

IRS e-file Signature Authorization

(Rev. August 2020)

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service

- ▶ ERO must obtain and retain completed Form 8879.
- ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID) ▶

Taxpayer's name DEEPAK GUDDITI	Social security number 877-55-9228
Spouse's name	Spouse's social security number

DO NOT FILE

Part I Tax Return Information – Tax Year Ending December 31, (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1 Adjusted gross income	1	77,493.
2 Total tax	2	10,107.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	12,005.
4 Amount you want refunded to you	4	3,448.
5 Amount you owe	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537**. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

- I authorize GLOBAL TAXES LLC to enter or generate my PIN **5 9 2 2 8** as my signature on the income tax return (original or amended) I am now authorizing. ERO firm name Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ _____ Date ▶ _____

Spouse's PIN: check one box only

- I authorize _____ to enter or generate my PIN _____ as my signature on the income tax return (original or amended) I am now authorizing. ERO firm name Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ _____ Date ▶ _____

Practitioner PIN Method Returns Only—continue below

Part III Certification and Authentication – Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. **5 8 7 2 7 8 6 1 9 8 9**
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

DO NOT FILE

ERO's signature ▶ _____ Date ▶ _____

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

Filing Status [X] Single [] Married filing jointly [] Married filing separately (MFS) [] Head of household (HOH) [] Qualifying widow(er) (QW)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent

Your first name and middle initial: DEEPAK
Last name: GUDDITI
Your social security number: 877-55-9228
If joint return, spouse's first name and middle initial:
Last name:
Spouse's social security number:

Home address (number and street). If you have a P.O. box, see instructions.
4948 COMMON MARKET PL
Apt. no.
City, town, or post office. If you have a foreign address, also complete spaces below.
DUBLIN
State: OH
ZIP code: 43016
Foreign country name:
Foreign province/state/county:
Foreign postal code:
Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.
[] You [] Spouse

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? [] Yes [X] No

Standard Deduction
Someone can claim: [] You as a dependent [] Your spouse as a dependent
[] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: [] Were born before January 2, 1956 [] Are blind Spouse: [] Was born before January 2, 1956 [] Is blind

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents. Includes instructions for dependents.

Main tax calculation table with 15 rows. Includes sections for Attach Sch. B if required, Standard Deduction for, and final taxable income calculation. Total income: 86,095. Adjusted gross income: 77,493. Standard deduction: 12,400. Taxable income: 65,093.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	10,107.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	10,107.
19	Child tax credit or credit for other dependents	19	
20	Amount from Schedule 3, line 7	20	
21	Add lines 19 and 20	21	
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	10,107.
23	Other taxes, including self-employment tax, from Schedule 2, line 10	23	0.
24	Add lines 22 and 23. This is your total tax	24	10,107.
25	Federal income tax withheld from:		
a	Form(s) W-2	25a	12,005.
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	12,005.
26	2020 estimated tax payments and amount applied from 2019 return	26	
27	Earned income credit (EIC) NO	27	
28	Additional child tax credit. Attach Schedule 8812	28	
29	American opportunity credit from Form 8863, line 8	29	
30	Recovery rebate credit. See instructions	30	1,550.
31	Amount from Schedule 3, line 13	31	
32	Add lines 27 through 31. These are your total other payments and refundable credits	32	1,550.
33	Add lines 25d, 26, and 32. These are your total payments	33	13,555.

Refund

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,448.
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	3,448.
b	Routing number 1 1 1 0 0 0 6 1 4	c	Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings
d	Account number 7 9 2 6 8 8 8 3 5		
36	Amount of line 34 you want applied to your 2021 estimated tax	36	

Amount You Owe

For details on how to pay, see instructions.

37	Subtract line 33 from line 24. This is the amount you owe now	37	
38	Estimated tax penalty (see instructions)	38	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions **Yes**. Complete below. **No**

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation SOFTWARE ENGINEER	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
Phone no.	Email address		

Paid Preparer Use Only

Preparer's name RVSSMANIKUMARAPPANA	Preparer's signature RVSSMANIKUMARAPPANA	Date 01/27/2021	PTIN P02090332	Check if: <input type="checkbox"/> Self-employed
Firm's name GLOBAL TAXES LLC	Firm's address 2530 Pebble Creek Ln Cumming GA 30041			Phone no. (646) 727-7157 Firm's EIN 30-1017196

• If you have a qualifying child, attach Sch. EIC.
• If you have nontaxable combat pay, see instructions.

