2020 Form IL-1040

Individual Income Tax Return or for fiscal year ending ___/_

Over 80% of taxpayers file electronically. It is easy and you will get your refund faster. Visit tax.illinois.gov.

Step 1: Personal Information

1995

760-78-5290

SAI KRISHNA

KANCHARLA

510 S POPLAR ST

CARBONDALE

62901 IL

JACKSON



	B C D	Filing status: Single Married filing jointly Married filing separately Widowed Check If someone can claim you, or your spouse if filing jointly, as a dependent. See instructions Check the box if this applies to you during 2020: Nonresident - Attach Sch. NR Part-y	s. 🗆 You 🛭	Spouse	
			real regiderin		e dollars only)
	51e	p 2: Income Federal adjusted gross income from your federal Form 1040 or 1040-SR, Line 11.		4	59,976.00
	2	Federally tax-exempt interest and dividend income from your federal Form 1040 or 1040-SR, Line 11.	Line 2a	2	.00
	3	Other additions. Attach Schedule M.	Lille Za.	3	.00
	4	Total income. Add Lines 1 through 3.		4	59,976 <u>.00</u>
		p 3: Base Income			77777.00
ח		•			
Ē	5	Social Security benefits and certain retirement plan income		00	
2	6	received if included in Line 1. Attach Page 1 of federal return. 5 _ Illinois Income Tax overpayment included in federal Form 1040 or 1040-SR,		.00	
	U	Schedule 1, Ln. 1.		.00	
5	7	Other subtractions. Attach Schedule M. 7		.00	
0	•	Check if Line 7 includes any amount from Schedule 1299-C.		00	
5	8	Add Lines 5, 6, and 7. This is the total of your subtractions.		8	.00
Staple W-z and 1099 forms here	9	Illinois base income. Subtract Line 8 from Line 4.		9	59,976.00
ā	Ste	p 4: Exemptions			
			2,32	5.00	
ב ט	10	b Check if 65 or older: \square You + \square Spouse # of checkboxes X \$1,000 = b	2,32	.00	
5		c Check if legally blind: You + Spouse # of checkboxes X \$1,000 = c		.00	
2		d If you are claiming dependents, enter the amount from Schedule IL-E/EIC, Step 2, Line 1.		.00	
				0.00	
A		Exemption allowance. Add Lines a through d.		10	2,325.00
Γ	Ste	p 5: Net Income and Tax			
•		Residents: Net income. Subtract Line 10 from Line 9.			
	• •	Nonresidents and part-year residents: Enter the Illinois net income from Schedule NR. Attac	ch Schedule I	NR 11	57,651 _{.00}
	12	Residents: Multiply Line 11 by 4.95% (.0495). Cannot be less than zero.	on concade i		- ,00
		Nonresidents and part-year residents: Enter the tax from Schedule NR.		12	2,854.00
F	13	Recapture of investment tax credits. Attach Schedule 4255.	`	13	.00
	14	Income tax. Add Lines 12 and 13. Cannot be less than zero.		14	2,854.00
!	Ste	p 6: Tax After Nonrefundable Credits			
3	15	·		.00	
2	16	Property tax and K-12 education expense credit amount from Schedule ICR.			
5	. •			.00	
	17	Credit amount from Schedule 1299-C. Attach Schedule 1299-C. 17		.00	
		Add Lines 15, 16, and 17. This is the total of your credits. Cannot exceed the tax amount on Li	ne 14.	18	0.00
2		Tax after nonrefundable credits. Subtract Line 18 from Line 14.		19	2,854.00
)	Ste	p 7: Other Taxes			
Staple your clieck and IE-1040-V	20	Household employment tax. See instructions.		20	.00
;	21	·	ole		
_	-	in the instructions. Do not leave blank.		21	0.00
7	00			00	.00

IL-1040 2D Front (R-12/20)

23 Total Tax. Add Lines 19, 20, 21, and 22. This form is authorized as outlined under the Illinois Income Tax Act. Disclosure of this information is required. Failure to provide information could result in a penalty.

Compassionate Use of Medical Cannabis Program Act and sale of assets by gaming licensee surcharges.



