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

067-69-4789

ROHAN VASAIKAR

POHANTIA SATKAR 47@CMATI. COM

827 SOUTH MILLER STREET 1R

CHICAGO ΙL 60607 COOK



	TOTAL VILLETTI CONTEST			
С	Filing status: X 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 2021: Nonresident - Attach Sch. NR Part-y	You	Spouse	NR Z
↓	 Step 2: Income 1 Federal adjusted gross income from your federal Form 1040 or 1040-SR, Line 11. 2 Federally tax-exempt interest and dividend income from your federal Form 1040 or 1040-S 3 Other additions. Attach Schedule M. 4 Total income. Add Lines 1 through 3. 	SR, Line 2a.	1(Whole 1 2 34	dollars only) 62,101.00 .00 .00 62,101.00
1099 forms he	6 Illinois Income Tax overpayment included in federal Form 1040 or 1040-SR,	5 6 7	.00 .00 .00	.00 62,101.00
Staple W-2 and	Step 4: Exemptions 10 a Enter the exemption amount for yourself and your spouse. See instructions. b Check if 65 or older:	b	375.00 .00 .00	2,375.00
	11 Residents: Net income. Subtract Line 10 from Line 9.			

Income tax. Add Lines 12 and 13. Cannot be less than zero. Step 6: Tax After Nonrefundable Credits

Staple your check and IL-1040-V

13

15 .00 Income tax paid to another state while an Illinois resident. Attach Schedule CR. 16 Property tax and K-12 education expense credit amount from Schedule ICR.

Attach Schedule ICR. 16 .00 Credit amount from Schedule 1299-C. Attach Schedule 1299-C. 17 .00

Nonresidents and part-year residents: Enter the Illinois net income from Schedule NR. Attach Schedule NR. 11_

0.00 Add Lines 15, 16, and 17. This is the total of your credits. Cannot exceed the tax amount on Line 14. 18 2,956.00 **19** Tax after nonrefundable credits. Subtract Line 18 from Line 14.

Recapture of investment tax credits. Attach Schedule 4255.

Residents: Multiply Line 11 by 4.95% (.0495). Cannot be less than zero.

Nonresidents and part-year residents: Enter the tax from Schedule NR.

Step 7: Other Taxes 20 Household employment tax. See instructions. 20

21 Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table 21 in the instructions. Do not leave blank.

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

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

59,726.00

2,956.00

2,956.00

.00

0.00

.00 2,956.00

12

13

14

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.



24 2,956.00 Total tax from Page 1, Line 23. Step 8: Payments and Refundable Credit 25 Illinois Income Tax withheld. Attach Schedule IL-WIT. 25 3,300.00 NO HANDWRITT 26 Estimated payments from Forms IL-1040-ES and IL-505-I, 26 including any overpayment applied from a prior year return. .00 27 Pass-through withholding. Attach Schedule K-1-P or K-1-T. 27 .00 28 Pass-through entity tax credit. Attach Schedule K-1-P or K-1-T. 28 .00 .00 29 29 Earned Income Credit from Schedule IL-E/EIC, Step 4, Line 8. Attach Schedule IL-E/EIC. 3,300.00 30 Total payments and refundable credit. Add Lines 25 through 29. 30 EN ENTRIES, OTHER THAN SIGNATURE Step 9: Total 31 344.00 **31** If Line 30 is greater than Line 24, subtract Line 24 from Line 30. 32 If Line 24 is greater than Line 30, subtract Line 30 from Line 24. 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. 33 Late-payment penalty for underpayment of estimated tax. 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. 34 Voluntary charitable donations. Attach Schedule G. .00 35 Total penalty and donations. Add Lines 33 and 34. 35 Step 11: Refund 36 If you have an amount on Line 31 and this amount is greater than Line 35, subtract Line 35 from Line 31. **ON THIS** This is your overpayment. 36 344.00 37 Amount from Line 36 you want refunded to you. Check one box on Line 38. See instructions. 37 38 I choose to receive my refund by a I direct deposit - Complete the information below if you check this box. You may also contribute Routing number 2 7 X Checking or 0 Savings to college savings funds here. See instructions! Account number 1 6 8 b paper check. 39 Amount to be credited forward. Subtract Line 37 from Line 36. See instructions. 39 .00 Step 12: Amount You Owe 40 If you have an amount on Line 32, add Lines 32 and 35. - or -If you have an amount on Line 31 and this amount is less than Line 35, subtract Line 31 from Line 35. This is the amount you owe. See instructions. 40 .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 Date (mm/dd/yyyy) Your signature Spouse's signature Date (mm/dd/yyyy) Daytime phone number Here (551)358-0615 Print/Type paid preparer's name Paid preparer's signature Paid Preparer's PTIN Check if Date (mm/dd/yyyy) **Paid** self-employed P02082703 SYAM PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA RAM SAGAR GUPTA TALLAM 04/05/2022 **Preparer** Firm's name GLOBAL TAXES LLC Firm's FEIN 301017196 **Use Only** Firm's address (678) 965-9522 2530 Pebble Creek LnCumming GA 30041 Firm's phone **Third** Designee's name (please print) Check if the Department may Designee's phone number **Party** discuss this return with the third party designee shown in this step Designee