**SCHEDULE 1
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

▶ **Attach to Form 1040, 1040-SR, or 1040-NR.**
▶ **Go to www.irs.gov/Form1040 for instructions and the latest information.**

OMB No. 1545-0074

2020
Attachment
Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
DEEPAK GUDDITI

Your social security number
877-55-9228

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶ _____		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-8,602.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ▶ _____ _____	8	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	-8,602.

Part II Adjustments to Income

10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	11	
12	Health savings account deduction. Attach Form 8889	12	
13	Moving expenses for members of the Armed Forces. Attach Form 3903	13	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15	Self-employed SEP, SIMPLE, and qualified plans	15	
16	Self-employed health insurance deduction	16	
17	Penalty on early withdrawal of savings	17	
18a	Alimony paid	18a	
b	Recipient's SSN ▶ _____		
c	Date of original divorce or separation agreement (see instructions) ▶ _____		
19	IRA deduction	19	
20	Student loan interest deduction	20	
21	Tuition and fees deduction. Attach Form 8917	21	
22	Add lines 10 through 21. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10a	22	

SCHEDULE E
(Form 1040)

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

2020

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Attachment
Sequence No. **13**

▶ Go to www.irs.gov/ScheduleE for instructions and the latest information.

Name(s) shown on return

Your social security number

DEEPAK GUDDITI

877-55-9228

Part I **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

A Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions Yes No

B If "Yes," did you or will you file required Form(s) 1099? Yes No

1a	Physical address of each property (street, city, state, ZIP code)				
A	MIYAPUR HYDERABAD TELANGANA IN 500049				
B					
C					
1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	1		365	0	<input type="checkbox"/>
B					<input type="checkbox"/>
C					<input type="checkbox"/>

Type of Property:

- 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
- 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

Income:		Properties:		A	B	C
3	Rents received	3		550.		
4	Royalties received	4				
Expenses:						
5	Advertising	5				
6	Auto and travel (see instructions)	6				
7	Cleaning and maintenance	7		2,400.		
8	Commissions.	8		450.		
9	Insurance	9				
10	Legal and other professional fees	10				
11	Management fees	11				
12	Mortgage interest paid to banks, etc. (see instructions)	12				
13	Other interest.	13				
14	Repairs.	14		3,180.		
15	Supplies	15		1,677.		
16	Taxes	16				
17	Utilities.	17		1,445.		
18	Depreciation expense or depletion	18				
19	Other (list) ▶	19				
20	Total expenses. Add lines 5 through 19	20		9,152.		
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21		-8,602.		
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(-8,602.)	()
23a	Total of all amounts reported on line 3 for all rental properties	23a		550.		
b	Total of all amounts reported on line 4 for all royalty properties	23b				
c	Total of all amounts reported on line 12 for all properties	23c				
d	Total of all amounts reported on line 18 for all properties	23d				
e	Total of all amounts reported on line 20 for all properties	23e		9,152.		
24	Income. Add positive amounts shown on line 21. Do not include any losses	24				
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	(8,602.)		
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2	26		-8,602.		

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2020

We encourage all taxpayers to pay electronically whenever possible.

By paying electronically, you can . . .

- Avoid mailing delays.
- Save a trip to the post office and the price of a stamp.
- Get immediate confirmation of your payment.

Visit **mytax.illinois.gov** to electronically pay.

If you prefer to pay the amount you owe on your Form IL-1040, Individual Income Tax Return, by mail, complete the IL-1040-V at the bottom of this page and send it, along with your payment, to the address on the voucher.



Illinois Department of Revenue
2020 IL-1040-V ID: 3WM
Payment Voucher for Individual Income Tax

REV 01/11/21 PRO

877-55-9228

Your Social Security number

Spouse's Social Security number

Your payment is due April 15, 2021.

\$ 31.00
Payment amount

DEEPAK GUDDITI
4948 COMMON MARKET PL
DUBLIN OH 43016

Make your check payable to and mail to
ILLINOIS DEPARTMENT OF REVENUE
SPRINGFIELD IL 62726-0001

Write your Social Security number(s) on your check.



