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Illinois Department of Revenue

IL-5754 Statement by Person Receiving Gambling Winnings

Who must complete this form?

You must complete Form IL-5754 if you receive payment of Illinois lottery winnings of $1,000 or more; bingo, keno, and slot machine winnings subject to federal withholding requirements for amounts of $2,000 or more; or gambling, pari-mutuel wagering, and sports wagering winnings that are subject to federal withholding (more than $5,000). This form provides a record of who received winnings and to whom the winnings are taxable. The payer will use this information to prepare Form W-2G.

What if I need additional assistance?

If you need assistance, visit our website at **tax.illinois.gov** or call us at **800-732-8866**, **217-782-3336,** or **800-544-5304 (TTY)**.

Step 1: Winnings information (Complete the following information for the person to whom winnings are paid.)

Date of payment: ____/____/____ Type of winnings _____

Total amount won _____ Total Illinois Income Tax withheld _____

Social Security number (SSN) or federal employer identification number (FEIN), name, and address of the person to whom winnings were made payable.

Taxpayer identification number (SSN or FEIN) __ __ __ __ __ __ __ __ __

_____

Name

_____

Street address

_____

City State ZIP

Step 2: Who will receive winnings? (Complete the following information for each person to whom the winnings are taxable.)

1 __ __ __ __ __ __ __ __ __ __ _____

Taxpayer identification number (SSN or FEIN) Amount won

_____

Name

_____

Street address

_____

City State ZIP

2 __ __ __ __ __ __ __ __ __ __ _____

Taxpayer identification number (SSN or FEIN) Amount won

_____

Name

_____

Street address

_____

City State ZIP

3 __ __ __ __ __ __ __ __ __ __ _____

Taxpayer identification number (SSN or FEIN) Amount won

_____

Name

_____

Street address

_____

City State ZIP

Step 3: Sign below.

Under penalties of perjury, I declare that to the best of my knowledge and belief the names, addresses, and taxpayer identifying numbers which I have furnished correctly identify me as the recipient of this payment and correctly identify each person entitled to any portion of this payment.

_____

Signature Date

IL-5754 (R-02/26)

This form is authorized under the Illinois Income Tax Act. Disclosure of this information is required. Failure to provide information may result in this form not being processed and may result in a penalty.