

Account Transaction Summary**2019**

Name(s) as shown on return

SHRUJAN R ANDEM

Your ID Number

XXX-XX-8293

Account #1

Financial Institution CHASE
Routing Transit Number 044000037
Account Number 869805882
Account Type Checking

Federal Main Form

Federal Deposit 1,299

State Main Form(s)

IL Deposit 112

Net Deposit 1,411

PLEASE VERIFY BANK INFORMATION

1. Bank Name
2. Bank Routing Transit Number
3. Bank Account Number
4. Bank Account Type

This information is used to deposit your refund or to pay any amount due. If you have provided incorrect information, or you have closed the account, you are responsible.

I have reviewed the above information and certify that this information is correct and authorize EWM TAX LLC to use this account.

Your Signature_____
Date_____
Spouse's Signature (If Married Filing Jointly)_____
Date

Department of the Treasury Internal Revenue Service

beginning , 2019, and ending , 20

Please print or type

Identifying number (see instructions) 398-49-8293
SHRUJAN R ANDEM
Present home address (number and street or rural route). If you have a P.O. box, see instructions. 5451 N EAST RIVER RD Apt. no. 1509
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions. CHICAGO, IL 60656

Filing Status

1 [] Reserved 4 [] Reserved
2 [x] Single nonresident alien 5 [] Married nonresident alien
3 [] Reserved 6 [] Qualifying widow(er) (see instructions)
Child's name

Dependents

If more than four dependents, see instructions and check here.

Table with 5 columns: (1) First name, Last name, (2) Dependent's identifying number, (3) Dependent's relationship to you, (4) Check if qualifies for (see instr.): Child tax credit, Credit for other dependents.

Income Effectively Connected With U.S. Trade/Business

Attach Form(s) W-2, 1042-S, SSA-1042S, RRB-1042S, and 8288-A here. Also attach Form(s) 1099-R if tax was withheld.

Table with 2 columns: Description, Amount. Rows include: 8 Wages, salaries, tips, etc. Attach Form(s) W-2 (69,620); 9a Taxable interest; 10a Ordinary dividends; 11 Taxable refunds, credits, or offsets of state and local income taxes; 12 Scholarship and fellowship grants; 13 Business income or (loss); 14 Capital gain or (loss); 15 Other gains or (losses); 16a IRA distributions; 17a Pensions, and annuities; 18 Rental real estate, royalties, partnerships, trusts, etc.; 19 Farm income or (loss); 20 Unemployment compensation; 21 Other income; 22 Total income exempt by a treaty; 23 Combine the amounts in the far right column for lines 8 through 21. This is your total effectively connected income (69,620).

Adjusted Gross Income

Table with 2 columns: Description, Amount. Rows include: 24 Educator expenses; 25 Health savings account deduction; 26 Moving expenses for members of the Armed Forces; 27 Deductible part of self-employment tax; 28 Self-employed SEP, SIMPLE, and qualified plans; 29 Self-employed health insurance deduction; 30 Penalty on early withdrawal of savings; 31 Scholarship and fellowship grants excluded; 32 IRA deduction; 33 Student loan interest deduction; 34 Add lines 24 through 33 (0); 35 Adjusted Gross Income. Subtract line 34 from line 23 (69,620).

Tax and Credits

Table with 2 columns: Description, Amount. Rows include: 36 Reserved for future use; 37 Itemized deductions from page 3, Schedule A, line 8 - U.S.-India Tax Treaty (12,200); 38 Qualified business income deduction; 39 Exemptions for estates and trusts only.

Tax and Credits (continued)

Table with 3 columns: Line number, Description, and Amount. Includes lines 40-53 for Taxable income, Tax, Alternative minimum tax, and Total credits.

Other Taxes

Table with 3 columns: Line number, Description, and Amount. Includes lines 54-61 for various taxes like income tax, self-employment tax, and total tax.

Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 62-71 for federal income tax withheld, estimated tax payments, and total payments.

Refund

Direct deposit? See instructions.

Table with 3 columns: Line number, Description, and Amount. Includes lines 72-74 for refund amount, routing/account numbers, and applied tax.

Amount You Owe

Table with 3 columns: Line number, Description, and Amount. Includes lines 75-76 for amount owed and estimated tax penalty.