104081220 1 2 877559228 3 07210404 1 000003100



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

1993

877-55-9228

DEEPAK

GUDDITI

4948 COMMON MARKET PL

DUBLIN

OH

43016



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 2020: Nonresident - Attach Sch. NR Part-year resident - Attach Sch. NR

Step 2: Income

(Whole dollars only)

1	Federal adjusted gross income from your federal Form 1040 or 1040-SR, Line 11.	1	77,493.00
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	77,493.00

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	77,493.00

Step 4: Exemptions

10 a	Enter the exemption amount for yourself and your spouse. See instructions.	a	2,325.00
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	0.00
	Exemption allowance. Add Lines a through d.	10	2,325.00

Step 5: Net Income and Tax

11	Residents: Net income. Subtract Line 10 from Line 9.	11	17,751.00
12	Residents: Multiply Line 11 by 4.95% (.0495). Cannot be less than zero. Nonresidents and part-year residents: Enter the Illinois net income from Schedule NR. Attach Schedule NR.	12	879.00
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	879.00

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	0.00
19	Tax after nonrefundable credits. Subtract Line 18 from Line 14.	19	879.00

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	879.00

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

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.



Staple W-2 and 1099 forms here

Staple your check and IL-1040-V



Illinois Department of Revenue
2020 Schedule NR
 Attach to your Form IL-1040

**Nonresident and Part-Year Resident
 Computation of Illinois Tax**

IL Attachment No. 2

DEEPAK GUDDITI

Your name as shown on your Form IL-1040

8 7 7 - 5 5 - 9 2 2 8
 Your Social Security number

Step 1: Provide the following information

- Were you, or your spouse if "married filing jointly," a full-year resident of Illinois during the tax year?
 Yes No If you answered "Yes," you cannot use this form (see instructions).
- If you, or your spouse if "married filing jointly," were a part-year resident during the tax year, tell us your residency dates for 2020.
a I lived in **Illinois** from 01 / 01 / 20 to 02 / 29 / 20 I lived in Ohio from 03 / 01 / 20 to 12 / 31 / 20
 Month Day Year Month Day Year State Month Day Year Month Day Year
b My spouse lived in **Illinois** from ___ / ___ / 20 to ___ / ___ / 20, and _____ from ___ / ___ / 20 to ___ / ___ / 20
 Month Day Year Month Day Year State Month Day Year Month Day Year
- If you were a resident of any of the states listed below during the tax year, if you were in Illinois only to accompany your spouse who was in the military, or if you elected to use your service member spouse's state of residence for tax purposes, check the appropriate box.
 Iowa Kentucky Michigan Wisconsin Military Spouse
- List any state other than Illinois or any states already indicated on Line 2 or 3 above, that you claimed residency for tax purposes in 2020. Enter the two-letter abbreviation of that state.

Step 2: Complete Form IL-1040

Complete Lines 1 through 10 of your Form IL-1040, Individual Income Tax Return, as if you were a full-year Illinois resident. Then, complete the remainder of this schedule following the instructions for your residency. **Attach Schedule NR to your Form IL-1040.**

Step 3: Figure the Illinois portion of your federal adjusted gross income

Enter the amounts from your federal return in Column A. Before completing Column B, read the Column B instructions.

	Column A Federal Total	Column B Illinois Portion
5 Wages, salaries, tips, etc. (federal Form 1040 or 1040-SR, Line 1)	<u>5</u> 86,095.00	<u>18,300.00</u>
6 Taxable interest (federal Form 1040 or 1040-SR, Line 2b)	<u>6</u> .00	<u>.00</u>
7 Ordinary dividends (federal Form 1040 or 1040-SR, Line 3b)	<u>7</u> .00	<u>.00</u>
8 Taxable refunds, credits, or offsets of state and local income taxes (federal Form 1040 or 1040-SR, Schedule 1, Line 1)	<u>8</u> .00	<u>.00</u>
9 Alimony received (federal Form 1040 or 1040-SR, Schedule 1, Line 2a)	<u>9</u> .00	<u>.00</u>
10 Business income or loss (federal Form 1040 or 1040-SR, Schedule 1, Line 3)	<u>10</u> .00	<u>.00</u>
11 Capital gain or loss (federal Form 1040 or 1040-SR, Line 7)	<u>11</u> .00	<u>.00</u>
12 Other gains or losses (federal Form 1040 or 1040-SR, Schedule 1, Line 4)	<u>12</u> .00	<u>.00</u>
13 Taxable IRA distributions (federal Form 1040 or 1040-SR, Line 4b)	<u>13</u> .00	<u>.00</u>
14 Pensions and annuities (federal Form 1040 or 1040-SR, Line 5b)	<u>14</u> .00	<u>.00</u>
15 Rental real estate, royalties, partnerships, S corporations, trusts, etc. (federal Form 1040 or 1040-SR, Schedule 1, Line 5)	<u>15</u> -8,602.00	<u>0.00</u>
16 Farm income or loss (federal Form 1040 or 1040-SR, Schedule 1, Line 6)	<u>16</u> .00	<u>.00</u>
17 Unemployment compensation and Alaska Permanent Fund dividends (federal Form 1040 or 1040-SR, Schedule 1, Line 7)	<u>17</u> .00	<u>.00</u>
18 Taxable Social Security benefits (federal Form 1040 or 1040-SR, Line 6b)	<u>18</u> .00	<u>.00</u>
19 Other income. See instructions. (federal Form 1040 or 1040-SR, Schedule 1, Line 8) Include winnings from the Illinois State Lottery as Illinois income in Column B.	<u>19</u> .00	<u>.00</u>
20 Add Column B, Lines 5 through 19. This is the Illinois portion of your federal total income.	20 18,300.00	<u>18,300.00</u>

