RC-6-A-X Amended Out-of-State Cigarette and Little Cigar Revenue Return

Revenue Return NS DP CA
Station no. 067 Do not write above this line.

Do **not** send any payment with Form RC-6-A-X. Attach all necessary schedules and keep a copy for your records.

Step 1: Identify your business				
1	Account ID:	5	For what tax period are you filing this return?	
2	License no.: U -		Month/Year:/	
3	Business name:	6	\square Check here if your address has changed.	
4	Business address: Number and street	7	Is this a final (you are no longer in business) return? ☐ yes ☐ no	
	City State ZIP			
Step 2: Report your stock - Figures as they should have been reported Number of sticks				
8	Total purchase of Illinois stamped cigarettes and little cigars from another licensed distributor (Sch. CC)	8		
9	Total of Illinois stamped cigarettes and little cigars returned to manufacturers	9		
10	Total of other deductions (Sch. CH)	10	,,	
11	Total of unstamped/non-Illinois stamped cigarettes and little cigars shipped into Illinois (Sch. CK)	11		
12	Net total of Illinois stamped cigarettes and little cigars shipped into Illinois (Sch. CL)	12		
13	Multiply Line 12 by appropriate mill rate. This is the value of Illinois stamps affixed			
	to cigarettes and little cigars you sold.	13	\$	
Step 3: Report your Illinois cigarette tax stamp usage - Figures as they should have been reported				
4.4		4.4	Dollar value	
	Value of all stamps on hand at the beginning of the month	14	\$	
	Value of unaffixed stamps transferred from another licensed distributor	15	\$	
	Value of stamps purchased during the month (Sch. CF-1, Step 2)	16	\$	
17		17	\$	
18	Add Lines 14 thru 17. This is the value of stamps on hand at the beginning		_	
	of the month <i>plus</i> purchases made during the month.	18	\$	
	Value of unaffixed stamps transferred to another licensed distributor	19	\$	
20	Value of stamps returned for credit	20	\$	
21	Add Lines 19 and 20. This is your total deductions.	21	\$	
	Subtract Line 21 from Line 18. This is the total value of stamps to be accounted for.	22	\$	
23	Value of all affixed stamps on hand at the end of the month (Sch. CF, Part 3a)	23	\$	
	Value of all unaffixed stamps on hand at the end of the month (Sch. CF, Part 3b)	24	\$	
25	Add Lines 23 and 24. This is the value of all stamps on hand at the end of the month.	25	\$	
26	Subtract Line 25 from Line 22. This is the value of affixed stamps sold during the month.	26	\$	
Step 4: Mark the reason why you are filing an amended return				
☐ I made an error on a schedule or attachment.				
	I should have taken a deduction for			
 □ I need to correct the license number on a previously filed return. The incorrect license number was U				
Ë		ng p	eriod was	
Step 5: Sign below				
Under penalties of perjury, I state that I have examined this return and all accompanying schedules and, to the best of my knowledge, it is				
true, correct, and complete. I also state that such information is taken from the books and records of the business for which this return is filed.				
	Title: ()	_	/ /	
Owne		mber (include area code) Date	
	Title: ()		/	
Prepa	arer's signature and title (state if individual owner, member of firm, or corporate officer title) Telephone nu	mber (include area code) Date	

RC-6-A-X (R-07/13)