## 8879 **8879**

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

### IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

▶ Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

illemai nevelue Service	
Submission Identification Number (SID)	
Taxpayer's name	Social security number
KALYANI WAMANRAO TITARMARE	398-75-1773
Spouse's name	Spouse's social security number
Part I Tax Return Information — Tax Year Ending December 31, 2021 (En	nter year you are authorizing.)
Enter whole dollars only on lines 1 through 5.	iter year you are authorizing.)
<b>Note:</b> Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.	
1 Adjusted gross income	<b>1</b>   38,689.
2 Total tax	·
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099	
4 Amount you want refunded to you	
5 Amount you owe	, , , , , , , , , , , , , , , , , , , ,
Part II Taxpayer Declaration and Signature Authorization (Be sure you get an	nd 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 amend	
to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution action is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to termin payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation business days prior to the payment (settlement) date. I also authorize the financial institutions involved in taxes to receive confidential information necessary to answer inquiries and resolve issues related to the personal identification number (PIN) below is my signature for the income tax return (original or amended) Electronic Funds Withdrawal Consent.	ne Ú.S. Treasury and its designated Financia indicated in the tax preparation software for itution to debit the entry to this account. Thi inate the authorization. To revoke (cancel) requests must be received no later than the processing of the electronic payment of the payment. I further acknowledge that the
Taxpayer's PIN: check one box only	
	5 1 7 7 3
X I authorize GLOBAL TAXES LLC to enter or genera	Enter five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I ar if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN m below.	
Your signature ▶ Date ▶	<b></b>
Spouse's PIN: check one box only	
· _	ete mu DINI
I authorize to enter or genera	ate my PIN as my Enter five digits, but
signature on the income tax return (original or amended) I am now authorizing.	don't enter all zeros
I will enter my PIN as my signature on the income tax return (original or amended) I ar if you are entering your own PIN <b>and</b> your return is filed using the Practitioner PIN m below.	
Spouse's signature ▶ Date ▶	•
Practitioner PIN Method Returns Only—continue belo	
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
<b>ERO's EFIN/PIN.</b> Enter your six-digit EFIN followed by your five-digit self-selected PIN. 5	Don't enter all zeros
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am surrequirements of the Practitioner PIN method and <b>Pub. 1345</b> , Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of the Practitioner PIN method and Pub. 1345, Handbook for Pub. 1345, Handbook	ubmitting this return in accordance with th
ERO's signature ▶ Date ▶	•
FRO Must Retain This Form — See Instructions	

Don't Submit This Form to the IRS Unless Requested To Do So

# E 1040 Department of the Treasury—Internal Revenue Service (99) U.S. Individual Income Tax Return

2021

OMB No. 1545-007

IRS Use Only-Do not write or staple in this space.

Filing Status Check only one box.	If yo	Single Married filing jointly [ u checked the MFS box, enter the one is a child but not your depender	name of									
Your first name	and mi	ddle initial	Last n	ame					Your so	cial securi	ity number	
KALYANI	WAM	ANRAO	TIT	ARMARE					398-75-1773			
If joint return, sp	ouse's	first name and middle initial	Last n	ame					Spouse	's social se	curity number	
		er and street). If you have a P.O. box, see	instruc	tions.				Apt. no.	Check	here if you		
City, town, or pour IRVING	to go to		ntly, want \$3 Checking a t change									
IRVING TX 75038 box Foreign country name Foreign province/state/county Foreign postal code Foreign postal											•	
At any time du	ing 20	021, did you receive, sell, exchange	, or oth	erwise dispose of a	ny fina	ancial interes	t in an	y virtual curre	ncy?	Yes	⊠ No	
Standard Deduction	_	eone can claim:	•			a dependent	t					
Age/Blindness	You:	☐ Were born before January 2,	1957	Are blind S	oouse	: Was b	orn be	efore January 2	2, 1957	☐ Is b	lind	
Dependents	-			(2) Social securi	tv	(3) Relations				or (see instru	uctions):	
If more	•								redit	1 '	ther dependents	
than four												
dependents,												
see instructions and check												
here ▶ □												
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2					. 1		41,357.	
Attach	2a	Tax-exempt interest	2a		b T	axable intere	est		_ 2b			
Sch. B if	3a	Qualified dividends	3a		<ul><li>b Taxable interest</li><li>b Ordinary dividen</li><li>b Taxable amount</li></ul>				3b	,		
required.	4a	IRA distributions	4a						. 4b	,		
	5a	Pensions and annuities	5a		b T	axable amou	ınt .		. 5b	,		
Standard	6a	Social security benefits	6a		b T	axable amou	ınt .		. 6b	,		
Deduction for —	7	Capital gain or (loss). Attach Sche	edule D	if required. If not red	quired	, check here		▶[			-168.	
Single or Married filing	8	Other income from Schedule 1, lin	ne 10		·				. 8		0.	
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is your total in	come				▶ 9		41,189.	
Married filing	10	Adjustments to income from Sche	edule 1,	, line 26					. 10	)	2,500.	
jointly or Qualifying	11	Subtract line 10 from line 9. This i	s your a	adjusted gross inco	ome				▶ 11		38,689.	
widow(er),	12a	Standard deduction or itemized	deduc	tions (from Schedul	le A)	1	2a	12,55	0.			
\$25,100 Head of	b	Charitable contributions if you take		•	,		2b	30				
household, \$18,800	С					· —			. 12	С	12,850.	
If you checked	13	Qualified business income deduc	tion froi	m Form 8995 or For	m 899	05-A			. 13			
any box under Standard	14	A 1 1 1 1 4 0 1 4 0							. 14		12,850.	
Deduction, see instructions.	15	Taxable income. Subtract line 14	l from li	ne 11. If zero or less	s, ente	er -0			. 15		25 <b>,</b> 839.	

