Illinois Department of Revenue RL-26-W-X Amended Liquor Dire	ct Wine Shipper Return		REV 1 E S// NS DP CA
Step 1: Identify your business	Station n	o. 264	Do not write above this line.
1 Account ID:	6 🗌 Check here if your address ha	is changed.	
2 License no.: <u>L</u> W	7 Is this a final (you are no longer in	n business)	return?
<b>3</b> Name:	yes 🗆 no		
4 Address:	_		
City     State     ZIP       5     Tax period:/Year	_		
Step 2: Figure your tax due			
<ul> <li>8 Gallons of cider (alcohol content between 0.5% and 7%) shipped</li> <li>9 Multiply Line 8 by .231</li> <li>10 Gallons of wine (alcohol content of less than 20%) shipped and</li> <li>11 Multiply Line 10 by 1.39</li> <li>12 Gallons of wine (alcohol content 20% or more) shipped and so</li> <li>13 Multiply Line 12 by 8.55</li> <li>14 Add Lines 9, 11, and 13. This is the total tax due.</li> </ul>	d sold directly to consumers:	8 9 <u>\$</u> 10 11 <u>\$</u> 12 13 <u>\$</u> 14 \$	
<ul> <li>15 If you timely file and pay this tax electronically multiply Line 14 I</li> <li>16 Subtract Line 15 from Line 14.</li> <li>17 Credit you wish to apply.</li> <li>18 Subtract Line 17 from Line 16. This is your net tax due.</li> <li>19 Total amount you paid for the reporting period for which you are</li> <li>20 If Line 19 is greater than Line 18, subtract Line 18 from Line 19</li> <li>21 If Line 19 is less than Line 18, subtract Line 19 from Line 18. T Pay this amount. Make your check payable to "Illinois Departm</li> </ul>	e filing this amended return. <b>9.</b> This is the amount of your overpayment. This is the amount you underpaid.	15     \$       16     \$       17     \$       18     \$       19     \$       20     \$       21     \$	ectronic Use Only
Step 3: Check the reason you are filing t			
<ul> <li>I received a Notice of Possible Overpayment or made a comput</li> <li>If you checked this box, did you collect the overpaid tax from</li> <li>If you checked "yes", did you unconditionally refund the over</li> <li>I made a computation error that resulted in underpayment of tax</li> <li>I made an error on a schedule or attachment.</li> </ul>	tation error that resulted in an overpayment your customer?	t of tax.	
<ul> <li>I should have taken a deduction for</li> </ul>			
<ul> <li>The original License no. was incorrect. The incorrect License no.</li> <li>The original reporting period was incorrect. The incorrect report</li> <li>Other. Please explain.</li> </ul>	ting period is		
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. I also state that such information is taken from the books and records of the business for which this return is filed.

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

Step 5: Mail your return or WebFile at tax.illinois.gov. Mail your completed return to ALCOHOL, TOBACCO AND FUEL DIVISION

Mail your completed return to	Ø	Ī
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~	ALCOHOL, TOBACCO AND FUEL DIVISIO
	ILLINOIS DEPARTMENT OF REVENUE
	PO BOX 19019
	SPRINGFIELD IL 62794-9019