Continue with Step 3 on Page 2 →



Step 3: Continued

		Column A Federal Total	Column B Illinois Portion	
Adjustments to Income	21 Enter the Illinois portion of your federal total income from Page 1, Step 3, Line 20.	21	18,300.00	
	22 Educator expenses (federal Form 1040 or 1040-SR, Schedule 1, Line 10)	22	.00	
	23 Certain business expenses of reservists, performing artists, and fee-basis government officials (federal Form 1040 or 1040-SR, Schedule 1, Line 11)	23	.00	
	24 Health savings account deduction (federal Form 1040 or 1040-SR, Schedule 1, Line 12)	24	.00	
	25 Moving expenses for members of the Armed Forces (federal Form 1040 or 1040-SR, Schedule 1, Line 13)	25	.00	
	26 Deductible part of self-employment tax (federal Form 1040 or 1040-SR, Schedule 1, Line 14)	26	.00	
	27 Self-employed SEP, SIMPLE, and qualified plans (federal Form 1040 or 1040-SR, Schedule 1, Line 15)	27	.00	
	28 Self-employed health insurance deduction (federal Form 1040 or 1040-SR, Schedule 1, Line 16)	28	.00	
	29 Penalty on early withdrawal of savings (federal Form 1040 or 1040-SR, Schedule 1, Line 17)	29	.00	
	30 Alimony paid (federal Form 1040 or 1040-SR, Schedule 1, Line 18a)	30	.00	
	31 IRA deduction (federal Form 1040 or 1040-SR, Schedule 1, Line 19)	31	.00	
	32 Student loan interest deduction (federal Form 1040 or 1040-SR, Schedule 1, Line 20)	32	.00	
	33 Tuition and fees (federal Form 1040 or 1040-SR, Schedule 1, Line 21)	33	.00	
	34 RESERVED	34		
	35 Other adjustments (see instructions)	35	.00	
	36 Add Column B, Lines 22 through 35. This is the Illinois portion of your federal adjustments to income.	36	.00	
	37 Enter your adjusted gross income as reported on your Form IL-1040, Line 1.	37	77,493.00	
	38 Subtract Line 36 from Line 21. This is the Illinois portion of your federal adjusted gross income.	38		18,300.00

Step 4: Figure your Illinois additions and subtractions

In Column A, enter the total amounts from your Form IL-1040. You must read the instructions for Column B to properly complete this step.

		Column A Form IL-1040 Total	Column B Illinois Portion	
Illinois Adjustments	39 Federally tax-exempt interest and dividend income (Form IL-1040, Line 2)	39	.00	
	40 Other additions (Form IL-1040, Line 3)	40	.00	
	41 Add Column B, Lines 38, 39, and 40. This is the Illinois portion of your total income.	41		18,300.00
	42 Federally taxed Social Security and retirement income (Form IL-1040, Line 5)	42	.00	
	43 Illinois Income Tax overpayment included on your fed. Form 1040 or 1040-SR, Schedule 1, Line 1. (Form IL-1040, Line 6)	43	.00	
	44 Other subtractions (Form IL-1040, Line 7)	44	.00	
	45 Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.	45		.00