Third Party Designee

Form section for Third Party Designee with fields for name, phone, and PIN.

Sign Here

Keep a copy of this return for your records.

Signature area with fields for signature, date, occupation (ENGINEER), and IDPTIN.

Paid Preparer Use Only

Form section for Paid Preparer Use Only with fields for signature, date, firm name (EWM TAX LLC), and address.

Schedule A - Itemized Deductions (see instructions)

07

Taxes You Paid	1	State and local income taxes			
	a	State and local income taxes	1a		
	b	Enter the smaller of line 1a and \$10,000 (\$5,000 if box 5 is checked)			1b
Gifts to U.S. Charities	2	Gifts by cash or check. If you made any gift of \$250 or more, see instructions	2		
	3	Other than by cash or check. If you made any gift of \$250 or more, see instructions. Individuals must attach Form 8283 if line 3 is over \$500	3		
	4	Carryover from prior year	4		
	5	Add lines 2 through 4			5
	Casualty and Theft Losses	6	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions		
Other Itemized Deductions	7	Other - from list in instructions. List type and amount ▶ _____ _____ _____ _____ _____ _____			7
	Total Itemized Deductions	8	Add the amounts in the far right column for lines 1b through 7. Also, enter this amount on Form 1040-NR, line 37		8

Schedule NEC - Tax on Income Not Effectively Connected With a U.S. Trade or Business (see instructions)

Nature of income	Enter amount of income under the appropriate rate of tax (see instructions)	Enter amount of income under the appropriate rate of tax (see instructions)				
		(a) 10%	(b) 15%	(c) 30%	(d) Other (specify)	
					%	%
1 Dividends and dividend equivalents:						
a Dividends paid by U.S. corporations	1a					
b Dividends paid by foreign corporations	1b					
c Dividend equivalent payments received with respect to section 871(m) transactions	1c					
2 Interest:						
a Mortgage	2a					
b Paid by foreign corporations	2b					
c Other	2c					
3 Industrial royalties (patents, trademarks, etc.)	3					
4 Motion picture or T.V. copyright royalties	4					
5 Other royalties (copyrights, recording, publishing, etc.)	5					
6 Real property income and natural resources royalties	6					
7 Pensions and annuities	7					
8 Social security benefits	8					
9 Capital gain from line 18 below	9					
10 Gambling - Residents of Canada only. Enter net income in column (c). If zero or less, enter -0-.						
a Winnings _____						
b Losses _____	10c					
11 Gambling winnings - Residents of countries other than Canada. Note: Losses not allowed	11					
12 Other (specify) ► _____	12					
13 Add lines 1a through 12 in columns (a) through (d)	13					
14 Multiply line 13 by rate of tax at top of each column	14					
15 Tax on income not effectively connected with a U.S. trade or business. Add columns (a) through (d) of line 14. Enter the total here and on Form 1040-NR, line 54						15

Capital Gains and Losses From Sales or Exchanges of Property

Enter only the capital gains and losses from property sales or exchanges that are from sources within the United States and not effectively connected with a U.S. business. Do not include a gain or loss on disposing of a U.S. real property interest; report these gains and losses on Schedule D (Form 1040 or 1040-SR). Report property sales or exchanges that are effectively connected with a U.S. business on Schedule D (Form 1040 or 1040-SR), Form 4797, or both.	16 (a) Kind of property and description (if necessary, attach statement of descriptive details not shown below)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) LOSS If (e) is more than (d), subtract (d) from (e)	(g) GAIN If (d) is more than (e), subtract (e) from (d)
	17 Add columns (f) and (g) of line 16					17 ()	
	18 Capital gain. Combine columns (f) and (g) of line 17. Enter the net gain here and on line 9 above (if a loss, enter -0-)						18 0

Schedule OI - Other Information (see instructions)

Answer all questions

- A** Of what country or countries were you a citizen or national during the tax year? INDIA
- B** In what country did you claim residence for tax purposes during the tax year? INDIA
- C** Have you ever applied to be a green card holder (lawful permanent resident) of the United States? Yes No
- D** Were you ever:
 - 1. A U.S. citizen? Yes No
 - 2. A green card holder (lawful permanent resident) of the United States? Yes No
 If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that apply to you.
- E** If you had a visa on the last day of the tax year, enter your visa type. If you did not have a visa, enter your U.S. immigration status on the last day of the tax year. F1
- F** Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? Yes No
If you answered "Yes," indicate the date and nature of the change. ▶ _____

