Tax_Withheld	Numeric	=> 0 (###.##)
14	(B)_Total_Pmts	Numeric or Null	Informational (###.##)
15	(C)_Overpayment	Numeric or Null	Informational (###.##)
16	(D)_Total_Withholding	Numeric or Null	Informational (###.##)
17	(E)_Net_Amt	Numeric or Null	Informational (###.##)
18	(F)_Penalty	Numeric or Null	Informational (###.##)
19	(G)_Interest	Numeric or Null	Informational (###.##)
20	(H)_Total	Numeric	Calculated Total A – G, >=0 (###.##)
21	(I)_Number_W2s	Numeric	Informational
22	Change_of_Address	Alphanumeric	“Y” = Yes, “N” or Space = No
23	*Period_End_Dt*	*Date*	*mmddyyyy*
24	*Amt*	*Numeric*	*=>0* (###.##)
…	*(Repeat as Needed)*		*Repeat Period_End_Dt and Amt for the appropriate number of periods to be submitted with the KW-3E Report.*

Note: A Microsoft Excel template for creating an uploadable KW-3 file has been developed and is available on the KDOR web site at www.ksrevenue.org/eservw2.html.