

IRS e-file Signature Authorization

▶ **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 SUNEELA YARKAREDDY	Social security number 860-43-3904
Spouse's name	Spouse's social security number

Part I Tax Return Information — Tax Year Ending December 31, 2021 (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	92,217.
2	Total tax	2	13,277.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	13,251.
4	Amount you want refunded to you	4	
5	Amount you owe	5	26.

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

3	3	9	0	4
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 as my signature on the income tax return (original or amended) I am now authorizing.

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

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 as my signature on the income tax return (original or amended) I am now authorizing.

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					
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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.**

ERO's signature ▶ _____ Date ▶ _____

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

IF you live in . . .	THEN use this address to send in your payment . . .
Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas	Internal Revenue Service P.O. Box 1214 Charlotte, NC 28201-1214
Arkansas, Connecticut, Delaware, District of Columbia, Illinois, Indiana, Iowa, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service P.O. Box 931000 Louisville, KY 40293-1000
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Kansas, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service P.O. Box 802501 Cincinnati, OH 45280-2501
A foreign country, American Samoa, or Puerto Rico (or are excluding income under Internal Revenue Code 933), or use an APO or FPO address, or file Form 2555 or 4563, or are a dual-status alien or nonpermanent resident of Guam or the U.S. Virgin Islands	Internal Revenue Service P.O. Box 1303 Charlotte, NC 28201-1303

MAIL FORM 1040-V TO THE INTERNAL REVENUE SERVICE CENTER AT THE ADDRESS LISTED BELOW.

▼ Detach Here and Mail With Your Payment and Return ▼

Department of the Treasury
Internal Revenue Service (99)

2021

Form 1040-V Payment Voucher

- ▶ Use this voucher when making a payment with Form 1040.
- ▶ Do not staple this voucher or your payment to Form 1040.
- ▶ Make your check or money order payable to the 'United States Treasury.'
- ▶ Write your social security number (SSN) on your check or money order.

Enter the amount of your payment ▶	26.
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REV 02/16/22 PRO 1555

SUNEELA YARKAREDDY

2 WILLED0B RD 12
BLOOMINGTON IL 61701

INTERNAL REVENUE SERVICE
P.O. BOX 931000
LOUISVILLE, KY 40293-1000

Filing Status 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 SUNEELA	Last name YARKAREDDY	Your social security number 860-43-3904
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. 2 WILLEDOB RD		Apt. no. 12	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. <input type="checkbox"/> You <input type="checkbox"/> Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. BLOOMINGTON	State IL	ZIP code 61701	
Foreign country name	Foreign province/state/county	Foreign postal code	

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? Yes 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, 1957 Are blind **Spouse:** Was born before January 2, 1957 Is blind

Dependents (see instructions): If more than four dependents, see instructions and check here ▶ <input type="checkbox"/>	(1) First name		(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see instructions):	
	Last name				Child tax credit	Credit for other dependents
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

Attach Sch. B if required.	1 Wages, salaries, tips, etc. Attach Form(s) W-2		1	92,217.
	2a Tax-exempt interest	2a	2b	
	3a Qualified dividends	3a	3b	
	4a IRA distributions	4a	4b	
	5a Pensions and annuities	5a	5b	
	6a Social security benefits	6a	6b	
7 Capital gain or (loss). Attach Schedule D if required. If not required, check here			7	
8 Other income from Schedule 1, line 10			8	0.
9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income			9	92,217.
10 Adjustments to income from Schedule 1, line 26			10	
11 Subtract line 10 from line 9. This is your adjusted gross income			11	92,217.
12a Standard deduction or itemized deductions (from Schedule A)		12a 12,550.		
b Charitable contributions if you take the standard deduction (see instructions)		12b		
c Add lines 12a and 12b			12c	12,550.
13 Qualified business income deduction from Form 8995 or Form 8995-A			13	
14 Add lines 12c and 13			14	12,550.
15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-			15	79,667.

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

2021 IL-1040-V ID: 3WM

Payment Voucher for Individual Income Tax

REV 02/15/22 PRO

860-43-3904

Your Social Security number

Spouse's Social Security number

Your payment is due April 18, 2022.

\$ 5.00
Payment amount

SUNEELA YARKAREDDY
2 WILLEDOB RD 12
BLOOMINGTON IL 61701

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.