- G** List all dates you entered and left the United States during 2019. See instructions.
Note: If you are a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, check the box for Canada or Mexico and skip to item H Canada Mexico

Date entered United States mm/dd/yy	Date departed United States mm/dd/yy	Date entered United States mm/dd/yy	Date departed United States mm/dd/yy

- H** Give number of days (including vacation, nonworkdays, and partial days) you were present in the United States during:
2017 365, 2018 365, and 2019 365.
- I** Did you file a U.S. income tax return for any prior year? Yes No
If "Yes," give the latest year and form number you filed . . . ▶ 2018 FORM 1040NR
- J** Are you filing a return for a trust? Yes No
If "Yes," did the trust have a U.S. or foreign owner under the grantor trust rules, make a distribution or loan to a U.S. person, or receive a contribution from a U.S. person? Yes No
- K** Did you receive total compensation of \$250,000 or more during the tax year? Yes No
If "Yes," did you use an alternative method to determine the source of this compensation? Yes No
- L** Income Exempt from Tax - If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties.
 - 1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.

(a) Country	(b) Tax treaty article	(c) Number of months claimed in prior tax years	(d) Amount of exempt income in current tax year

- (e) Total.** Enter this amount on Form 1040-NR, line 22. Do not enter it on line 8 or line 12 ▶ _____
- 2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? Yes No
- 3. Are you claiming treaty benefits pursuant to a Competent Authority determination? Yes No
If "Yes," attach a copy of the Competent Authority determination letter to your return.
- M** Check the applicable box if:
 - 1. This is the first year you are making an election to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions ▶
 - 2. You have made an election in a previous year that has not been revoked, to treat income from real property located in the United States as effectively connected with a U.S. trade or business under section 871(d). See instructions ▶

Illinois Department of Revenue
2019 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

398-49-8293
 1993
 SHRUJAN R ANDEM



5451 N EAST RIVER RD APT 1509
 CHICAGO, IL 60656
 COOK

- B** Filing status: Single Married filing jointly Married filing separately Widowed Head of household
C **Check** if someone can claim you, or your spouse if filing jointly, as a dependent. See instructions. You Spouse
D **Check** the box if this applies to you during 2019: Nonresident - **Attach** Sch. NR Part-year resident - **Attach** Sch. NR

Step 2: Income

1	Federal adjusted gross income from your federal Form 1040 or 1040-SR, Line 8b.	1	(Whole dollars only) 69,620.00
2	Federally tax-exempt interest and dividend income from your federal Form 1040 or 1040-SR, Line 2a.	2	.00
3	Other additions. Attach Schedule M.	3	.00
4	Total income. Add Lines 1 through 3.	4	69,620.00

Step 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, Schedule 1, Ln. 1.	6	.00
7	Other subtractions. Attach Schedule M. Check if Line 7 includes any amount from Schedule 1299-C. <input type="checkbox"/>	7	.00
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	69,620.00

Step 4: Exemptions

10 a	Enter the exemption amount for yourself and your spouse. See instructions.	a	2,275.00
b	Check if 65 or older: <input type="checkbox"/> You + <input type="checkbox"/> Spouse # of checkboxes X \$1,000 =	b	.00
c	Check if legally blind: <input type="checkbox"/> You + <input type="checkbox"/> Spouse # of checkboxes X \$1,000 =	c	.00
d	If you are claiming dependents, enter the amount from Schedule IL-E/EIC, Step 2, Line 1. Attach Schedule IL-E/EIC.	d	.00
	Exemption allowance. Add Lines a through d.	10	2,275.00

Step 5: Net Income and Tax

11	Residents: Net income. Subtract Line 10 from Line 9. Nonresidents and part-year residents: Enter the Illinois net income from Schedule NR. Attach. Schedule NR.	11	67,345.00
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	3,334.00
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	3,334.00