IL-1040 Back (R-12/21) DR______ AP_____ RR DC IR ID ID: 3WM REV 03/29/22 PRO

Refer to the 2021 IL-1040 Instructions for the address to mail your return.





Illinois Department of Revenue

2021 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)

ROHAN VASAIKAR	2		06	5 7		6 9	4	7	8	9
Your name as shown	on Form IL-1040	Your Soc	cial Sec	urity numb	per		-			
Column A Form type	Column B Employer/Payer Identification Number	Federal Wage	olumn C es, Winnings, G , Compensation		Column D Illinois Wages, Winnings, Gros. Distributions, Compensation, et					
1 <u>W</u>	13-3974563 000 8	_ \$	69,101 •0	<u>0</u>	\$	69,1	<u>01•00</u>	\$	3,30	00.00
2		_ \$	•00	<u>0</u>	\$		<u>•00</u>	\$		•00
3		- \$	•00	<u>0</u>	\$		<u>•00</u>	\$		<u>•00</u>
4		_ \$	•00	<u>0</u>	\$		<u>•00</u>	\$		<u>•00</u>
5		_ \$	•00	<u>0</u>	\$		<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 ompensation, etc.	Co Illinois Wage Distributions,	Column E Illinois Income Tax Withheld		
6		_ \$	•00	\$	•00	\$	•00
7		_ \$	•00	\$	•00	\$	<u>•00</u>
8		- \$	<u>•00</u>	\$	•00	\$	•00
9		_ \$	<u>•00</u>	\$	•00	\$	•00
10		_ \$	•00	\$	<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 \$ 3,300**.00**