104081221 1 2 860433904 7 25011811 4 000000500



Illinois Department of Revenue
2021 Form IL-1040

Individual Income Tax Return

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

or for fiscal year ending ___/___/___

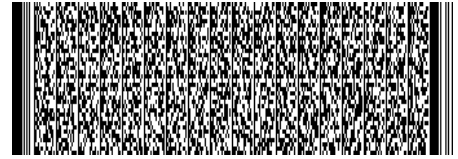
Step 1: Personal Information

1990

860-43-3904

SUNEELA

YARKAREDDY



2 WILLEDOB RD

12

BLOOMINGTON

IL

61701

MCLEAN

SUNEELARDY@GMAIL.COM

- B Filing status: [X] 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 2021: [] Nonresident - Attach Sch. NR [] Part-year resident - Attach Sch. NR

Step 2: Income

Table with 4 rows: 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-SR, Line 2a. 3 Other additions. Attach Schedule M. 4 Total income. Add Lines 1 through 3.

Step 3: Base Income

Table with 9 rows: 5 Social Security benefits and certain retirement plan income received if included in Line 1. Attach Page 1 of federal return. 6 Illinois Income Tax overpayment included in federal Form 1040 or 1040-SR, Schedule 1, Ln. 1. 7 Other subtractions. Attach Schedule M. 8 Add Lines 5, 6, and 7. This is the total of your subtractions. 9 Illinois base income. Subtract Line 8 from Line 4.

Step 4: Exemptions

Table with 10 rows: 10 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 = d If you are claiming dependents, enter the amount from Schedule IL-E/EIC, Step 2, Line 1. Attach Schedule IL-E/EIC. Exemption allowance. Add Lines 10a through 10d.

Step 5: Net Income and Tax

Table with 14 rows: 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. 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. 13 Recapture of investment tax credits. Attach Schedule 4255. 14 Income tax. Add Lines 12 and 13. Cannot be less than zero.

Step 6: Tax After Nonrefundable Credits

Table with 19 rows: 15 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. 17 Credit amount from Schedule 1299-C. Attach Schedule 1299-C. 18 Add Lines 15, 16, and 17. This is the total of your credits. Cannot exceed the tax amount on Line 14. 19 Tax after nonrefundable credits. Subtract Line 18 from Line 14.

Step 7: Other Taxes

Table with 7 rows: 20 Household employment tax. See instructions. 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. 22 Compassionate Use of Medical Cannabis Program Act and sale of assets by gaming licensee surcharges. 23 Total Tax. Add Lines 19, 20, 21, and 22.

Staple W-2 and 1099 forms here

Staple your check and IL-1040-V

NO HANDWRITTEN ENTRIES ON THIS FORM

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.





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	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)

SUNEELA YARKAREDDY

Your name as shown on Form IL-1040

8 6 0 - 4 3 - 3 9 0 4
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 <u>W</u>	<u>222575929 000 5</u>	\$ <u>92,217.00</u>	\$ <u>92,217.00</u>	\$ <u>4,442.00</u>
2 _____	_____	\$ _____	\$ _____	\$ _____
3 _____	_____	\$ _____	\$ _____	\$ _____
4 _____	_____	\$ _____	\$ _____	\$ _____
5 _____	_____	\$ _____	\$ _____	\$ _____

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 _____	_____	\$ _____	\$ _____	\$ _____
7 _____	_____	\$ _____	\$ _____	\$ _____
8 _____	_____	\$ _____	\$ _____	\$ _____
9 _____	_____	\$ _____	\$ _____	\$ _____
10 _____	_____	\$ _____	\$ _____	\$ _____

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 \$ 4,442.00

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



Illinois Department of Revenue

Submission ID

2021 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

SUNEELA YARKAREDDY 8 6 0 - 4 3 - 3 9 0 4
First name and middle initial Spouse's first name (and last name if different) Last name Social Security number
2 WILLEDOB RD 12
Mailing address Spouse's Social Security number
BLOOMINGTON IL 61701 (309) 444-6930
City State ZIP Daytime phone number

Step 2: Complete information from tax return

1 Net income from Form IL-1040, Line 11 1 89,842 | 00
2 Tax from Form IL-1040, Line 14 2 4,447 | 00
3 Illinois Income Tax withheld from Form IL-1040, Line 25 only (enter "0" if none) 3 4,442 | 00
4 Overpayment from Form IL-1040, Line 36 4 | 00
5 Total amount due from Form IL-1040, Line 40 5 5 | 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 2021 Illinois Individual Income Tax return.
[X] 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 02/22/2022 Check if paid preparer: [X] (See instructions.)
GLOBAL TAXES LLC Your PTIN P 0 2 0 8 2 7 0 3
2530 Pebble Creek Ln Mailing address 3 0 - 1 0 1 7 1 9 6
Cumming GA 30041 Federal employer identification number (FEIN) (678) 965-9522
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.