22

23

.00 2,854.00



24	Total tax from Page 1, Line 23.			24	2,854 <u>.00</u>							
Ste	p 8: Payments and Refundable Credit											
25	Illinois Income Tax withheld. Attach Schedule IL-WIT.		25	2,955.00								
	Estimated payments from Forms IL-1040-ES and IL-505-I,											
	including any overpayment applied from a prior year return.		26	.00								
	Pass-through withholding. Attach Schedule K-1-P or K-1-T.		27									
	Earned Income Credit from Schedule IL-E/EIC, Step 4, Line 8.	Attach Schedule IL-E/EIC		.00								
	Total payments and refundable credit. Add Lines 25 through			29	2,955 _{.00}							
Ste	Step 9: Total											
	If Line 29 is greater than Line 24, subtract Line 24 from Line 29.			30	101.00							
	If Line 24 is greater than Line 29, subtract Line 29 from Line 24.			31	.00							
	p 10: Underpayment of Estimated Tax Penalty and Do	nations - Only com	plete Step 10) for late-paym	ent penalty							
	underpayment of estimated tax or to make a volunt	•		ioi iato payiii	one pondity							
	Late-payment penalty for underpayment of estimated tax.	•	32	.00								
	a ☐ Check if at least two-thirds of your federal gross income	is from farming.										
	b Check if you or your spouse are 65 or older and perman	•	g home.									
	c ☐ Check if your income was not received evenly during the	• •	-	on Form IL-221	0.							
	Attach Form IL-2210.		-									
	d	al Income Tax return in	the previous ta	x year.								
33	Voluntary charitable donations. Attach Schedule G.		33	.00								
34	Total penalty and donations. Add Lines 32 and 33.			34	.00							
Ste	p 11: Refund											
35	If you have an amount on Line 30 and this amount is greater	than Line 34, subtract	Line 34 from Lir	ne 30.								
	This is your overpayment .	,		35	101.00							
36	Amount from Line 35 you want refunded to you. Check one b	ox on Line 37. See inst	ructions.	36	101.00							
37	I choose to receive my refund by											
•												
	a 🗵 direct deposit - Complete the information below if you check this box.											
			ooking or C	'avinga								
	Routing number 0 7 1 0 0 0		necking or S	Savings								
	Routing number 0 7 1 0 0 0		necking or S	Savings								
	Routing number 0 7 1 0 0 0 Account number 1 1 6 3 3 9	0 1 3 X Ch			at							
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IL-1040 2D Back (R-12/20) Printed by authority of the State of Illinois - web only, 1.

DR_____ AP____ RR DC IR ID

ID: 3WM REV 03/17/21 PRO





Illinois Department of Revenue

2020 Schedule IL-WIT Illinois Income Tax Withheld

Attach to your Form IL-1040. If you have more than five withholding forms, complete multiple copies of this schedule. IL Attachment No. 31

Use the reference for Column A shown in the chart below.

Form Type	Letter Code for Column A	Form Type	Letter Code for Column A
W-2	W	1099-DIV	D
W-2G	WG	1099-INT	I
1099-R	R	1042-S	S
1099-G	G	1099-B	В
1099-MISC	М	1099-K	K
1099-OID	0	1099-NEC	N

Step 1: Provide your withholding records (include all W-2 and 1099 forms that show Illinois withholding)

SAI KRISHNA KANCHARLA		7 6	0 _	. 7	8	_ 5	:	2 9	0		
Your name as shown on Form IL-1040		Your Social Security number									
Column A Column B Form type Employer/Payer Identification Number	Colun Federal Wages, W Distributions, Con	innings, Gros		Column D Illinois Wages, Winnings, Gross Distributions, Compensation, etc.					nn E ncome nheld		
1W74-3169813 000	_ \$64	4,355 •00	\$_		64,35	<u>5</u> • 00	\$_	2,	955 •00		
2	_ \$	<u>•00</u>	\$_			<u>•00</u>	\$_		<u>•00</u>		
3	_ \$	• <u>00</u>	\$_			<u>•00</u>	\$_		<u>•00</u>		
4	_ \$	• <u>00</u>	\$_			<u>•00</u>	\$_		<u>•00</u>		
5	_ \$	•00	\$_			<u>•00</u>	\$_		<u>•00</u>		

Step 2: Provide spouse's withholding records (include all W-2 and 1099 forms that show Illinois withholding)

Your spouse's name as shown on Form IL-1040

Your spouse's Social Security number

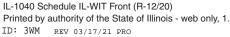
	Column A Form type	Column B Employer/Payer Identification Number	Federal Wages	umn C , Winnings, Gross compensation, etc.	Co Illinois Wage Distributions,	Column E Illinois Income Tax Withheld		
6			_ \$	•00	\$	•00	\$	•00
7			_ \$	•00	\$	•00	\$	<u>•00</u>
8			- \$	•00	\$	<u>•00</u>	\$	<u>•00</u>
9			_ \$	•00	\$	•00	\$	<u>•00</u>
10			_ \$	<u>•00</u>	\$	<u>•00</u>	\$	•00

Step 3: Total Illinois withholding

11 Add the amounts in Column E for Lines 1 through 10 (and the amounts from Column E of any additional copies you attached). This is the total amount of your Illinois income tax withheld. Enter this amount here and on Form IL-1040, Line 25.