Form 1040 (202	1)								Page <b>2</b>
	16	Tax (see instructions). Check if any from Form	n(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌	-		16	2,900.
	17	Amount from Schedule 2, line 3						17	0.
	18	Add lines 16 and 17						18	2,900.
	19	Nonrefundable child tax credit or credit for c	other depender	nts from Schedul	e 8812			19	
	20	Amount from Schedule 3, line 8						20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If zero or less,	enter -0					22	2,900.
	23	Other taxes, including self-employment tax,	from Schedule	e 2, line 21 .				23	0.
	24	Add lines 22 and 23. This is your total tax					. ▶	24	2,900.
	25	Federal income tax withheld from:							
	а	Form(s) W-2			25a	4,	098.		
	b	Form(s) 1099			25b				
	С	Other forms (see instructions)			25c				
	d	Add lines 25a through 25c						25d	4,098.
If you have a	26	2021 estimated tax payments and amount a						26	
qualifying child,	27a	Earned income credit (EIC)		<sup>No</sup> .	27a				
attach Sch. EIC.		Check here if you were born after January 2, 2004, and you satisfy all the							
		taxpayers who are at least age 18, to claim to							
	b	Nontaxable combat pay election	. 27b						
	С	Prior year (2019) earned income	. 27c						
	28	Refundable child tax credit or additional child	tax credit from	Schedule 8812	28				
	29	American opportunity credit from Form 8863							
	30	Recovery rebate credit. See instructions .			30				
	31	Amount from Schedule 3, line 15							
	32	Add lines 27a and 28 through 31. These are	32						
	33	Add lines 25d, 26, and 32. These are your to	otal payments				. ▶	33	4,098.
Refund	34	If line 33 is more than line 24, subtract line 2		34	1,198.				
Herana	35a	Amount of line 34 you want refunded to you	<b>u.</b> If Form 8888	is attached, che	ck here	<b>)</b>	<b>▶</b> □	35a	1,198.
Direct deposit?	▶b	Routing number 0 2 2 3 0 0 1	7 3	▶ c Type: 🛛	Checl	king 🗌 Sa	vings		
See instructions.	▶d	Account number 3 1 5 7 0 3 7	8 2						
	36	Amount of line 34 you want applied to your	2022 estimate	ed tax ►	36				
Amount	37	Amount you owe. Subtract line 33 from line	24. For details	s on how to pay,	see ins	tructions	. ▶	37	
You Owe	38	Estimated tax penalty (see instructions) .		🕨	38				
Third Party Designee		you want to allow another person to disc	cuss this retu	n with the IRS?	? See ▶	Yes. Com	inlete h	elow	X No
Designee	De	signee's	Phone			Persona	al identif	ication	
C:		me   der penalties of perjury, I declare that I have examine	no.	l accompanying sol	hodulos	number	. ,		t of my knowledge and
Sign		lief, they are true, correct, and complete. Declaration							
Here	Yo	ur signature	Date	Your occupation			If the	IRS ser	nt you an Identity
	k .								N, enter it here
Joint return?	<b>L</b>			EMPLOYED				nst.) 🕨	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupat	tion				nt your spouse an ection PIN, enter it here
your records.								nst.) ▶	CHOILE IN GENERAL HEIGH
	———Ph	one no. (845) 546-7984	Email address	KALYANITITARI	MARF56	ACMATI COM	,	· .	
		eparer's name Preparer's signal		WITTIN	Date		TIN		Check if:
Paid		M PRIYA RAM SAGAR GUPTA TALLAM SYAM PRIYA		GUPTA TAT.T.AM			02082	7703	Self-employed
Preparer		m's name ► GLOBAL TAXES LLC	_		678) 965-9522				
Use Only		m's address ▶ 2530 Pebble Creek I	n Cummin	T GA 30041				s EIN ▶	
Go to want in a		m10/0 for instructions and the latest information	Cananall	g GA SOUTI	DEV 2	0/47/22 DDO	1 1 11111	J LIIN	50-101/190 Form <b>1040</b> (2021)

