



**AMUSEMENT TAX RETURN FILING**

2 Community Blvd., Wheeling, IL 60090 (847) 459-2600

**LEGAL NAME:** \_\_\_\_\_

**BUSINESS NAME:** \_\_\_\_\_

**REPORTING PERIOD:** \_\_\_\_\_

**FEIN:** \_\_\_\_\_

**SECTION 1 - Please complete #1 through #6 if payment is made by the 1st of the month**

- 1. Net Receipts from Amusement Activities \_\_\_\_\_
- 2. Deductions of Sales Not Subject to Tax (T-shirts, etc.) \_\_\_\_\_
- 3. Taxable Receipts (Line 1 minus Line 2) \_\_\_\_\_
- 4. Amount of Tax (Multiply Line 3 by 4% (.04)) \_\_\_\_\_
- 5. Commission if Paid on Time by the 1st of the following month (Multiply line 4 by 1% (.01)) \_\_\_\_\_
- 6. Total Payment Due (Line 4 minus Line 5) \$ \_\_\_\_\_

**SECTION 2 - Please complete #7 through #14 if payment is made after the 1st of the month**

- 7. Net Receipts from Amusement Activities \_\_\_\_\_
- 8. Deductions of Sales Not Subject to Tax (T-shirts, etc.) \_\_\_\_\_
- 9. Taxable Receipts (Line 7 minus Line 8) \_\_\_\_\_
- 10. Amount of Tax (Multiply Line 9 by 4% (.04)) \_\_\_\_\_
- 11. Penalty for Late Payment of Tax (2% of Line 10) \_\_\_\_\_
- 12. Number of Months Payment is Late \_\_\_\_\_
- 13. Total Penalty for Late Payment of Tax (Line 11 times Line 12) \_\_\_\_\_
- 14. Total (Tax and Penalty Payment Due (The total of lines 10 & 13)) \$ \_\_\_\_\_

**Under penalties as provided by law, I declare that to the best of my knowledge and belief, the information on this return is true, correct and complete**

**Signature:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Printed Name** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Please make checks payable to the "Village of Wheeling"**