



Kansas Department of Revenue  
Alcoholic Beverage Control Division  
915 S.W. Harrison Street, Room 214  
Topeka, KS 66625-3512  
Phone: 785-296-7015 Fax: 785-296-7185

**INDIVIDUAL'S GALLONAGE TAX RETURN  
WINE PURCHASED IN PERSON AT ANY OUT-OF-STATE WINERY  
INSTRUCTIONS**

**WHO IS REQUIRED TO USE THIS FORM?**

Kansas consumers who purchase wine while at any out-of-state winery in a face-to-face transaction and either transport or ship the wine directly to their residence in Kansas.

If you have gallonage tax due in the amount of \$5.00 or less, you must submit your completed Individual's Gallonage Tax Return. DO NOT remit the gallonage tax payment pursuant to the KDOR Revenue Ruling 19-2010-03 that became effective on August 20, 2010.

**DUE DATE:**

The tax return and payment must be filed **within 30 days** of the date of purchasing wine at any out-of-state winery.

**DEFINITIONS:**

**FORTIFIED WINE:** Contains 14.1% alcohol by volume or more.

**LIGHT WINE:** Wine Contains 14% alcohol by volume or less.

**INSTRUCTIONS TO COMPLETE THE INDIVIDUAL'S GALLONAGE TAX RETURN:**

Part A - Gallonage Tax Return

1. Complete the demographic information. **Please print all information.**
2. Enter the DATE the wine was transported into Kansas.
3. Enter the total number of GALLONS that you are reporting for the corresponding PRODUCT TYPE you wish to transport into Kansas. **Report whole gallons only, round to the nearest gallon.**
4. Multiply each number of gallons by the corresponding TAX RATE and enter that amount in the appropriate TAX AMOUNT column.
5. Add the NUMBER OF GALLONS and the TAX AMOUNTS together and enter the sum in the SUBTOTAL line.
6. Enter the amount in the TOTAL GALLONAGE TAX DUE box at the bottom of the form.
7. Sign and date the Gallonage Tax Return. (ABC-207).
8. Retain a copy for your records.

Part B – Itemized List of Wine Purchased

1. Complete the demographic information.
2. Complete the purchase information.

**FILING AND PAYMENT OF GALLONAGE TAX:**

Within 30 days of purchasing wine at an out of state winery:

1. Complete all tax computations on the Individual's Gallonage Tax Return (ABC-207).
2. Attach payment in the form of a check, bank draft or money order in United States funds payable to the "Kansas Department of Revenue" .
3. File the Individual's Gallonage Tax form Part A and B (ABC-207) with payment by sending to the address at the top of the tax return.

**CONTACT INFORMATION:**

Questions may be directed to the ABC Marketing Unit at the number on the tax return. Emails are preferred at ABC.Marketing.Unit@kdor.ks.gov



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**INDIVIDUAL'S GALLONAGE TAX RETURN**  
**WINE PURCHASED IN PERSON AT ANY OF OUT-OF-STATE WINERY**  
**PART A – GALLONAGE TAX RETURN**  
 As required by K.S.A. 41-104(g) and 41-501(b)(2)

NAME: _____	SSN: _____
ADDRESS: _____	
PHONE: _____	City _____ State _____ FAX: _____
EMAIL ADDRESS: _____	
TRANSPORTING FROM ADDRESS: _____	
TRANSPORTING TO ADDRESS: _____	City _____ State _____
TRANSPORTATION DATE(S): _____	City _____ State _____

PRODUCT TYPE:	NUMBER OF WHOLE GALLONS:		TAX RATE PER GALLON:		TAX AMOUNT:
Fortified Wine (IOWF)		X	\$0.75	=	\$
Light Wine (IOWL)		X	\$0.30	=	\$
<b>TOTAL GALLONAGE TAX DUE =</b>					<b>\$</b>

I have calculated the Kansas Gallonage Tax imposed by K.S.A. 41-501 et seq for the wine listed above that I have purchased at an out-of-state winery and have shipped or transported into the State of Kansas. I certify that this wine is for the personal use of my family, my guests and myself and not for resale within the State of Kansas.

Attached is my check, bank draft or money order payable to the "Kansas Department of Revenue".

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

\_\_\_\_\_  
 Signature Date

ABC USE ONLY:

\_\_\_\_\_  
 Approved By Date



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**INDIVIDUAL'S GALLONAGE TAX RETURN  
 WINE PURCHASED IN PERSON ANY OF OUT-OF-STATE WINERY**

**PART B - ITEMIZED LIST OF WINE PURCHASED**

NAME: _____	SSN: _____
ADDRESS: _____	
PHONE: _____	FAX: _____
City	State

No.	Purchase Date	Product Type *	Winery Name	Product Name	Size	Quantity	Number of Gallons
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

\* PRODUCT TYPE:  
 FW = Fortified Wine (14.1% ABV or more)  
 LW = Light Wine (14% ABV or less)