



This report is due on the same day the monthly remittance is transmitted, which is the 24th of each month.

Name of Riverboat or Racino Licensee	Taxpayer ID Number (FEIN)
Location Address	
Filing Period Begin Date	Filing Period End Date

RECAP: Enter column totals from page 2 on lines 1, 2 and 3.

1. Sports wagering tax transmitted (total of Column 1 on page 2 of this form)	1	\$	<input type="text"/>
2. Supplemental wagering tax transmitted (total of Column 2 on page 2 of this form).....	2	\$	<input type="text"/>
3. Wagering tax transmitted (total of Column 3 on page 2 of this form)	3	\$	<input type="text"/>
4. Wagering tax adjustment (specific to Indiana Code 4-33-13-1.5 or other adjusted wagering taxes as directed by the Indiana Gaming Commission)	4	\$	<input type="text"/>
5. Total amount transmitted. Enter total line here (total amount must match the amount transmitted for this month).....	5	\$	<input type="text"/>

By submitting this report I declare that, to the best of my knowledge and belief, the information provided is complete and accurate.

 Print Name

 Signature

 Date

Note: This return can be completed and filed electronically via DOR's e-services portal, INTIME, at intime.dor.in.gov.

Mailing/Contact Information:
 Indiana Department of Revenue
 Special Tax Section
 P.O. Box 2485
 Indianapolis, IN 46206-2485
 317-615-2710

Itemized Daily Recap Complete rows for each reporting day of the reporting month. Carry column totals to the RECAP area on page 1.

Gaming Day Begin Date (Month/Day)	Column 1 Sports Wagering Tax	Column 2 Supplemental Wagering Tax	Column 3 Total Wagering Tax	Column 4 Total (Add Columns 1 + 2 + 3)
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Total Amounts in Each Column	\$	\$	\$	\$