

FOOD & BEVERAGE FOR IMMEDIATE CONSUMPTION & PACKAGE ALCOHOLIC LIQUOR SALES TAX REMITTANCE FORM



- | REMITTANCE CHECKLIST | |
|--------------------------|--|
| <input type="checkbox"/> | List Business # + Attach ST-1/ST-2 form |
| <input type="checkbox"/> | Remit 2% Food/Beverage Tax-Start 3/1/2020 sales |
| <input type="checkbox"/> | Remit 3% Package Liquor Tax-Start 7/1/2019 sales |
| <input type="checkbox"/> | Include check with form |
| <input type="checkbox"/> | Sign form – include email address |
| <input type="checkbox"/> | Remit by the 30 th of the month after collected |

BUSINESS NAME: _____

MAILING ADDRESS: _____

BUSINESS ADDRESS: _____

BUSINESS ACCT: # _____

CUSTOMER: # _____

IL BUSINESS TAX #: _____

TAX COLLECTION PERIOD BEGINNING _____ **AND ENDING** _____

SECTION I: FOOD/BEVERAGE:

1. SALES OF PREPARED FOOD FOR IMMEDIATE CONSUMPTION AND CERTAIN ALCOHOLIC BEVERAGES: (Enter Line 3 ST-1 or Line 4a ST-2) 1 _____

1a Class R license holders indicate alcoholic beverage sales included in Line 1 1a _____

2. OTHER TAXABLE RECEIPTS: from Uber Eats, Door Dash, Grub Hub, etc. **NOT** included in Line 1 (see page 2 instructions) 2 _____

2a Explain any differences from the ST-1 Line 3, or ST-2 Line 4a

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2b. _____
(Total Line 1 and Line 2)

3. DEDUCTIONS:

- | | |
|---|---------|
| A. Receipts Not Subject to Food and Beverage Tax (General Merchandise, Grocery) | A _____ |
| B. Sales Outside City of Urbana | B _____ |
| C. Tax Exempt Organizations | C _____ |
| D. Amounts Purchased by Employees at Cafeterias | D _____ |
| E. Purchases by Patients at Hospitals or Residential Care Units | E _____ |
| F. Alcoholic Beverages NOT CONSUMED ON PREMISES (Section II Package Liquor) | F _____ |

TOTAL DEDUCTIONS: (SUM A through F) 3 _____

4. NET TAXABLE SALES: (Line 2b less Line 3) 4 _____

5. FOOD/BEVERAGE TAX: (Line 4 multiplied by .02) 5 _____

SECTION II: PACKAGE LIQUOR:

6. PACKAGE LIQUOR SALES (Line F) 6 _____

7. PACKAGE LIQUOR TAX (Line 6 multiplied by .03) 7 _____

SECTION III: TOTAL TAX DUE:

8. TOTAL TAX DUE: (SUM Lines 5 and 7) 8 _____

9. LATE PENALTY: ADD penalty of 2% per month, line 7 multiplied by .02, if filed late. (**Payment is due within 30 days of reporting period**) 9 _____

10. TOTAL PAYMENT DUE: (SUM Line 8 and 9) 10 _____

SECTION IV: SIGNATURES:

Mail Payment and Form To: City of Urbana 400 S. Vine St Urbana, Illinois 61801 Questions contact: Theresa Hoffman (217) 384-2448 or thoffman@urbanaininois.us
Under penalty, as provided by law, I declare that I have examined this return and to the best of my knowledge and belief, it is true and correct.

DATE	SIGNATURE/TITLE	EMAIL ADDRESS	PHONE
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Typed or Printed Signature & Title _____

City Use Only: Check#

Date:

FOOD & BEVERAGE FOR IMMEDIATE CONSUMPTION & PACKAGE ALCOHOLIC LIQUOR SALES TAX REMITTANCE FORM

TAX FORM ASSISTANCE

SECTION I: FOOD/BEVERAGE

Line 1. Enter taxable receipts from ST-1 Line 3 for single-site taxpayers, or ST-2 Line 4a for multi-site taxpayers.

Line 1a. Class R liquor license holders enter the amount of alcoholic beverage sales that are included in Line 1.

Line 2. Enter taxable receipts received from any Marketplace Facilitator such as Grub Hub, Door Dash, Uber Eats, etc. **as long as** such amounts are not already included on your ST-1 or ST-2.

Line 2a. Provide an explanation for any differences between the amount entered on the tax form and the amount shown on your ST-1 or ST-2.

Line 2b. After reviewing Line 2a above, add Line 1 and Line 2 and enter the Total.

Line A-F. Enter the amount of allowable deductions on Lines A-F.

Line 3. Enter the total deduction amounts by adding Lines A-F.

Line 4. Enter your taxable sales by deducting Line 3 from Line 2b.

Line 5. Compute your Food/Beverage Tax due by multiplying Line 4 by the Food/Beverage tax rate of 2%.

SECTION II: PACKAGE LIQUOR

Line 6. Enter the amount of package liquor sales. This amount should match your deduction on Line F.

Line 7. Compute your Package Liquor Tax due by multiplying Line 6 by the Package Liquor tax rate of 3%.

SECTION III: TOTAL TAX DUE

Line 8. Compute the total Food/Beverage Tax and Package Liquor Tax due the City of Urbana by adding Line 5 and Line 7.

Line 9. If payment is NOT made 30 days after the tax collection period, add late penalties by multiplying Line 7 by 2% per month late.

Line 10. Compute the total payment due the City of Urbana by adding Line 8 and Line 9.

SECTION IV: SIGNATURES

The tax return must be signed by at least one representative of the business. Include your email address and phone number.

Mail or bring in copies of the (1) Signed Tax Form, (2) State Tax Forms, and (3) Check made payable to the "City of Urbana" by the 30th of the month after you collected the taxes.

****NEW PAYMENT OPTION****

**SUBMIT and PAY your taxes ONLINE at: <https://urbana.munisselfservice.com/default.aspx>
You will need your Business # and Customer# found on the reverse side of this form.**