Step 5: Figure your Illinois income and tax

Tax Calculations	46 Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income.	46	18,300.00	
	47 Enter the base income from Form IL-1040, Line 9.	47	77,493.00	
	48 Divide Line 46 by Line 47 (round to three decimal places). Enter the appropriate decimal. If Line 46 is greater than Line 47, enter 1.000.	48	0.236	
	49 Enter your exemption allowance from your Form IL-1040, Line 10.	49	2,325.00	
	50 Multiply Line 49 by the decimal on Line 48. This is your Illinois exemption allowance.	50		549.00
	51 Subtract Line 50 from Line 46. This is your Illinois net income . Enter the amount here and on your Form IL-1040, Line 11. →	51		17,751.00
	52 Multiply the amount on Line 51 by 4.95% (.0495). This amount may not be less than zero. Enter the amount here and on your Form IL-1040, Line 12. →	52		879.00



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	B
1099-MISC	M	1099-K	K
1099-OID	O	1099-NEC	N

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

DEEPAK GUDDITI

Your name as shown on Form IL-1040

8 7 7 - 5 5 - 9 2 2 8
Your 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
1 W	45-3507182 000	\$ 86,095.00	\$ 18,300.00	\$ 848.00
2		\$.00	\$.00	\$.00
3		\$.00	\$.00	\$.00
4		\$.00	\$.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 \$ 848.00

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



Illinois Department of Revenue

Submission ID boxes

2020 IL-8453 Illinois Individual Income Tax Electronic Filing Declaration

(Do not mail Form IL-8453 to the Illinois Department of Revenue unless it is requested for review.)

Step 1: Provide taxpayer information

DEEPAK GUDDITI 8 7 7 - 5 5 - 9 2 2 8
First name and middle initial Spouse's first name (and last name if different) Last name Social Security number
4948 COMMON MARKET PL Mailing address
DUBLIN OH 43016 (903) 422-0383
City State ZIP Daytime phone number

Step 2: Complete information from tax return

1 Net income from Form IL-1040, Line 11 1 17,751 | 00
2 Tax from Form IL-1040, Line 14 2 879 | 00
3 Illinois Income Tax withheld from Form IL-1040, Line 25 only (enter "0" if none) 3 848 | 00
4 Overpayment from Form IL-1040, Line 35 4 | 00
5 Total amount due from Form IL-1040, Line 39 5 31 | 00
6 Filing status: X Single Married filing jointly Married filing separately Widowed Head of household

Step 3: Complete direct deposit of refund or electronic funds withdrawal information (Optional)

To initiate a payment or refund transaction, the information in this Step must be included within the electronic transmission. Illinois does not support international ACH transactions. IDOR will only perform direct transactions (e.g., debit, deposit) with financial institutions located within the United States or those not funded by international funds. Electronic payments will not be accepted and refunds will be via paper check.

7 Routing no. (RN):
8 Account no. (AN):
9 Type of account: Checking Savings
10 Date the payment is to be electronically withdrawn: / /
11 Electronic funds withdrawal amount: | 00
12 Name on account:

Step 4: Taxpayer declaration and signature (Sign only after completing Step 2 and, if applicable, Step 3.)

- I consent that my refund may be directly deposited as designated in Step 3 and declare the information on Lines 7 through 9 is correct.
I authorize the Illinois Department of Revenue (IDOR) and its designated financial agent to initiate an ACH electronic funds withdrawal as designated in the electronic portion of my 2020 Illinois Individual Income Tax return.
I do not want direct deposit of my refund, or an electronic funds withdrawal (direct debit) of my balance due.

Under penalties of perjury, I declare the information on my electronic Form IL-1040 and the information I provided to my electronic return originator (ERO) are identical. To the best of my knowledge, my return is true, correct, and complete. I consent that my return, this declaration, and accompanying information may be sent to IDOR by my ERO. I authorize IDOR to inform my ERO and/or the transmitter when my return has been accepted or rejected. If rejected, I authorize IDOR to identify the reason(s) so the return may be corrected and retransmitted if possible.

Sign here Your signature Date Spouse's signature (if joint return, both must sign) Date

Step 5: Electronic return originator (ERO) and paid preparer declaration and signature

I declare that I have examined this taxpayer's electronic Form IL-1040, the information on this Form IL-8453, and accompanying information. I have followed all requirements of this program and declare, under penalties of perjury, that to the best of my knowledge the taxpayer's return and accompanying information are true, correct, and complete.

ERO's signature Date 01/27/2021 Check if paid preparer: X (See instructions.)
GLOBAL TAXES LLC Firm's name or your name if self-employed P 0 2 0 9 0 3 3 2
2530 Pebble Creek Ln Mailing address Your PTIN
Cumming GA 30041 Federal employer identification number (FEIN)
(646) 727-7157
City State ZIP Daytime phone number

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

Do not mail Form IL-8453 and these documents unless requested for review.