### SCHEDULE 1 (Form 1040)

### **Additional Income and Adjustments to Income**

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

KALYANI WAMANRAO TITARMARE

Your social security number
398-75-1773

Par	Additional income			
1	Taxable refunds, credits, or offsets of state and local income taxes	8	. 1	0.
<b>2</b> a	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, tro		1	
6	Farm income or (loss). Attach Schedule F		. 6	
7	Unemployment compensation		. 7	
8	Other income:			
а	Net operating loss	8a (	)	
b	Gambling income	8b		
С	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d (	)	
е	Taxable Health Savings Account distribution	8e		
f	Alaska Permanent Fund dividends	8f		
g	Jury duty pay	8g		
h	Prizes and awards	8h		
i	Activity not engaged in for profit income	8i		
j	Stock options	8j		
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8k		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81		
m	Section 951(a) inclusion (see instructions)	8m		
n	Section 951A(a) inclusion (see instructions)	8n		
0	Section 461(I) excess business loss adjustment	80		
р	Taxable distributions from an ABLE account (see instructions) .	8p		
Z	Other income. List type and amount ▶	8z		
9	Total other income. Add lines 8a through 8z		. 9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10 1040-NR line 8	040, 1040-SR	, or	0

Schedule 1 (Form 1040) 2021 Page **2** 

1	Educator expenses	11	
2		11	
_	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
3	Health savings account deduction. Attach Form 8889	13	
4	Moving expenses for members of the Armed Forces. Attach Form 3903 $ \dots  \dots  \dots$	14	
5	Deductible part of self-employment tax. Attach Schedule SE	15	
6	Self-employed SEP, SIMPLE, and qualified plans	16	
7	Self-employed health insurance deduction	17	
8	Penalty on early withdrawal of savings	18	
9a	Alimony paid	19a	
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions) ▶		
0	IRA deduction	20	
1	Student loan interest deduction	21	2,500
2	Reserved for future use	22	
3	Archer MSA deduction	23	
4	Other adjustments:		
а	Jury duty pay (see instructions)		
	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit 24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l 24c		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans 24f		
g	Contributions by certain chaplains to section 403(b) plans 24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations		
i	Housing deduction from Form 2555	_	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)		
Z	Other adjustments. List type and amount ▶		
5	Total other adjustments. Add lines 24a through 24z	25	

#### **SCHEDULE D** (Form 1040)

Department of the Treasury

**Capital Gains and Losses** 

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

▶ Go to www.irs.gov/ScheduleD for instructions and the latest information. ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

Attachment Sequence No. 12

Internal Revenue Service (99) Name(s) shown on return Your social security number 398-75-1773 KALYANI WAMANRAO TITARMARE Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes." attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. line 2, column (a) with column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . 1b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box B checked . . . . . . . . . . . . . . 3 Totals for all transactions reported on Form(s) 8949 with Box C checked . . . . . . . . . . . . . . . . . . Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 168.) 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . . . . . . 7 -168. Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (g) (h) Gain or (loss) Adjustments Subtract column (e) (d) (e) lines below Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result whole dollars. line 2, column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . . 8b Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

BAA

15

Schedule D (Form 1040) 2021 Page **2** 

### Part III Summary

16	Combine lines 7 and 15 and enter the result	16		-168.
	• If line 16 is a <b>gain,</b> enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.			
	• If line 16 is a <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.			
	• If line 16 is <b>zero</b> , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.			
17	Are lines 15 and 16 <b>both</b> gains?  Yes. Go to line 18.  No. Skip lines 18 through 21, and go to line 22.			
18	If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet	18		
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19		
20	Are lines 18 and 19 both zero or blank and are you not filing Form 4952?  ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below.			
	No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> of:			
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21	(	168.)
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	☐ <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Forms 1040 and 1040-SR, line 16.			
	▼ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

