



KANSAS DEPARTMENT OF REVENUE
ALCOHOLIC BEVERAGE CONTROL DIVISION
915 SW HARRISON
TOPEKA, KANSAS 66625-3512

DISTRIBUTORS' MONTHLY GALLONAGE TAX RETURN INSTRUCTIONS

WHO IS REQUIRED TO FILE AND PAY GALLONAGE TAX?

All licensed Kansas beer, wine and spirits distributors.

DUE DATE:

The tax return and payment are due on or before the 15th day of the calendar month following the month in which the distributor acquires possession of alcoholic liquor.

INSTRUCTIONS TO COMPLETE THE DISTRIBUTORS' GALLONAGE TAX RETURN:

1. Enter the month, year, FEIN, distributor name, demographic and contact information.
2. Enter the total number of GALLONS that you are reporting for the corresponding PRODUCT TYPE and product CODE (01-03) in the GALLONS column.
3. Multiply each number of gallons by the corresponding TAX RATE and enter that amount in the appropriate TAX AMOUNT column.
4. In the TAX AMOUNT column, subtract product type CODES 02 and 03 from the product type CODE 01.
5. Enter the difference in the TAX DUE column.
6. Add all of the TAX DUE amounts together and enter the sum in the TOTAL TAX DUE box at the bottom of the form.

EXPLANATION OF CODES:

01 = Taxable Product Received: Products purchased from supplier.

02 = Out of State Transfers: Includes Military Non-Taxable sales of spirits only or products returned to supplier or manufacturer.

03 = Other Non-Taxable Distributions: Includes breakage, spoilage and shrinkage.

PAYMENT OF GALLONAGE TAX:

Two options are available to remit your Gallonage Tax payment: conventional and Electronic Funds Transfer (EFT). If you choose conventional payment, remit payment in the form of a check, bank draft or money order payable to the Kansas Department of Revenue. If you choose to pay your Gallonage Tax with the EFT option, you must first complete the authorization form for (EFT -101).

FILING AND PAYMENT OF GALLONAGE TAX:

There are four methods to file and pay your gallonage tax return.

- File the ABC-215 with conventional payment.
- File the ABC-215 with EFT payment. This requires the ABC-216 to be completed and filed.
- File electronically (EDI or Web Application) with EFT payment.
- File electronically (EDI or Web Application) and pay manually.

CONTACT INFORMATION:

Questions may be directed to the ABC Marketing Unit.

Phone: 785-296-7015

E-mail: ABC_Marketing_Unit@kdor.state.ks.us



KANSAS DEPARTMENT OF REVENUE
ALCOHOLIC BEVERAGE CONTROL DIVISION
 915 SW HARRISON
 TOPEKA, KANSAS 66625-3512

DISTRIBUTORS' MONTHLY GALLONAGE TAX RETURN

MONTH: _____ YEAR: _____ FEIN: _____ - _____

| |
|-----------------------------------|
| DISTRIBUTOR NAME: _____ |
| ADDRESS: _____ |
| CITY/STATE: _____ ZIP CODE: _____ |
| CONTACT PERSON: _____ |
| E-MAIL ADDRESS: _____ |

| PRODUCT TYPE: | CODE: | GALLONS: | | TAX RATE: | | TAX AMOUNT: | | TAX DUE: |
|---|-------|----------|---|-----------------|---|-------------|---|----------|
| Alcohol and Spirits (GLAS) | 01 | | X | \$2.50 / Gallon | + | \$ | = | \$ |
| | 02 | | X | | - | \$ | | |
| | 03 | | X | | - | \$ | | |
| Beer (4.1% ABV or more) (GLBR) | 01 | | X | \$0.18 / Gallon | + | \$ | = | \$ |
| | 02 | | X | | - | \$ | | |
| | 03 | | X | | - | \$ | | |
| Cereal Malt Beverage (3.2% ABW or less) (MBTX) | 01 | | X | \$0.18 / Gallon | + | \$ | = | \$ |
| | 02 | | X | | - | \$ | | |
| | 03 | | X | | - | \$ | | |
| Flavored Malt Beverage - Strong (4.1% ABV or more) (GFMB) | 01 | | X | \$0.18 / Gallon | + | \$ | = | \$ |
| | 02 | | X | | - | \$ | | |
| | 03 | | X | | - | \$ | | |
| Flavored Malt Beverage - Weak (4% ABV or less) (FMBT) | 01 | | X | \$0.18 / Gallon | + | \$ | = | \$ |
| | 02 | | X | | - | \$ | | |
| | 03 | | X | | - | \$ | | |
| Fortified Wine (14.1% ABV or more) (FWGL) | 01 | | X | \$0.75 / Gallon | + | \$ | = | \$ |
| | 02 | | X | | - | \$ | | |
| | 03 | | X | | - | \$ | | |
| Light Wine (14% ABV or less) (LWGL) | 01 | | X | \$0.30 / Gallon | + | \$ | = | \$ |
| | 02 | | X | | - | \$ | | |
| | 03 | | X | | - | \$ | | |

TOTAL GALLONAGE TAX DUE =

I have paid my gallonage tax using the EFT option.

I declare under penalties of perjury that to the best of my knowledge and belief this is a true, correct and complete return.

SIGNATURE _____ TITLE _____
State whether individual owner, member of firm, or title if officer of corporation.