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



Illinois Department of Revenue

			-						_				
				S	ubmi	ssior	ılD						

Ster	1: Provide taxpayer informat	ion			
Oter	ROHAN	VASA	IKAR	0 6 7 _ 6 9 _ 4	7 8 9
	•	irst name (and last name if differe	nt) Last name	Social Security number	
Pring or	t 827 SOUTH MILLER STREET	7 1R			
type				Spouse's Social Security number	
	CHICAGO	IL	60607	(551) 358-0615	
	City	State	ZIP	Daytime phone number	
	o 2: Complete information from				
	Net income from Form IL-1040, Line	e 11		<u> </u>	,726 <u>00</u>
	Tax from Form IL-1040, Line 14	A	, , , , , , , , , , , , , , , , , , ,	<u> </u>	,956 00
	Illinois Income Tax withheld from Fo		(enter " 0 " if none)	33	,300 <u>00</u> 344 <u>00</u>
	Overpayment from Form IL-1040, L Total amount due from Form IL-104			4	00 00
	Filing status: X Single Marri		ad filing senarately	Widowed Head of household	1 00
	3: Complete direct deposit of	3	<u> </u>		
7 8	Routing no. (RN): 0 2 1 2 Account no. (AN): 3 1 6 8 Type of account: X Checking Date the payment is to be electronic Electronic funds withdrawal amount	0 2 3 3 7 2 9 3 7 0 Savings cally withdrawn:/_/_		I not be accepted and refunds will be via	
12	Name on account:		<u> </u>		
Step	o 4: Taxpayer declaration and s	ignature (Sign only aft	er completing Step	2 and, if applicable, Step 3.)	
<u>></u>	correct. If I have filed a joint return I authorize the Illinois Departmen	rn, this is an irrevocable ap nt of Revenue (IDOR) and	opointment of the other its designated financial	eclare the information on Lines 7 through spouse as an agent to receive the refun agent to initiate an ACH electronic fund come Tax return. I authorize the financial	d. s
		electronic overpayment of		ential information necessary to answer in	
	I do not want direct deposit of my	y refund, or an electronic f	unds withdrawal (direct	debit) of my balance due.	
origir and a	nator (ERO) are identical. To the besi accompanying information may be so	t of my knowledge, my retu ent to IDOR by my ERO. I a	irn is true, correct, and c authorize IDOR to inforn	information I provided to my electronic recomplete. I consent that my return, this do n my ERO and/or the transmitter when my may be corrected and retransmitted if	eclaration, y return has
	n				
Sigr	Your signature	Date	Spouse's signat	ure (if joint return, both must sign) Date	
Sigr here Step I dec have	Your signature 5: Electronic return originate clare that I have examined this taxpa	or (ERO) and paid prepayer's electronic Form IL-1 ogram and declare, under	parer declaration an 040, the information on		/er's return
Sigr here Step I dec have and a	O 5: Electronic return originate clare that I have examined this taxpa of followed all requirements of this proaccompanying information are true, ERO's signature GLOBAL TAXES LLC	or (ERO) and paid prepayer's electronic Form IL-1 ogram and declare, under	parer declaration an 040, the information on penalties of perjury, tha	this Form IL-8453, and accompanying in to the best of my knowledge the taxpa Check if paid preparer: (See in the best of the	/er's return
Sigr here Step I dec have and a	So Your signature D 5: Electronic return originate clare that I have examined this taxpa of followed all requirements of this produced accompanying information are true, ERO's signature O GLOBAL TAXES LLC Firm's name or your name if self-employed	or (ERO) and paid prepayer's electronic Form IL-1 ogram and declare, under	parer declaration an 040, the information on penalties of perjury, tha	d signature this Form IL-8453, and accompanying in to the best of my knowledge the taxpa	/er's return
Sigr here Step I dec have and a	So Your signature D 5: Electronic return originate clare that I have examined this taxpa of followed all requirements of this proposed companying information are true, ERO's signature D GLOBAL TAXES LLC Firm's name or your name if self-employed 2530 Pebble Creek Ln	or (ERO) and paid prepayer's electronic Form IL-1 ogram and declare, under	parer declaration an 040, the information on penalties of perjury, tha	d signature this Form IL-8453, and accompanying in to the best of my knowledge the taxpa Check if paid preparer: (See in the best of the paid preparer) (See in the paid preparer) (Se	yer's return structions.)
Sigr here Step I dec have and a	So Se Your signature D 5: Electronic return originate clare that I have examined this taxpa of followed all requirements of this produced accompanying information are true, ERO's signature D GLOBAL TAXES LLC Firm's name or your name if self-employed	or (ERO) and paid prepayer's electronic Form IL-1 ogram and declare, under	parer declaration an 040, the information on penalties of perjury, tha	this Form IL-8453, and accompanying in to the best of my knowledge the taxpa. Check if paid preparer: (See in Paid Point Poin	yer's return structions.)

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.