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**

1996

398-75-1773

KALYANI WAMANRAO

TITARMARE

5115 MONTEGO BAY DRIVE

IRVING 75038 TX

	KAL	YANITITARMARE56@GMAIL.COM		
С	Che	ng status: X Single Married filing jointly Married filing separately Widowed Head of eck If someone can claim you, or your spouse if filing jointly, as a dependent. See instructions. You eck the box if this applies to you during 2021: Nonresident - Attach Sch. NR Part-year resident -	Spouse	. NR <b>Z</b>
<b>†</b>	Step 1 2 3 4	D 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-SR, Line 2a. Other additions. Attach Schedule M. Total income. Add Lines 1 through 3.	1	e dollars only) 38,689.00 .00 .00 38,689.00
	Ste	3: Base Income		
Staple W-2 and 1099 forms here	5 · 6  7	Social Security benefits and certain retirement plan income received if included in Line 1. Attach Page 1 of federal return.  Illinois Income Tax overpayment included in federal Form 1040 or 1040-SR, Schedule 1, Ln. 1.  Other subtractions. Attach Schedule M.  5  Comparison of federal return.  5  Comparison of federal return.  6  Comparison of federal return.  7  Comparison of federal return.  6  Comparison of federal return.  7  Comparison of federal return.  6  Comparison of federal return.  7  Comparison of federal return.	.00 .00 .00	ITTEN ENTRIES
d 1099	8	Check if Line 7 includes any amount from Schedule 1299-C.  Add Lines 5, 6, and 7. This is the total of your subtractions.  Illinois base income. Subtract Line 8 from Line 4.	8 9	.00 38,689.00 2
an		2 4: Exemptions		<b>= = = = = = = = = =</b>
Staple W-2		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 = b  c Check if legally blind:  You + Spouse # of checkboxes X \$1,000 = c  d If you are claiming dependents, enter the amount from Schedule IL-E/EIC, Step 2, Line 1.  Attach Schedule IL-E/EIC.	75.00 .00 .00	THIS FORM
_		Exemption allowance. Add Lines 10a through 10d.	10	2,375 <u>.00</u>
T		5: Net Income and Tax		
<u> </u>		Residents: Net income. Subtract Line 10 from Line 9.  Nonresidents and part-year residents: Enter the Illinois net income from Schedule NR. Attach Schedule Residents: Multiply Line 11 by 4.95% (.0495). Cannot be less than zero.  Nonresidents and part-year residents: Enter the tax from Schedule NR.	NR. <b>11</b>	.00.0
040-1		Recapture of investment tax credits. <b>Attach</b> Schedule 4255. <b>Income tax.</b> Add Lines 12 and 13. Cannot be less than zero.	13 14	0.00 0.00
nd IL-1	Step 15	o 6: Tax After Nonrefundable Credits Income tax paid to another state while an Illinois resident. Attach Schedule CR. Property tax and K-12 education expense credit amount from Schedule ICR.	.00	
Staple your check and IL-1040-V	17	Attach Schedule ICR.  Credit amount from Schedule 1299-C. Attach Schedule 1299-C.  Add Lines 15, 16, and 17. This is the total of your credits. Cannot exceed the tax amount on Line 14.  Tax after nonrefundable credits. Subtract Line 18 from Line 14.		0 <u>.00</u> 0.00
mo		o 7: Other Taxes		
le y		Household employment tax. See instructions. Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table	20	.00
Stap		in the instructions. <b>Do not</b> leave blank.  Compassionate Use of Medical Cannabis Program Act and sale of assets by gaming licensee surcharges.	21 22	0.00
lacksquare		Total Tax. Add Lines 19, 20, 21, and 22.	23	0.00

