Illinois Department of Revenue 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

0.0									
	1986 9-97-6448 OSH KUMAR								
14	20 STONEBRIDGE CIR N6	ANG PERSONAL	KARNASTINET KAR	AND					
WH	EATON IL 60189 DUPAGE								
B C	Filing status: Single Married filing jointly Married filing separately Wide Check If someone can claim you, or your spouse if filing jointly, as a dependent. See instruct Check the box if this applies to you during 2020: Nonresident - Attach Sch. NR	ctions. 🛛 You	Spouse						
D		art-year reside		e dollars only)					
Ste 1 2 3 4	p 2: Income Federal adjusted gross income from your federal Form 1040 or 1040-SR, Line 11. Federally tax-exempt interest and dividend income from your federal Form 1040 or 1040 Other additions. Attach Schedule M. Total income . Add Lines 1 through 3.	-SR, Line 2a.	1 2 3 4	<u>29,920.00</u> .00 29,920.00 29,920.00					
Ste	p 3: Base Income								
5	Social Security benefits and certain retirement plan income								
-	received if included in Line 1. Attach Page 1 of federal return.	5	.00						
6	Illinois Income Tax overpayment included in federal Form 1040 or 1040-SR,	6	00						
7	Schedule 1, Ln. 1. Other subtractions. Attach Schedule M.	6 7	<u> </u>						
-	Check if Line 7 includes any amount from Schedule 1299-C.		100						
8	Add Lines 5, 6, and 7. This is the total of your subtractions.		8	.00					
9 Illinois base income. Subtract Line 8 from Line 4. 9 29,920.00									
	 p 4: Exemptions a Enter the exemption amount for yourself and your spouse. See instructions. b Check if 65 or older: ☐ You + ☐ Spouse # of checkboxes X \$1,000 = c Check if legally blind: ☐ You + ☐ Spouse # of checkboxes X \$1,000 = # of	b							
	d If you are claiming dependents, enter the amount from Schedule IL-E/EIC, Step 2, Line 1.		0						
	Attach Schedule IL-E/EIC. Exemption allowance. Add Lines a through d.	d	0 <u>.00</u> 10	2,325.00					
Sto	· · · · · · · · · · · · · · · · · · ·		10	2,323.00					
	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.	Attach Schedule	e NR. 11	27,595.00					
12	Residents: Multiply Line 11 by 4.95% (.0495). Cannot be less than zero.								
	Nonresidents and part-year residents: Enter the tax from Schedule NR.		12	1,366.00					
13 14	Recapture of investment tax credits. Attach Schedule 4255. Income tax. Add Lines 12 and 13. Cannot be less than zero.	-	13 14	<u>.00</u> 1,366.00					
	14 Income tax. Add Lines 12 and 13. Cannot be less than zero. 14 1,300.00 Step 6: Tax After Nonrefundable Credits 14 1,300.00								
5ie 15	Income tax paid to another state while an Illinois resident. Attach Schedule CR.	15	.00						
-	Property tax and K-12 education expense credit amount from Schedule ICR.								
	Attach Schedule ICR.	16	.00						

Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table

This form is authorized as outlined under the Illinois In-

come 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.

20 Household employment tax. See instructions.

in the instructions. Do not leave blank.

Total Tax. Add Lines 19, 20, 21, and 22.

