## **Amended Liquor Revenue Airline Return**

REV :	REV 1							
ES_	/_	_/						
NS	DP	CA						

St 1	rep 1: Identify your business  Account ID:	<ul> <li>Station no. 073 Do not write above this line.</li> <li>6 □ Check here if your address has changed.</li> <li>7 Is this a final (you are no longer in buinsess) return?</li> <li>□ yes □ no</li> </ul>						
2	License no.: L A -							
3	Name:	∟ уе	5 110					
4	Address:Number and street							
	Number and street							
	City State ZIP							ı
5	Tax period:/							
St	ep 2: Figure your tax due - Figures as they should	Cid	n reporte er 0.5% to or Beer	ed Alcoholi 14% o			olic liquor 5 – < 20%	Alcoholic liquor 20% or more
8	Liquor imported into Illinois, tax not paid (From Schedule A)	8						
9	Liquor purchased in Illinois, tax not paid (From Schedule F)	9		-				
	Illinois revenue passenger miles:							
	System revenue passenger miles:  System gallonage purchases for aircraft (excluding in-bond)	12						
	Percentage of system domestic revenue passenger miles	13						
4.4	allocated to Illinois							
	Multiply Line 12 by Line 13 - Total quantity subject to tax.  Tax rate per gallon (tax periods on and after September 1, 2009)	14 15\$	.231	\$	1.39	\$	1.39	\$ 8.55
	Multiply Line 14 by Line 15 - Tax due for each liquor class.	16\$		\$		\$	,	\$
17	Add all columns' Line 16 - Total tax due.				17	\$		
18	If you timely file and pay this tax electronically multiply Line 17 by					Φ.		tronic
10	the appropriate rate. See instructions.				18 19		USe	Only
_	Subtract Line 18 from Line 17. Credit you wish to apply.				20	_		
	Subtract Line 20 from Line 19. This is your net tax due.				21	_		
	Total amount you have paid for this reporting period.				22	_		
	If Line 22 is greater than Line 21, subtract Line 21 from Line 2	2. This is yo	ur overpa	yment.	23			
	If Line 22 is less than Line 21, subtract Line 22 from Line 21.	•						
	Pay this amount and make your check payable to "Illinois Departi	ment of Rev	venue."		24	\$		
St	rep 3: Check the reason you are filing this amer I received a Notice of Possible Overpayment or made a computatio I made a computation error that resulted in underpayment of tax. I made an error on a schedule or attachment. I should have taken a deduction for			in an ovei	rpaymen	nt of tax		
<u> </u>	The original License no. was incorrect. The incorrect License no. is	LA -						
	The original reporting period was incorrect. The incorrect reporting							
	Other. Please explain.	-						
Uncor	tep 4: Sign below der penalties of perjury, I state that I have examined this return, all a rrect, and complete. I also state that such information is taken from the state of	he books ar (	nd records	of the bu	siness fo	or whic		
Own	ner or officer's signature and title (state if individual owner, member of firm, or corporate officer title)	7	Telephone num	ber (include a	rea code)	Date	/ /	
Prep	Title:		) Telephone num	ber (include a	rea code)	Date	_//	
	en F. Meil verry yetryn er file electronicelly				· · ·			

Step 5: Mail your return or file electronically

Mail your completed return and attachments to:

ALCOHOL, TOBACCO AND FUEL DIVISION ILLINOIS DEPARTMENT OF REVENUE PO BOX 19019
SPRINGFIELD IL 62794-9019