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	Tota	l tax from Page 1	, Line 23.					24	0 <u>.00</u>				
Ste	p 8: F	Payments and	Refundab	le Credit									
25	Illinois	s Income Tax with	nheld. <b>Attac</b>	<b>h</b> Schedule IL-W	IT.		25	0.00					
26	Estim	ated payments fr	om Forms II	L-1040-ES and I	L-505-I,				Z				
		ding any overpayr					26	.00					
		through withholdi	_				27	.00	Ž				
		through entity tax					28	.00					
		payments and r				uttach Schedule IL-E/I	EIC. <b>29</b>	<u>.00</u> <b>30</b>	0.00				
	p 9: T		Ciuiluable	credit. Add Lines	s 25 tillough	29.							
	•	30 is greater than	n Line 24 su	htract Line 24 fro	m Line 30			31	.00 m				
		24 is greater than						32					
Step 10: Underpayment of Estimated Tax Penalty and Donations - Only complete Step 10 for late-payment penalty													
	•				-	y charitable do		o for fato paymont	penalty OTHER THAN				
		payment penalty				,	33	.00	Ö				
		Check if at least		•		s from farming.			3				
	b 🗌	Check if you or ye	our spouse	are 65 or older a	ınd permane	ently living in a nur	sing home.		يُّدُ				
		•		t received evenly	during the	year and you annu	alized your incom	ne on Form IL-2210.	Ξ				
		Attach Form IL-2				_			Z				
		•				Income Tax return	-	•	<u>S</u>				
		tary charitable do penalty and dor					34	<u>.00</u> <b>35</b>	.00 A				
		Refund	iations. Au	Lilles 33 and 3	4.				.00 ATURE				
'	•		on Line Of	and this amount	اد مادماد داد	on Line OF subtro	at Lina OF fram Li	ino 01	Ä				
	-	s your <b>overpaym</b>		and this amount	is greater th	an Line 35, subtra	ct Line 35 from Li	ne 31. <b>36</b>					
				inded to you. Ch	neck <b>one</b> ho	x on Line 38. See i	nstructions	30 <u> </u>	<b>Z</b>				
		ose to receive my		indoa to you.	iook <b>ono</b> bo	K 011 Eli10 00. 000 li	noti dottorio.	<u> </u>	.00 ON THE				
		direct deposit -	•	ne information he	low if you ch	nack this hov			TI				
	~ Ш	You may also con			now ii you oi	IOOK THO DOX.	Oha	alsia a au Causia aa	FORM				
		to college savings	s funds	outing number			Cned	cking or Savings	≤				
		here. See instruc	ctions! A	ccount number									
	b 🗌	paper check.											
39	Amou	int to be <b>credited</b>	forward. Su	btract Line 37 fro	om Line 36.	See instructions.		39	.00				
Ste	p 12:	Amount You C	)we										
40	If you	have an amount	on Line 32.	add Lines 32 an	nd 35. <b>- or -</b>								
	-	have an amount											
	-	act Line 31 from L						40	0.00				
Ste	n 13:	If this is a joint re	turn both vo	u and vour spous	se must sian	helow							
	<b>J</b>	-			-		pest of my knowled	dge, it is true, correct, ar	nd complete.				
							•						
Sign	\	Your signature		Date (mm/dd/yyyy)	Spouse's sig	nature	Date (mm/dd/yyy	y) Daytime phone num	ber				
Here		<del>-</del>						(845) 546-79					
	F	Print/Type paid prep	arer's name	1	Paid prepare	r's signature	Date (mm/dd/yyy		Preparer's PTIN				
Paid	5	SYAM PRIYA RAM SAC		LLAM		RAM SAGAR GUPTA TALI							
Prepa	10	Firm's name	GLOBAL	TAXES LLC	!		Firm's FEIN						
Use O	וויים	Firm's address		ble Creek LnC	'ummi na	GA 30041	Firm's phone	<b>→</b> (678) 965-95	2.2				
Third	_	Designee's name (p		~10 OLOGK HIIC	, anun III II	Designee's phone r		Check if the Department may					
Party	1	J	' 7			I pesidirees hiroite i	IUITIDEI	I Succession from Deb	artinont may				
	Г					, .		discuss this return v	with the third				
Desig	nee					( )		discuss this return v party designee sho					

IL-1040 Back (R-12/21) DR\_\_\_\_\_\_ AP\_\_\_\_ RR DC IR ID ID: 3WM REV 02/15/22 PRO





# Illinois Department of Revenue 2021 Schedule NR

Attach to your Form IL-1040

# Nonresident and Part-Year Resident Computation of Illinois Tax IL Attachment No. 2

KALYANI WAMANRAO TITARMARE											
Your name as shown on your Form IL-1040	Your Social Security number										
Step 1: Provide the following informat	tion										
Were you, or your spouse if "married filing jointly," a full-yea  Yes  No  If you answered "Yes,"	r resident of Illinois during the tax year?  TOP you cannot use this form (see instructions).										
If you, or your spouse if "married filing jointly," were a part-y	rear resident during the tax year, tell us your residency dates for 2021.										
<b>a</b> I lived in <b>Illinois</b> from / / _ 2 1 to / / _ 2 1 Month Day Year Month Day Year											
<b>b</b> My spouse lived in <b>Illinois</b> from// / 2 1 to/ . Month Day Year Month	/ <u>2 1</u> , and from / / <u>2 1</u> to / / <u>2 1</u> Day Year State Month Day Year Month Day Year										
	ng the tax year, if you were in Illinois only to accompany your spouse who mber spouse's state of residence for tax purposes, check the appropriate box.										
Iowa Kentucky Michigan List any state other than Illinois or any states already indica Enter the two-letter abbreviation of that state.	Wisconsin Military Spouse ated on Line 2 or 3 above, that you claimed residency for tax purposes in 2021.										

