



# RT-2-X Amended Telecommunications Tax Return

## Identify your business

Station no. 052

Do not write above this line.

Account ID: \_\_\_\_\_ Reporting Period: \_\_\_\_\_

License no.: T - \_\_\_\_\_

Taxpayer's name: \_\_\_\_\_

Business name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

## Step 1: Figure your net gross charges subject to tax

- 1 Gross charges (see instructions) billed during the period for which you are filing this return- 1 \_\_\_\_\_
- 2 Total amount you received on credit previously extended during the period for which you are filing this return 2 \_\_\_\_\_
- 3 **Add Lines 1 and 2.** This amount is your gross charges subject to tax. 3 \_\_\_\_\_
- 4 Deductions
  - a Gross charges billed to the federal government 4a \_\_\_\_\_
  - b Gross charges billed to the state of Illinois 4b \_\_\_\_\_
  - c Tax-free sales billed to resellers 4c \_\_\_\_\_
  - d Other. Explain: \_\_\_\_\_ 4d \_\_\_\_\_
- 5 **Add Lines 4a through 4d.** This amount is your total deduction. 5 \_\_\_\_\_
- 6 **Subtract Line 5 from Line 3.** This amount is your net gross charges subject to tax. 6 \_\_\_\_\_

## Step 2: Figure your tax due

- 7a Amount of Line 6 subject to the current state and municipal tax rate 7a \_\_\_\_\_
- 7b **Multiply Line 7a by the current state and municipal rate** See instructions. 7b \_\_\_\_\_
- 8a Amount of Line 6 subject to tax at rates other than the current rates 8a \_\_\_\_\_
- 8b Tax due at rates other than the current tax rates 8b \_\_\_\_\_
- 9 **Add Line 7b and Line 8b.** This is your total tax due. 9 \_\_\_\_\_
- 10 Credit for tax you paid to other states or to telecommunication retailers (See instructions.) 10 \_\_\_\_\_
- 11 **Subtract Line 10 from Line 9.** This is the total Telecommunications Excise Tax due. 11 \_\_\_\_\_
- 12 Discount (See instructions.) 12 \_\_\_\_\_
- 13 **Subtract Line 12 from Line 11.** This is your tax due after the discount. 13 \_\_\_\_\_
- 14 If you pay on a quarter-monthly basis, enter the amount you paid. 14 \_\_\_\_\_
- 15 If Line 14 is greater than Line 13, **subtract Line 13 from Line 14** to calculate your **overpayment**. 15 \_\_\_\_\_
- 16 If Line 14 is less than Line 13, **subtract Line 14 from Line 13** to calculate your tax due. 16 \_\_\_\_\_
- 17 Total credit you wish to apply 17 \_\_\_\_\_
- 18 **Subtract Line 17 from Line 16.** This is your net tax due. 18 \_\_\_\_\_
- 19 Enter the amount of 9-8-8 surcharge included in the total tax due. See instructions. 19 \_\_\_\_\_
- 20 Total amount you paid for the reporting period for which you are filing this amended return. 20 \_\_\_\_\_
- 21 If Line 20 is greater than Line 18, figure your overpayment by **subtracting Line 18 from Line 20.** 21 \_\_\_\_\_
- 22 If Line 20 is less than Line 18, figure your underpayment by **subtracting Line 20 from Line 18.** Pay this amount. 22 \_\_\_\_\_

## Step 3: Check the reason you are filing this amended return

- I received a Notice of Possible Overpayment or 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 made an error on a schedule or attachment.
- I should have taken a deduction for \_\_\_\_\_
- The original License no. was incorrect. The correct License no. is \_\_\_\_\_.
- The original reporting period was incorrect. The correct reporting period is \_\_\_\_\_.
- Other. Please Explain. \_\_\_\_\_

## Step 4: Sign below

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

\_\_\_\_\_  
 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

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

Mail Form RT-2-X and payment to us at Telecommunications Tax, Illinois Department of Revenue, PO Box 19019, Springfield IL 62794-9019.

**Note:** You can file Forms RT-2 and RT-2-X and make your payments electronically using MyTax Illinois at [mytax.illinois.gov](http://mytax.illinois.gov).

This form is authorized as outlined under the tax or fee Act imposing the tax or fee for which this form is filed. Disclosure of this information is required. Failure to provide information may result in this form not being processed and may result in a penalty.