Use your mouse or Tab key to move through the fields.

Illinois Department of Revenue

RG-6-X Amended Assistance Charges Return for Natural Gas Distributors

REV 3 Form 555
E S ___/___/___
NS DP CA

Station 257

Do not write above this line.

Identify your business

Account ID ___ ___ ___ ___ ___ ___ ___ ___

FEIN ___ ___ - ___ ___ ___ ___ ___ ___ ___
Federal employer identification number

License no. **GA** - ___ ___ ___ ___ ___

Name _____

Address _____
Number and street

_____
City State ZIP

Liability period ___ ___/___ ___ ___ ___
Month Year

☐ Check here if your address has changed.

Is this a final (you are no longer in business) return? ☐ yes ☐ no

Step 1: Figure your assistance charges due - *Figures as they should have been filed*

		Total number of accounts	Energy Assistance Charge	Renewable Energy Charge
1	Total number of accounts to which you delivered residential gas service and from which you collected the assistance charges during this liability period.	1 _____		
2	**Multiply Line 1 by the appropriate rate - See instructions.**		2 _____|___	
3	**Multiply Line 1 by $0.05.**			3 _____|___
4	Write the total number of accounts • to which you delivered nonresidential gas service, • to which you delivered less than 4 million therms of gas during the previous calendar year, and • from which you collected the assistance charges.	4 _____		
5	**Multiply Line 4 by the appropriate rate - See instructions.**		5 _____|___	
6	**Multiply Line 4 by $0.50.**			6 _____|___
7	Write the total number of accounts • to which you delivered nonresidential gas service, • to which you delivered 4 million or more therms of gas during the previous calendar year, and • from which you collected the assistance charges.	7 _____		
8	**Multiply Line 7 by the appropriate rate - See instructions.**		8 _____|___	
9	**Multiply Line 7 by $37.50**			9 _____|___
10	Energy Assistance Charge - **Add Lines 2, 5, and 8.**			10 _____|___
	10a Arrearage Reduction Program subtraction.		10a _____|___	
	10b PIPP Program Administrative & Operation Expense Subtraction.		10b _____|___	
	10c **Add Lines 10a and 10b** and subtract from Line 10 for your total Energy Assistance Charge.			10c _____|___
11	**Add Lines 3, 6, and 9.** This amount is your total Renewable Energy Charge due.			11 _____|___
12	**Add Lines 10c and 11.** This amount is the total assistance charge due.			12 _____|___
13	Total amount you paid for this reporting period.			13 _____|___
14	If Line 13 is ***greater than*** Line 12 — **Subtract Line 12 from Line 13** for your overpayment.			14 _____|___
15	If Line 13 is ***less than*** Line 12 — **Subtract Line 13 from Line 12** for your underpayment. **Pay this amount and make your check payable to "Illinois Department of Revenue."**			15 _____|___

Step 2: Check the reason you are filing this amended return

☐ I made a computation error that resulted in an overpayment of tax.
- If you checked this box, did you collect the overpaid tax from your customer? ☐ yes ☐ no
- If you checked **"yes,"** did you unconditionally refund the overpaid tax? ☐ yes ☐ no

☐ I made a computation error that resulted in underpayment of tax.
☐ I should have taken a deduction for _____
☐ The original License no. was incorrect. The incorrect License no. is **GA -** ___ ___ ___ ___ ___.
☐ The original reporting period was incorrect. The incorrect reporting period is _____.
☐ Other. Please explain._____

_____

Step 3: 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.

_____ Title: _____ (____)____-_____ ____/____/_____
Taxpayer's signature and title (state if individual owner, member of firm, or corporate officer title) Telephone number (include area code) Date

_____ Firm: _____ (____)____-_____ ____/____/_____
Preparer's signature and name of the firm or employer (if applicable) Telephone number (include area code) Date

This form is authorized by the Energy Assistance Act of 1989 and the Renewable Energy, Energy Efficiency, and Coal Resources Development Law of 1997. Disclosure of this information is required.

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