### 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)	5_	41,357 <sub>.00</sub>	.00
	6	Taxable interest (federal Form 1040 or 1040-SR, Line 2b)	6 _	.00	.00.
	7	Ordinary dividends (federal Form 1040 or 1040-SR, Line 3b)	7_	.00	.00.
	8	Taxable refunds, credits, or offsets of state and local income taxes			
		(federal Form 1040 or 1040-SR, Schedule 1, Line 1)	8_	.00	.00.
	9	Alimony received (federal Form 1040 or 1040-SR, Schedule 1, Line 2a)	9_	.00	.00.
	10	Business income or loss (federal Form 1040 or 1040-SR, Schedule 1, Line 3)	10 _	.00	.00.
	11	Capital gain or loss (federal Form 1040 or 1040-SR, Line 7)	11_	-168 <sub>.00</sub>	.00.
	12	Other gains or losses (federal Form 1040 or 1040-SR, Schedule 1, Line 4)	12	.00	.00.
ome	13	Taxable IRA distributions (federal Form 1040 or 1040-SR, Line 4b)	13 _	.00	.00.
ļ	14	Pensions and annuities (federal Form 1040 or 1040-SR, Line 5b)	14 _	.00	.00.
<u> </u>	15	Rental real estate, royalties, partnerships, S corporations, trusts, etc.			
		(federal Form 1040 or 1040-SR, Schedule 1, Line 5)	15_	.00	.00.
	16	Farm income or loss (federal Form 1040 or 1040-SR, Schedule 1, Line 6)	16_	.00	.00.
	17	Unemployment compensation (federal Form 1040 or 1040-SR, Schedule 1, Line 7)	17_	.00	.00
	18	Taxable Social Security benefits (federal Form 1040 or 1040-SR, Line 6b)	18 _	.00	.00
	19	Other income. See instructions. (federal Form 1040 or 1040-SR, Schedule 1, Line 9	9)		
		Include winnings from the <b>Illinois State Lottery</b> as Illinois income in Column B.	19_	.00	.00.
	20	Add Column B, Lines 5 through 19. This is the Illinois portion of your federal total in	come	. 20	.00
L	]	Continue with Step 3 on Page 2	- K		



