

Indicate what tax year you are amending: Tax year beginning _____, ending _____
month day year month day year

Write the amount you are paying.
 \$ _____

STOP If you are filing an amended return for tax years ending **before December 31, 2013**, you cannot use this form. For prior years, use the amended return form for that year.

Step 1: Identify your partnership, S corporation, or trust

A Write your complete legal business name.
 If you have a name change, check this box.

Name: _____

B Write your mailing address.

If you have an address change, check this box.

C/O: _____

Mailing address: _____

City: _____ State: _____ ZIP: _____

C Write your federal employer identification number (FEIN).
 _____ - _____ 5 5 5

D Check your entity type:

Partnership S corporation Trust

Mail this return to:
Illinois Department of Revenue
P.O. Box 19016
Springfield, IL 62794-9016

Step 2: Figure your payment amount

	A As most recently reported or adjusted	B Corrected amount
1 Total amount of business income apportioned to Illinois (cannot be less than zero). See instructions.	1 _____ .00	1 _____ .00
Note (Lines 2a through 5a - see instructions.)		
2 Nonresident individuals/ estates share of line 1. 2a _____ x .05 = 2 _____ .00	2a _____ x .05 = 2 _____ .00	2 _____ .00
3 Partnerships/S corporations share of line 1. 3a _____ x .015 = 3 _____ .00	3a _____ x .015 = 3 _____ .00	3 _____ .00
4 Nonresident trusts share of line 1. 4a _____ x .065 = 4 _____ .00	4a _____ x .065 = 4 _____ .00	4 _____ .00
5 Corporations share of line 1. 5a _____ x .095 = 5 _____ .00	5a _____ x .095 = 5 _____ .00	5 _____ .00
6 Add Lines 2 through 5 for Columns A and B.	6a _____ .00	6b _____ .00
7 Write any pass-through entity payment reported to you on Schedule(s) K-1-P or K-1-T that you choose to apply toward your pass-through entity payment obligations. (Schedule(s) K-1-P or K-1-T.)	7 _____ .00	7 _____ .00
8 Total amount paid on Form IL-1000-P and with your original IL-1000 return.	8 _____ .00	8 _____ .00
9 Add Lines 7 and 8	9 _____ .00	9 _____ .00
10 Subtract Line 9 from Line 6b. This is your total tax due.	10 _____ .00	10 _____ .00
11 Penalty. See instructions.	11 _____ .00	11 _____ .00
12 Interest. See instructions.	12 _____ .00	12 _____ .00
13 Add Lines 10, 11, and 12. This is the amount you owe.	13 _____ .00	13 _____ .00

Step 3: Sign here

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.

Signature of partner, authorized officer, or fiduciary Date _____ Title _____ Phone _____
 Signature of preparer Date _____ Preparer's Social Security number or firm's FEIN _____
 Preparer's firm name (or yours, if self-employed) _____ Address _____ Phone _____

Check this box if we may discuss this return with the preparer shown in this step.

▶ If you owe tax on Line 13, complete a payment voucher, Form IL-1000-X-V, make your check payable to "Illinois Department of Revenue" and attach them to this page. ◀

Write the amount of your payment on the top of this form in the space provided.

This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty.

Attach your payment and Form IL-1000-X-V here.