Step 6: Tax After Nonrefundable Credits

15	Income tax paid to another state while an Illinois resident. Attach Schedule CR.	15	.00
16	Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR.	16	.00
17	Credit amount from Schedule 1299-C. Attach Schedule 1299-C.	17	.00
18	Add Lines 15, 16, and 17. This is the total of your credits. Cannot exceed the tax amount on Line 14.	18	.00
19	Tax after nonrefundable credits. Subtract Line 18 from Line 14.	19	3,334.00

Step 7: Other Taxes

20	Household employment tax. See instructions.	20	.00
21	Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table in the instructions. Do not leave blank.	21	0.00
22	Compassionate Use of Medical Cannabis Program Act and sale of assets by gaming licensee surcharges.	22	.00
23	Total Tax. Add Lines 19, 20, 21, and 22.	23	3,334.00



NO HANDWRITTEN ENTRIES ON THIS FORM

Staple W-2 and 1099 forms here

Staple your check and IL-1040-V

NO HANDWRITTEN ENTRIES OTHER THAN SIGNATURE ON THIS FORM



24 Total tax from Page 1, Line 23.

24 3,334.00

Step 8: Payments and Refundable Credit

- 25 Illinois Income Tax withheld. **Attach** Schedule IL-WIT. 25 3,446.00
- 26 Estimated payments from Forms IL-1040-ES and IL-505-I, 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
- 28 Earned Income Credit from Schedule IL-E/EIC, Step 4, Line 8. **Attach** Schedule IL-E/EIC. 28 .00
- 29 **Total payments and refundable credit.** Add Lines 25 through 28. 29 3,446.00

Step 9: Total

- 30 If Line 29 is greater than Line 24, subtract Line 24 from Line 29. 30 112.00
- 31 If Line 24 is greater than Line 29, subtract Line 29 from Line 24. 31 .00

Step 10: Underpayment of Estimated Tax Penalty and Donations-Only complete Step 10 for late-payment penalty for underpayment of estimated tax or to make a voluntary charitable donation.

- 32 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 permanently living in a nursing home.
 - c Check if your income was not received evenly during the year and you annualized your income on Form IL-2210. **Attach** Form IL-2210.
 - d Check if you were not required to file an Illinois Individual Income Tax return in the previous tax year.
- 33 Voluntary charitable donations. **Attach** Schedule G. 33 .00
- 34 **Total penalty and donations.** Add Lines 32 and 33. 34 .00

Step 11: Refund

- 35 If you have an amount on Line 30 and this amount is greater than Line 34, subtract Line 34 from Line 30. This is your **overpayment**. 35 112.00
- 36 Amount from Line 35 you want **refunded to you**. Check **one** box on Line 37. See instructions. 36 112.00
- 37 I choose to receive my refund by
 - a **direct deposit** - Complete the information below if you check this box.

Routing number 044000037 Checking or Savings
 Account number 869805882
 - b **Illinois Individual Income Tax refund debit card.** I acknowledge I have reviewed the card information found at <http://tax.illinois.gov/DebitCard> prior to making this election.
 - c **paper check.**
- 38 Amount to be **credited forward**. Subtract Line 36 from Line 35. See instructions. 38 .00

Step 12: Amount You Owe

- 39 If you have an amount on Line 31, add Lines 31 and 34. - or - If you have an amount on Line 30 and this amount is less than Line 34, subtract Line 30 from Line 34. This is the **amount you owe**. See instructions. 39 0.00

Step 13: If this is a joint return, both you and your spouse must sign below.

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Sign Here				214-709-0320
	Your signature	Date (mm/dd/yyyy)	Spouse's signature	Date (mm/dd/yyyy)
Paid Preparer Use Only	SRIDHAR KUMAR		02-25-2020	
	Print/Type paid preparer's name		Paid preparer's signature	
	Firm's name ▶ EWM TAX LLC		Firm's FEIN ▶ 38-4054887	
	Firm's address ▶ 16192 Coastal Highway Lewes, DE 19958		Firm's phone ▶ 703-468-1139	
Third Party Designee	Designee's name (please print)			<input type="checkbox"/> Check if the Department may discuss this return with the third party designee shown in this step.
	Designee's phone number			

Refer to the 2019 IL-1040 Instructions for the address to mail your return.