### Schedule NR - Page 2

St	ер	3: Continued		Column A Federal Total	Column B Illinois Portion
	21	Enter the Illinois portion of your federal total income from Page 1, Step 3, Line 20.		21	.00
		Educator expenses (federal Form 1040 or 1040-SR, Schedule 1, Line 11)	22	.00	.00.
		Certain business expenses of reservists, performing artists, and fee-basis			
		government officials (federal Form 1040 or 1040-SR, Schedule 1, Line 12)	23 _	.00	.00
	24	Health savings account deduction (federal Form 1040 or 1040-SR, Schedule 1, Line 13)	24	.00	.00
<u>و</u>	25	Moving expenses for members of the Armed Forces (federal Form 1040 or 1040-SR,			
		Schedule 1, Line 14)			.00.
Income		Deductible part of self-employment tax (federal Form 1040 or 1040-SR, Schedule 1, Line 15)	26 _	.00	.00
	27	Self-employed SEP, SIMPLE, and qualified plans (federal Form 1040 or 1040-SR,			
to	l	Schedule 1, Line 16)			.00
djustments		Self-employed health insurance deduction (federal Form 1040 or 1040-SR, Schedule 1, Line 17)			.00
<u> </u>		Penalty on early withdrawal of savings (federal Form 1040 or 1040-SR, Schedule 1, Line 18)			.00
림		Alimony paid (federal Form 1040 or 1040-SR, Schedule 1, Line 19a)			.00
Sn	31	IRA deduction (federal Form 1040 or 1040-SR, Schedule 1, Line 20)	31	.00	.00
٩	32	Student loan interest deduction (federal Form 1040 or 1040-SR, Schedule 1, Line 21)	32 _	2,500.00	2,500 <sub>.00</sub>
ام	33	RESERVED			
	34	Archer MSA deduction (federal Form 1040 or 1040-SR, Schedule 1, Line 23)		.00	
	35	Other adjustments (see instructions)	35	.00	.00
	36	Add Column B, Lines 22 through 35. This is the Illinois portion of your federal			
		adjustments to income.		36	2,500 <u>.00</u>
	37	Enter your adjusted gross income as reported on your Form IL-1040, Line 1.	37	38,689 <sub>.00</sub>	
	38	Subtract Line 36 from Line 21. This is the Illinois portion of your federal adjusted gro	ss inco	ome. <b>38</b>	-2,500 <sub>.00</sub>
nts		tructions for Column B to properly complete this step.			IIIIIIOIS POLIIOII
stme	39 40 41	Federally tax-exempt interest and dividend income (Form IL-1040, Line 2) Other additions (Form IL-1040, Line 3) Add Column B, Lines 38, 39, and 40. This is the Illinois portion of your total income.	40	.00 .00 41	.00 .00 .00 .00 -2,500.00
djustme	39 40 41 42	Federally tax-exempt interest and dividend income (Form IL-1040, Line 2) Other additions (Form IL-1040, Line 3) Add Column B, Lines 38, 39, and 40. This is the Illinois portion of your total income.  Federally taxed Social Security and retirement income (Form IL-1040, Line 5)	40	.00 .00 <b>41</b>	.00 .00 -2,500.00
Adjustme	39 40 41 42 43	Federally taxed Social Security and retirement income (Form IL-1040, Line 5)	40	.00 .00	.00 .00
	39 40 41 42 43	illinois income tax overpayment included on your led. Form 1040 or 1040-31,	40	.00 .00 <b>41</b>	.00 .00 -2,500.00 .00
1 1	43	Schedule 1, Line 1. (Form IL-1040, Line 6)	40	.00 .00 <b>41</b>	.00 .00 -2,500.00 .00
Illinois Adjustme	44	illinois income tax overpayment included on your led. Form 1040 or 1040-31,	40	.00 .00 <b>41</b> .00	.00 .00 -2,500.00
Illinois	44 45 <b>ep</b>	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax	40	.00 .00 <b>41</b> .00	.00 .00 -2,500.00 .00 .00
Illinois	44 45 <b>ep</b>	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is	40	.00 .00 <b>41</b> .00 .00 .00	.00 .00 -2,500.00 .00 .00
Illinois	44 45 <b>ep</b>	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income.	40	.00 .00 <b>41</b> .00	.00 .00 -2,500.00 .00 .00
St	44 45 <b>ep</b>	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income. If Line 46 is zero, skip Lines 47 through 51, and enter "0" on Line 52.	42 43 44	.00 .00 41 .00 .00 .00 45	.00 .00 -2,500.00 .00 .00
St	44 45 <b>ep</b> 46	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income. If Line 46 is zero, skip Lines 47 through 51, and enter "0" on Line 52. Enter the base income from Form IL-1040, Line 9.	42 43 44	.00 .00 <b>41</b> .00 .00 .00	.00 .00 -2,500.00 .00 .00 .00
St	44 45 <b>ep</b> 46	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income. If Line 46 is zero, skip Lines 47 through 51, and enter "0" on Line 52. Enter the base income from Form IL-1040, Line 9. Divide Line 46 by Line 47 (round to three decimal places). Enter the appropriate	40	.00 .00 41 .00 .00 .00 45	.00 .00 -2,500.00 .00 .00 .00
St	44 45 <b>ep</b> 46 47 48	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income. If Line 46 is zero, skip Lines 47 through 51, and enter "0" on Line 52. Enter the base income from Form IL-1040, Line 9. 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.	40	.00 .00 41 .00 .00 .00 .45	.00 .00 -2,500.00 .00 .00 .00
St	44 45 <b>ep</b> 46 47 48 49	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income. If Line 46 is zero, skip Lines 47 through 51, and enter "0" on Line 52. Enter the base income from Form IL-1040, Line 9. 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. Enter your exemption allowance from your Form IL-1040, Line 10.	40	.00 .00 41 .00 .00 .00 45	.00 .00 -2,500.00 .00 .00 .00
Illinois	44 45 <b>ep</b> 46 47 48 49	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income. If Line 46 is zero, skip Lines 47 through 51, and enter "0" on Line 52. Enter the base income from Form IL-1040, Line 9. 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. Enter your exemption allowance from your Form IL-1040, Line 10. Multiply Line 49 by the decimal on Line 48. This is your Illinois exemption	40	.00 .00 41 .00 .00 .00 45	.00 .00 -2,500.00 .00 .00 .00
Calculations   Calculations	44 45 ep 46 47 48 49 50	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income. If Line 46 is zero, skip Lines 47 through 51, and enter "0" on Line 52. Enter the base income from Form IL-1040, Line 9. 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. Enter your exemption allowance from your Form IL-1040, Line 10. Multiply Line 49 by the decimal on Line 48. This is your Illinois exemption allowance.	40	.00 .00 41 .00 .00 .00 .45	.00 .00 -2,500.00 .00 .00 .00
St	44 45 ep 46 47 48 49 50	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income. If Line 46 is zero, skip Lines 47 through 51, and enter "0" on Line 52. Enter the base income from Form IL-1040, Line 9. 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. Enter your exemption allowance from your Form IL-1040, Line 10. Multiply Line 49 by the decimal on Line 48. This is your Illinois exemption allowance. Subtract Line 50 from Line 46. This is your Illinois net income.	40	.00 .00 41 .00 .00 .00 45 46 .00	
Calculations Calculations	44 45 <b>ep</b> 46 47 48 49 50 51	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income. If Line 46 is zero, skip Lines 47 through 51, and enter "0" on Line 52. Enter the base income from Form IL-1040, Line 9. 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. Enter your exemption allowance from your Form IL-1040, Line 10. Multiply Line 49 by the decimal on Line 48. This is your Illinois exemption allowance. Subtract Line 50 from Line 46. This is your Illinois net income. Enter the amount here and on your Form IL-1040, Line 11.	40	.00 .00 41 .00 .00 .00 45	
Calculations   Calculations	44 45 <b>ep</b> 46 47 48 49 50 51	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income. If Line 46 is zero, skip Lines 47 through 51, and enter "0" on Line 52. Enter the base income from Form IL-1040, Line 9. 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. Enter your exemption allowance from your Form IL-1040, Line 10. Multiply Line 49 by the decimal on Line 48. This is your Illinois exemption allowance. Subtract Line 50 from Line 46. This is your Illinois net income. Enter the amount here and on your Form IL-1040, Line 11. Multiply the amount on Line 51 by 4.95% (.0495). This amount may not be less than zero.	40	.00 .00 41 .00 .00 .00 45 46 .00	
Calculations   Calculations	44 45 <b>ep</b> 46 47 48 49 50 51	Schedule 1, Line 1. (Form IL-1040, Line 6) Other subtractions (Form IL-1040, Line 7) Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.  5: Figure your Illinois income and tax Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income. If Line 46 is zero, skip Lines 47 through 51, and enter "0" on Line 52. Enter the base income from Form IL-1040, Line 9. 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. Enter your exemption allowance from your Form IL-1040, Line 10. Multiply Line 49 by the decimal on Line 48. This is your Illinois exemption allowance. Subtract Line 50 from Line 46. This is your Illinois net income. Enter the amount here and on your Form IL-1040, Line 11.	40	.00 .00 41 .00 .00 .00 45 46 .00	



