

ST-14 Chicago Soft Drink Tax Return

Rev 3 Form 077
E S ____/____/____
NS DP CA RC

Account ID: _____ This form is for: _____
Reporting Period (month day year - month day year)

Owner's name: _____

Business name: _____

Mailing address: _____

Do not write above this line.

You must round your figures to whole dollars. See instructions.

Step 1: Figure your taxable receipts

1 Total receipts - Enter the total you received from sales of soft drinks, including soft drink tax you collected. Do not include any other tax you collected. **1** _____

2 Deductions
a Enter taxes included in Line 1. **2a** _____

b Enter tax-exempt sales included in Line 1. **2b** _____

Add Line 2a and Line 2b. **2** _____

3 Taxable receipts (Subtract Line 2 from Line 1.) **3** _____

Step 2: Figure your net tax and discount

4 Tax due on receipts. (Multiply Line 3 by 3% (.03).) **4** _____

5 If you filed and paid by the due date, multiply Line 4 x 1.75% (0.0175). **5** _____

6 Net tax due (Subtract Line 5 from Line 4.) **6** _____

7 Excess Chicago Soft Drink tax collected **7** _____

8 Total tax (Add Line 6 and Line 7.) **8** _____

Step 3: Figure your payment due

9 Credit amount **9** _____

10 Payment due (Subtract Line 9 from Line 8.)
Make your payment to **Chicago Soft Drink Tax.** **10** _____

Step 4: Sign below

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Taxpayer's signature Phone Date

Preparer's signature Phone Date

Mail your completed return and payment to: **Chicago Soft Drink Tax Administration, Illinois Department of Revenue, PO Box 19034, Springfield, IL 62794-9034**

This form is authorized by the ordinance of the city council of Chicago and related tax acts imposing the tax for which this form is filed. Disclosure of this information is REQUIRED. Failure to provide this information may result in this form not being processed and may result in a penalty.