11 \$ 2,955**.00**

→ Attach all Schedules IL-WIT to your IL-1040. ←





Illinois Department of Revenue

					_								_							
Submission ID																				

2020 IL-8453 Illinois Individual Income Tax Electronic Filing Declaration

(Do not mail Form IL-8453 Step 1: Provide taxpayer information		iment of Revenue u	nless it is requested for revie	;w.)
SAI KRISHNA		HARLA	7 6 0 _ 7 8 _	5 2 9 0
•	st name (and last name if differen	nt) Last name	Social Security number	
Print 510 S POPLAR ST				
type Mailing address			Spouse's Social Security number	
CARBONDALE	IL	62901	<u>(618) 969-0015</u>	
City	State	ZIP	Daytime phone number	
Step 2: Complete information from	tax return			
1 Net income from Form IL-1040, Line	11		1	57,651 00
2 Tax from Form IL-1040, Line 14			2	<u>2,854</u> 1 <u>00</u>
3 Illinois Income Tax withheld from For		enter "0" if none)	3	2,955 00
4 Overpayment from Form IL-1040, Lir			4	101 I 00
5 Total amount due from Form IL-1040		al filia a caractale.	5	I_ <u>00</u>
6 Filing status: X Single Marrie	d filing jointly Marrie	d filing separately \	/vidowed Head of household	
Routing no. (RN): 0 7 1 0 Routing no. (RN): 0 7 1 0 Account no. (AN): 1 1 6 3 Type of account: X Checking Date the payment is to be electronicated amount: Rectronic funds withdrawal amount: Name on account: Step 4: Taxpayer declaration and significant accounts.	3 9 0 1 8 Savings ally withdrawn://_		and, if applicable, Step 3.)	
correct. If I have filed a joint return	, this is an irrevocable ap	pointment of the other s	clare the information on Lines 7 thr spouse as an agent to receive the r	efund.
withdrawal as designated in the e	ectronic portion of my 20 lectronic overpayment of	20 Illinois Individual Inco	agent to initiate an ACH electronic ome Tax return. I authorize the fina ntial information necessary to answ	ncial institutions
I do not want direct deposit of my	refund, or an electronic fu	unds withdrawal (direct o	debit) of my balance due.	
Under penalties of perjury, I declare the into originator (ERO) are identical. To the best and accompanying information may be see been accepted or rejected. If rejected, I au Sign	of my knowledge, my retu nt to IDOR by my ERO. I a	rn is true, correct, and co authorize IDOR to inform	omplete. I consent that my return, the my ERO and/or the transmitter whe	nis declaration, en my return has
here Your signature	Date	Spouse's signatu	re (if joint return, both must sign)	Date
Step 5: Electronic return originator I declare that I have examined this taxpay have followed all requirements of this propand accompanying information are true, or	rer's electronic Form IL-10 gram and declare, under	arer declaration and 040, the information on t	signature his Form IL-8453, and accompany	
		04/08/2021	Check if paid preparer: 🗵 (S	ee instructions.)
ERO's signature		Date	· · · · · · · · · · · · · · · · · ·	•
ERO GLOBAL TAXES LLC			$\frac{P}{V_{\text{total}}PT_{\text{TM}}^{\text{TM}}} = \frac{0}{2} = \frac{0}{8} = \frac{2}{2}$	7 0 3
I in its name or your name it self-employed			Your PTIN	
only 2530 Pebble Creek Ln Mailing address			<u>301_0_1_7</u> Federal employer identification numl	1 9 6
Cumming	GA	30041	(678) 965-9522	JOI (I LIIV)
City	State	ZIP	Daytime phone number	
· ·			-9: -	

Step 6: Attach required documents (e.g., W-2 forms, 1099 forms, IL-1310).

<u>Do not mail</u> Form IL-8453 and these documents unless requested for review.

