Illinois Department of Revenue

# PT-10 Pull Tab and Jar Game

**Quarterly Tax Return** 

Station 994\*

Step 1: Tell us about your organization	n and account activity
	Quarter ending///
Pull tabs license no. P	1 Is this an amended return? yes no *Station 995
Organization's name	2 Is this a final return? yes no If "yes," your license will be cancelled.
C/O	Note: A "final" return indicates that an organization does not intend to conduct any more events.
Number and street	<b>3</b> Has your address changed since your last
City, state, ZIP	filing? yes no
	<ul> <li>4 Did you sell any pull tabs this quarter? yes no If "no," go to Step 4. If "yes," go to Step 2 on the back of this form.</li> </ul>
Step 2: Figure your gross proceeds (s	Step 2 is on the back of this form.)

Step 3: Figure your tax (You must complete Step 2 on the back of this form before you complete Step 3.)

1	Gross proceeds. Write the total of Step 2, Column J.	1	·
2	Did you have a special permit? yes no (If "no," go to Line 3.) If "yes," write your special permit number here. PX Write the dates this permit was issued for/_// to//		
	How many games were played under the special permit? (Do not write number of days	s sold.	.)
3	Total tax due. Multiply Line 1 by 5% (.05).	3	J
4	Write the number and amount of each credit memorandum you want to apply against tax due. You must attach your original memorandum. Credit number Credit amount b		
	Add Lines a, b, and c and write the result on Line 4.	4	۱ <u>ـــــ</u>
5	<b>Total due.</b> Subtract Line 4 from Line 3. Make your check payable to "Illinois Department of Revenue." (Pay this amou	5 Int.)	
S	tep 4: Sign below (You must sign and date your return.)		
	nder penalties of perjury, I state that I have examined this return; it is true, correct, and co se awarded on any day did not exceed \$5,000.	ompl	lete; and the total value of the prizes or merchan-

	( )	
Taxpayer or authorized officer's signature	Daytime telephone number	Date
	( )	
Paid tax preparer's signature	Daytime telephone number	Date

Note: If you do not sign your return, it will be deemed as not filed and you may be subject to penalties as provided by law.

#### Mail your completed form and payment to: Pull Tab Tax, Illinois Department of Revenue, P.O. Box 19019, Springfield, IL 62794-9019.

PT-10 front (R-1/01)

This form is authorized by the Illinois Pull Tabs and Jar Games Act. Disclosure of this information is required. Failure to comply may result in a penalty. This form has been approved by the Forms Management Center. IL-492-2396

## **General Information**

Each winning pull tab and jar game must be predetermined. The price for participating in such games can be no more than two dollars, and each prize awarded can be no more than \$500. No more than 6,000 tickets may be sold per game.

#### What is the deadline for filing this return?

This return is due on or before the 20th day following the end of the quarter. For example, if you are filing this return for the quarter ending March 31, it is due on or before April 20.

# What if I fail to file this return and pay the amount I owe?

You owe a **late-filing penalty** if you do not file a processable return by the due date, a **late-payment penalty** if you do not pay the tax you owe by the date the tax is due, and a **bad check penalty** if your remittance is not honored by your financial institution. Interest is calculated on tax from the day after the original due date of your return through the date you pay the tax. We will bill you for penalties and interest. For more information about penalties and interest, see Publication 103, Uniform Penalties and Interest. To receive a copy of this publication, visit our web site at **tax.illinois.gov** or call us at **1 800 356-6302**. In addition to imposing penalties and interest, we may suspend or revoke your pull tab license.

#### What if I have questions?

If you have questions about your

- return, call 217 782-6045
- license, call 217 524-4164

weekdays between 8:00 a.m. and 4:30 p.m.

You may also write to us at: Pull Tab Tax, Illinois Department of Revenue, P.O. Box 19019, Springfield, IL 62794-9019.

### Step 2: Figure your gross proceeds (Complete Columns A through L below.)

Α		В	С	D	E	F
Date of game	Manu	ifacturer's no.	Supplier's no.	Supplier's name	Name of game	e Form number
/ /	PM -		PS -			
			PS -			
			PS -			
			PS -			
/ /	PM -		PS -			
/ /	-		PS -			
/			PS -			
/	PM -		PS -			
//			PS			
//			PS			
//	PM -		PS			
//	PM -		PS			
//			PS			
//			PS			
//			PS			
G		н	1	J	К	L
•			-			_
Serial no.		Sale price	Number of tickets	Gross proceeds	Total paid out	Profit
Serial no.		Sale price of ticket	Number of tickets sold per game	Gross proceeds (Multiply Columns H and I)	Total paid out (winnings)	Profit (Column J minus Column K
Serial no.		of ticket	sold per game	Gross proceeds (Multiply Columns H and I)	Total paid out (winnings)	
Serial no.		of ticket		•	•	
Serial no.		of ticket	sold per game	•	•	
Serial no.		of ticket	sold per game	•	•	
Serial no.		of ticket	sold per game	•	•	
Serial no.		of ticket	sold per game	•	•	
Serial no.		of ticket	sold per game	•	•	
Serial no.		of ticket	sold per game	•	•	
Serial no.		of ticket	sold per game	•	•	
Serial no.		of ticket	sold per game	•	•	
Serial no.		of ticket	sold per game	•	•	
Serial no.		of ticket	sold per game	•	•	
Serial no.		of ticket	sold per game	•	•	
Serial no.		of ticket	sold per game	•	•	Profit (Column J minus Column K

and on Step 3, Line 1, on the front of this form.

Note: If you need more space, attach additional pages using this format to list all the requested information for each game.