



Illinois Department of Revenue

ST-1 Sales and Use Tax Return

IBT no. 5555-5555 This form is for JANUARY, 2011

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You must round your figures to whole dollars. (See instructions.)

Step 1: Alcoholic Liquor Purchases (See instructions.)

If you are not required to report your purchases, go to Step 2.

Note: Distributors will also report your total purchases to us.

A Total dollar amount of alcoholic liquor purchased
(invoiced and delivered) _____

Step 2: Taxable Receipts

1 Total receipts (Include tax.) 36,047
2 Deductions - **include tax collected**
(Use worksheet on back.) 2,670
3 Taxable receipts
(Subtract Line 2 from Line 1.) 33,377

Step 3: Tax on Receipts

Sales from locations within Illinois

General merchandise

4a _____ x _____ = **4b** _____

Food, drugs, and medical appliances

5a 36,047 x .08 = **5b** 2,670

Sales from locations outside Illinois

General merchandise

6a _____ x _____ = **6b** _____

Food, drugs, and medical appliances

7a _____ x _____ = **7b** _____

Sales at prior rates

Receipts taxed at other rates

8a _____ **8b** _____

9 Tax due on receipts
(Add Lines 4b, 5b, 6b, 7b, and 8b.) 2,670

Step 4: Retailer's Discount and Net Tax on Receipts

10 If you filed and paid by 1-20-08
multiply Line 9 by .0175 47

11 Net tax due on receipts
(Subtract Line 10 from Line 9.) 2,623

Step 5: Tax on Purchases

General merchandise

12a _____ x _____ = **12b** _____

Food, drugs, and medical appliances

13a _____ x _____ = **13b** _____

Purchases at other rates

14a _____ **14b** _____

15 Tax due on purchases
(Add Lines 12b, 13b, and 14b.) _____

Step 6: Net Tax Due

16 Tax due from receipts and purchases
(Add Lines 11 and 15.) 2,623

17 Prepaid sales tax
(Attach PST-2, Copy A.) _____

18 Quarter-monthly payments
(paid on Form RR-3 or by EFT) _____

19 Prior overpayment _____

20 Total prepayments
(Add Lines 17, 18, and 19.) _____

21 Net tax due
(Subtract Line 20 from Line 16.) 2,623

Step 7: Payment Due

22 Excess tax collected
(See instructions.) _____

23 Total tax due
(Add Lines 21 and 22.) 2,623

24 Credit memorandum
(See instructions.) _____

25 Payment due
(Subtract Line 24 from Line 23.) 2,623

Step 8: 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. The information in this return is taken from the records of the business for which it is filed.

Taxpayer _____ Phone _____ Date 1/1

Preparer _____ Phone _____ Date 1/1

Do not detach

ST-1 (R-8/03)

This form is for TIM'S COFFEE SHOPPE

This form is due 1-31-2006

IBT no.: 5555-5555

TIM'S COFFEE SHOPPE
100 MAIN STREET
SUNNYVALE, IL 55555

Write the amount you are paying.

\$ 2,623

Write your remittance and send your payment to

ILLINOIS DEPARTMENT OF REVENUE
RETAILERS OCCUPATION TAX
SPRINGFIELD IL 62796-0001

Just a reminder ...

