



TP-1-X Amended Tobacco Products Tax Return

Station no. 036

Do not write above this line.

Step 1: Identify your business

1 Account ID:
2 License no.: TP -
3 Business name:
4 Business address:
Number and street
City State ZIP

5 For what month are you filing this return?
Month / Year
6 Check here if your address has changed.
7 Is this a final (you are no longer in business) return?
yes no

Step 2: Figure your cost-based tax (tobacco products excluding moist snuff and e-cigarettes)

Enter figures as they should have been reported

8 Wholesale price of products you manufactured and then sold or otherwise disposed of during this month.
9 Wholesale price of products you purchased and then sold or otherwise disposed of during this month.
10 Add Lines 8 and 9. This is the total cost of cost-based tobacco products you sold or otherwise disposed of.
11 Wholesale price of products you sold in interstate commerce. Attach Schedule TP-11.
12 Wholesale price of products you sold to someone other than a retailer or consumer. Attach Schedule TP-12.
13 Wholesale price of products returned to you on which you paid us tobacco products tax. Attach Schedule TP-7.
14 Other deduction for cost-based products (wholesale price). Attach Schedule TP-13.
15 Add Lines 11, 12, 13, and 14. This is your total cost-based products tax deduction.
16 Subtract Line 15 from Line 10. This is your cost-based products tax base.
17 Multiply Line 16 by 36% (.36). This is your total cost-based tax.

Step 3: Figure your weight-based tax (moist snuff only)

Enter figures as they should have been reported

18 Ounces of moist snuff you manufactured and then sold or otherwise disposed of during this month.
19 Ounces of moist snuff you purchased and then sold or otherwise disposed of during this month.
20 Add Lines 18 and 19. This is the total ounces of moist snuff you sold or otherwise disposed of.
21 Ounces of moist snuff you sold in interstate commerce. Attach Schedule TP-14.
22 Ounces of moist snuff you sold to someone other than a retailer or consumer. Attach Schedule TP-15.
23 Ounces of moist snuff returned to you on which you paid us tobacco products tax. Attach Schedule TP-16.
24 Other deduction for moist snuff (ounces). Attach Schedule TP-17.
25 Add Lines 21, 22, 23, and 24. This is your total weight-based products tax deduction.
26 Subtract Line 25 from Line 20. This is your weight-based products tax base.
27 Multiply Line 26 by .30. This is your total weight-based tax.



Step 4: Figure your cost-based tax (e-cigarettes only)

Enter figures as they should have been reported

- 28 Wholesale price of e-cigarette products you manufactured and then sold or otherwise disposed of during this month. **28** _____.
- 29 Wholesale price of e-cigarette products you purchased and then sold or otherwise disposed of during this month. **29** _____.
- 30 **Add Lines 28 and 29.** This is the total cost of cost-based e-cigarette products you sold or otherwise disposed of. **30** _____.
- 31 Wholesale price of e-cigarette products you sold in interstate commerce. **Attach Schedule TP-18.** **31** _____.
- 32 Wholesale price of e-cigarette products you sold to someone other than a retailer or consumer. **Attach Schedule TP-19.** **32** _____.
- 33 Wholesale price of e-cigarette products returned to you on which you paid us tobacco products tax. **Attach Schedule TP-20.** **33** _____.
- 34 Other deduction for cost-based products (wholesale price). **Attach Schedule TP-21.** **34** _____.
- 35 **Add Lines 31, 32, 33, and 34.** This is your total cost-based products tax deduction. **35** _____.
- 36 **Subtract Line 35 from Line 30.** This is your cost-based products tax base. **36** _____.
- 37 **Multiply Line 36 by 15% (.15).** This is your total cost-based tax. **37** _____.

Step 5: Figure your payment

Enter figures as they should have been reported

- 38 **Add Lines 17, 27, and 37.** This is your total tobacco products tax. **38** _____.
- 39 Credit you wish to apply. **39** _____.
- 40 **Subtract Line 39 from Line 38.** This is your net tax due. **40** _____.
- 41 Total amount you paid for this reporting period. **41** _____.
- 42 If Line 41 is **greater than** Line 40, figure your overpayment by **subtracting Line 40 from Line 41.** **42** _____.
- 43 If Line 41 is **less than** Line 40, figure your underpayment by **subtracting Line 41 from Line 40.** **43** _____.

Pay this amount and make your check payable to "Illinois Department of Revenue."

Step 6: Mark the reason why you are filing an amended return

- I received a Notice of Possible Overpayment or made a computation error that resulted in an overpayment of tax.
- 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 _____.
- I need to correct the license number on a previously filed return. The incorrect license number was **TP -** ____ _.
- I need to correct the reporting period on a previously filed return. The incorrect reporting period was _____.
- Other. Please explain . _____

Step 7: 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.

Taxpayer's signature	Title	Date	Telephone (Include area code)
Preparer's signature		Date	Telephone (Include area code)