17

00

18

19

20

21

22

23

0.00

.00

0.00

.00 1,366.00

1,366.00

Step 7: Other Taxes

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

Staple W-2 and 1099 forms here

Staple your check and IL-1040-V

21

22

23



24 Tot	tal tax from Page 1	, Line 23.					24	1,366.00	
Step 8:	Payments and	Refundabl	e Credit						
25 Illino	ois Income Tax with	held. Attacl	h Schedule IL-W	IT.		25 1, ·	481.00		
26 Esti	Estimated payments from Forms IL-1040-ES and IL-505-I,								
inclu	including any overpayment applied from a prior year return. 26						.00		
	27 Pass-through withholding. Attach Schedule K-1-P or K-1-T. 27						.00		
					ttach Schedule IL-E/EIC.	28	.00		
	al payments and r	efundable o	credit. Add Lines	25 through	28.		29	1,481.00	
Step 9:									
	ne 29 is greater thar						30	115.00	
	ne 24 is greater thar						31	.00	
				•	ations - Only com		or late-paym	ent penalty	
					y charitable dona				
	-payment penalty f					32	.00		
	Check if at least t				•				
	- · ·			•	ntly living in a nursing			0	
сГ	Attach Form IL-2		received eveniy	auring the y	ear and you annualiz	ed your income of	1 Form IL-221	0.	
dг			d to filo on Illino	ic Individual	Income Tax return in	the provious tax y	oor		
	Intary charitable do					33			
	al penalty and don					00	<u></u> 34	.00	
	1: Refund								
•		on Line 20	and this amount	ia araatar th	an Line 04 aubtract I	ine 04 from Line (20		
-	s is your overpaym		and this amount	is greater the	an Line 34, subtract L	Line 34 from Line 3	30. 35	115.00	
				back one boy	on Line 37. See instr	ructions	35 <u></u> 36	115.00	
	-					uctions.	00	110.00	
	oose to receive my	-	- :						
a 🗹	I direct deposit - €	Complete th	le information be	1 1 1					
	Rou	uting numbe	r 0 7 1 9	047	7 9 × Ch	ecking or Savi	ngs		
	Acc	ount numbe	r 1 9 9 3	7 7 4	56074				
ь Г									
DL	http://tax.illinois	al income la s.gov/Debit	Card prior to ma	king this ele	owledge I have review	wed the card inform	nation found a	it	
сĽ	paper check.	•	·	0					
38 Amo	ount to be credited	forward. Su	btract Line 36 fro	om Line 35. S	See instructions.		38	.00	
Step 12	2: Amount You O)we							
•	ou have an amount		add Lines 31 an	d 34 - or -					
-	bu have an amount				l ine 34				
•	tract Line 30 from L						39	.00	
			-						
Step 1	3: If this is a joint rel	-	• •	-	oelow. return and, to the bes	t of my knowlodge	it in true corre	at and complete	
0:00		or perjury, i s	lale mai mave e	carnineu triis		t of my knowledge,	i	-	
Sign Here						(630) 854	-2074		
	Your signature Date (mm/dd/yyy		Date (mm/dd/yyyy)	Spouse's sig	nature	Date (mm/dd/yyyy)	Daytime phone number		
Doid	RVSSMANIKUMARAPPANA			RVSSMANIKUMARAPPANA 04/04/2			Check if	P02090332	
Paid Preparer	Print/Type paid preparer's name Paid preparer's signature			r's signature	Date (mm/dd/yyyy)	self-employed Paid Preparer's PT			
Use Only	Firm's name	GLOBAL	TAXES LLC			Firm's FEIN	301017196		
	Firm's address	2530 Peb	ble Creek LnC				(646) 727-7157		
Third					()		Check if the	e Department may	
Party						discuss this return with the third			
Designee	Designee's name (please print) Designee's phone number					party designee shown in this step.			

Refer to the 2020 IL-1040 Instructions for the address to mail your return.

IL-1040 2D Back (R-12/20) Printed by authority of the State of Illinois - web only, 1. DR_____ AP_____ RR DC IR ____

REV 03/17/21 PRO

ID



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 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)

AMOSH KUMAR Your name as show	<u>1 9</u> Your Soc	9 ial Secur		9 <u>7</u> er	6	4	4	8			
Column A Form type Column B Employer/Payer Identification Number		Column C Federal Wages, Winnings, Gross Distributions, Compensation, etc.			Column D Illinois Wages, Winnings, Gross Distributions, Compensation, etc.			- 111	Column E Illinois Income Tax Withheld		
1 <u>W</u>	82-2214465	\$	29,920 .00	<u>)</u>	\$	29,93	20 •00	\$	1,48	81 .00	
2		\$	•00)	\$		•00	\$		•00	
3		\$	•00	<u>)</u>	\$		<u>•00</u>	\$		<u>•00</u>	
4		\$	•00	<u>)</u>	\$		•00	\$		•00	
5		\$	•00)	\$		•00	\$		•00	

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	Column C Federal Wages, Winnings, Gross Distributions, Compensation, etc.		Column D Illinois Wages, Winnings, Gross Distributions, Compensation, etc.		Column E Illinois Income Tax Withheld	
6		- \$	•00	\$	•00	\$	•00
7		- \$	•00	\$	•00	\$	•00
8		- \$	•00	\$	•00	\$	•00
9		- \$	•00	\$	•00	\$	•00
10		- \$	•00	\$	•00	\$	•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 \$ 1,481.00

➡ Attach all Schedules IL-WIT to your IL-1040.