### Illinois Department of Revenue

							_								_							
Submission ID																						

## 2021 IL-8453 Illinois Individual Income Tax Electronic Filing Declaration (Do not mail Form II -8453 to the Illinois Department of Revenue unless it is requested for review.)

Step 1: Provide taxpayer information				
Olc	KALYANI WAMANRAO		RMARE	3 9 8 _ 7 5 _ 1 7 7 3
	·	irst name (and last name if differe	nt) Last name	Social Security number
Print 5115 MONTEGO BAY DRIVE				
typ	e Mailing address			Spouse's Social Security number
	IRVING	TX	75038	<u>(845) 546-7984</u>
	City	State	ZIP	Daytime phone number
Ste	p 2: Complete information fron	n tax return		
1	Net income from Form IL-1040, Line	e 11		1l <u>00</u> _
2	Tax from Form IL-1040, Line 14			<b>2</b> 0 <u>1.00</u>
3	Illinois Income Tax withheld from Fo	rm IL-1040, Line 25 <b>only</b> (	enter "0" if none)	30 <u>0</u> 0
4	Overpayment from Form IL-1040, Li	ine 36		41_00_
5	Total amount due from Form IL-104	0, Line 40		50l_00
6	Filing status: X Single Marri	ed filing jointly Marrie	d 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):				
11	Electronic funds withdrawal amount	•		
		, <u> </u>		
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. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.  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. I authorize the financial institutions involved in the processing of an electronic overpayment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.				
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.				
Sig her	re Your signature	Date	Spouse's signatu	rre (if joint return, <b>both</b> 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		03/05/2022 Date	_ Check if paid preparer: ☒ (See instructions.)
	GLOBAL TAXES LLC		Bute	P 0 2 0 8 2 7 0 3
ER	Firm's name or your name if self-employed			$- \frac{P}{Y_{\text{Our}} PTIN} \frac{0}{2} \frac{2}{0} \frac{0}{8} \frac{8}{2} \frac{2}{7} \frac{7}{0} \frac{0}{3}$
use	2530 Pehhle Creek In			3 0 - 1 0 1 7 1 9 6
onl	y Mailing address			Federal employer identification number (FEIN)
	Cumming	GA	30041	(678) 965-9522
	City	State	ZIP	Daytime phone number
Cto	n 6: Attach required document	- / W 0 f 100	0 (    4040)	·

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.

