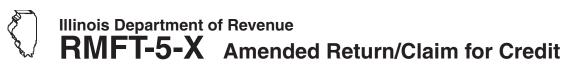
Do *not* file this return on paper.

Illinois law requires
Form RMFT-5-X to be
submitted electronically.

Use MyTax Illinois, available at mytax.illinois.gov, to file your return.



RMFT-5-X Page 1 (R-07/19)

## Amended Return/Claim for Credit Motor Fuel Tax for Distributor/Supplier

REV	′ 01
ES	/
NS	DP CA

Step 1: Identify yourself								Do not write	above this line.
Name		Origin	Original reporting period			Distributor license number		D	_
				Month	Year	OR			
Address	·					Supplier	license number	<u>S</u>	
Number and stree	et								
O'th.	State	Teleph ZIP	none no.	()	- <del>-</del>				
City Note: All calculations of tax	x are based on gallon measurer	ments ( <i>i.e.</i> , a liquid gallon, a gaso	line	As originall	v reported	or adjusted	Corre	cted amou	nte
	9	ormation, see instructions for <b>each</b>		Column 1	Column 2	Column 3	Column 1	Column 2	Column 3
-	total gallonage for the			Gasoline Tax Rate	Diesel Fuel	Dyed diesel fuel	Gasoline Tax Rate	Diesel Fuel	Dyed diesel fuel
	tick) inventory at the beginni				Tax Rate			Tax Rate	
•	with closing inventory of pre		1						
2 Enter the number of	-	cealing months return.	'						
		to Illinois tax-free (Schedule A, SA	or DA) <b>23</b>	1					
		nto Illinois tax-nee (Schedule E							
		old for highway use (Schedule G		:					///////////////////////////////////////
_	2c. Remember to do calcul								
	tick) inventory at the end of t								
	Line 3. This is your net gall		5						
	nontaxable gallonage	•	•						
		overnment, etc. (Schedule B, SB, c	or DB) 6	i					
	gallons exported from Illino		7						
8 Enter the number of		(20.1044.0 2, 22, 3. 23)	-						
		supplier (Schedule D, SD, or DD)	8a	1					
		stributor or supplier (Schedule DD-	1) <b>8b</b>	///////////////////////////////////////	///////////////////////////////////////		<i>                                     </i>	///////////////////////////////////////	
	el you used for nonhighway p			///////////////////////////////////////	///////////////////////////////////////		///////////////////////////////////////	///////////////////////////////////////	
		age, spillage, etc. (Schedule F)	9	) <u> </u>					
		emperature variation or evapor	ration						
<i>or</i> your gain due to t	temperature variation. Comp	olete Line 10a <b>or</b> 10b per colu	ımn.						
a Loss. The amoun	nt of losses you claim are l	imited. See instructions.	or						
<b>b</b> Gain.			OI .	( )	( )	( )	( )	( )	( )
11 Add Lines 6 through	n 10b. This amount is your to	tal nontaxable gallonage.	11						
12 Subtract Line 11 from	m Line 5. The amount in Col	umn 3 should be zero.	12						
	your taxable gallonag								
	gallons sold and distributed		13			<u> </u>			<u> </u>
	gallons you used in motor v								
	eational-type watercraft on v					<u> </u>			<u> </u>
		cable (nonhighway) purposes.							<u> </u>
	nd 15. This is your gross tax					<u> </u>			<u> </u>
9	•	the time of purchase. (Schedule E	-	<u> </u>	-	<u> </u>			<u> </u>
18 Subtract Line 17 from	m Line 16. This is your net to	axable gallonage.	18						<u> </u>

Follow our instructions for <b>each</b> column.	As originally		reported	or adjusted	Corrected amounts		
<ul> <li>Step 6: Figure your tax</li> <li>19 Figure your gross tax due. If the amount on Line 18 is greater than zero, enter the amount from Line 18. Otherwise, enter "0" on Lines 19 - 21 within the column.</li> </ul>	Colu	mn 1 Tax Rate	Column 2 Diesel Fuel Tax Rate	Column 3 Dyed diesel fuel	Column 1 Gasoline Tax Rate	Column 2 Diesel Fuel Tax Rate	Column 3 Dyed diesel fue
a X gasoline tax rate. Enter the result on Line 19, Column 1.  b X diesel fuel tax rate. Enter the result on Line 19, Column 2. 1  10 If you originally filed and paid your tax due on time, figure your collection discount. See instructions.  Note: If you are increasing the amount of tax due, you may not increase the amount of your discount unless the increased tax due is paid on or before the due date of the original return. If you are decreasing the amount of tax due, refigure the		\$ <u>-</u>		\$ <u>///////////////////////////////</u>	\$	\$	<u>\$ ////////////////////////////////////</u>
	0 \$	\$_		\$ ////////////////////////////////////	\$	\$	<u> </u>
22 Add Column 1, Line 21 and Column 2, Line 21. This is your tax due.	1 \$	\$ \$		\$ <u>////////////////////////////////////</u>	\$	\$ \$	\$_////////////////////////////////////
<ul><li>Step 7: Figure the amount you owe</li><li>23 Enter the amount of credit you wish to apply. (See instructions.)</li></ul>		23 \$				\$	
24 Subtract Line 23 from Line 22.		24 \$				\$	
<ul> <li>26 If Line 24, Corrected Amounts Column, is greater than Line 25, subtract Line 25 from Line 24, Corrected Amounts Column. This is the <i>amount you owe</i>.</li> <li>27 If Line 24, Corrected Amounts Column, is less than Line 25, subtract Line 24, Correct Amounts Column, from Line 25. If you want to claim a credit, you must complete Stete Step 8: Sign and date your amended return</li> <li>Under penalties of perjury, I state that I have examined this amended return, and, to the best controlled to the subtraction.</li> </ul>	cted p 9.	knowledge		27 \$	ete.	-	
Signature of person, other than taxpayer, who prepared this return Date	Taxpayer's n	ame				-	
Preparer's phone number	Signature ar	d title of taxpa	ayer		Date	_	
Mail this return and payment to: Illinois Departm	ent of Re	venue, PO	Box 19019,	Springfield, IL	62794-9019		
Step 9: Complete your claim for credit - Complete Lines 28 through 30 if you 28 Explain below why the amount for which you are filing this claim is alleged to be a minute.				ttach additional sl	heets, if necessar	·y.	
29 Are you a party to a civil suit involving the above amounts? yes no If "yes", what is the name of the suit?							
30 Sign below							
Signature of claimant							
Title (Indicate whether owner, partner, officer, or authorized agent)							

This form is authorized as outlined by the Motor Fuel Tax Law. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty.