

Illinois Department of Revenue 2022 Form IL-1040 Individual Income Tax Return

or for fiscal year ending \_\_\_\_/\_\_\_

Step 1: Personal Information Enter personal information and Social Security numbers (SSN). You must provide the entire SSN(s) - no partial SSN.

	OMP ANU 3 C HAW	RAKASH HYA OMMONS CIRCLI THORN WOODS	IL	838-46-7735 NACHAM JAMILI 60047 OMPRAKASH.JUST		ng separately	owed 🗌 Head of	household	
C	Ch	eck If someone car	n claim yo	u, or your spouse if	filing jointly, as a	dependent. See instruc	tions. 🗌 You 🔲	Spouse	
D	Ch	eck the box if this a	applies to	you during 2022:	Nonresident	t - Attach Sch. NR	Part-year resident -	Attach Sch	n. NR
	Ste	p 2: Income						(Who	le dollars only)
	1 2 3 4	Federal adjusted g	mpt intere Attach Sc	hedule M.		1040-SR, Line 11. federal Form 1040 or 1	040-SR, Line 2a.	1 2 3 4	295,139.00 .00 .00 295,139.00
T		p 3: Base Incom							
ere	5 6	received if include Illinois Income Tax	ed in Line x overpayı	d certain retiremen 1. <b>Attach</b> Page 1 d ment included in fed	of federal return		5		
forms h	7 8 9		ns. <b>Attach</b> Ind 7. This	Schedule M. is the total of your tract Line 8 from Li			6 7	0 0 8 9	<u>.00</u> 295,139 <sub>00</sub>
999		p 4: Exemptions			116 4.			<u>9</u>	
Staple W-2 and 1099 forms here		<ul> <li>a Enter the exem</li> <li>b Check if 65 or</li> <li>c Check if legally</li> <li>d If you are claimi Attach Schedul</li> </ul>	nption amo older: y blind: ing depend le IL-E/EIC		buse # of cl buse # of cl bunt from Schedu	See instructions. heckboxes X \$1,000 heckboxes X \$1,000 ule IL-E/EIC, Step 2, Line	= c	.00	4,850 <u>.00</u>
S	Ste	p 5: Net Income	and Tax						
↑		Nonresidents an Residents: Multip	n <b>d part-ye</b> ply Line 1	1 by 4.95% (.0495)	er the <b>Illinois net</b> . Cannot be less		NR. <b>Attach</b> Schedule		290,289 <sub>.00</sub>
<b>●</b> ∧-0	13 14	Recapture of inve	estment ta	ear residents: Ente x credits. Attach S and 13. Cannot be	chedule 4255.	schedule NR.		12 13 14	14,369 <u>.00</u> .00 14,369 <u>.00</u>
104	Ste	p 6: Tax After No	onrefund	dable Credits					
Staple your check and IL-1040-V	15 16		K-12 edu	state while an Illin cation expense cre			15 16	<u>00.</u> .00	
sk a	17	Credit amount fro	om Sched	ule 1299-C. Attach			17	.00	0
ır chet	18 19	Tax after nonrefu	undable o	his is the total of yo credits. Subtract Li		not exceed the tax amo	unt on Line 14.	18 19	0 <u>.00</u> 14,369 <u>.00</u>
you	Ste 20	p 7: Other Taxes		c. See instructions.				20	.00
ple	21	Use tax on interne	iet, mail oi	rder, or other out-of	-state purchase	s from UT Worksheet o	or UT Table		
Sta	22	in the instructions			rom Act and cal	of agosto by somically		21 22	0.00
▼	22 23	Total Tax. Add Lir			rani Act and Sal	e of assets by gaming lid	Jensee surcharges.	22 23	<u>.00</u> 14,369 <sub>.00</sub>



24 Total tax from	m Page 1, Line 23	3.													24	14,369 <u>.00</u>
Step 8: Payments and Refundable Credit																
25 Illinois Incom	<b>25</b> Illinois Income Tax withheld. <b>Attach</b> Schedule IL-WIT. <b>25</b> 15,045.									45.(	00					
26 Estimated page	yments from Form	ns IL-1040-ES and	IL-50	5-I,												
including any	overpayment app	lied from a prior ye	ear ret	urn.						26_				.(	<u>)0</u>	
27 Pass-through	withholding. Attac	ch Schedule K-1-P	or K-1	I-T.						27_				.(	<u>00</u>	
-	-	ttach Schedule K-								28_					<u>00</u>	
		edule IL-E/EIC, Ste	•			1 Sche	edule IL-	-E/EIC	С.	29_				.(	<u>00</u>	
	nts and refundab	eredit. Add Line	es 25	throu	gh 29.										30	15,045.00
Step 9: Total																
•		, subtract Line 24 fr													31	676.00
· · · · ·		, subtract Line 30 fr													32	.00
		mated Tax Pena	-		onatic	ns										
		rpayment of estima								33_				.0	0	
		s of your federal g					•									
	• • •	ise are 65 or older			-		-		•							
	-	not received even	ly duri	ing th	ie year	and	you an	nual	ized	you	r inc	om	e on	For	m 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.																
				dividı	ual Inco	ome <sup>-</sup>	Tax retu	urn iı		•	viou	s ta	ıx ye		_	
34 Voluntary cha	aritable donations.	Attach Schedule	G.	dividu	ual Inco	ome <sup>-</sup>	Tax retu	urn ii		e pre <b>34</b> _	viou	s ta	ıx ye		0	
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34 Voluntary cha	aritable donations.	Attach Schedule Add Lines 33 and	G.	dividı	ual Inco	ome <sup>-</sup>	Tax retu	urn ii		•	viou	s ta	ix ye			.00
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41 Check this box if IDOR may share your income information with other Illinois state agencies in order to determine your eligibility for health insurance benefits. See instructions for more information.

Signature - Note: 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	Your signature		Date (mm/dd/yyyy)	Spouse's sig	Date (mm/dd/yyy	/)	Daytime phone number				
Here								(612) 478	-9004		
	Print/Type paid prepa	irer's name		Paid prepare	r's signature	Date (mm/dd/yyy	/)	Check if	Paid Preparer's PTIN		
Paid	SYAM PRIYA RAM SAGA	AR GUPTA TAI	LLAM	SYAM PRIYA R	AM SAGAR GUPTA TALLAM	04/04/202	3	self-employed P02082703			
Preparer Use Only	Firm's name GLOBAL TAXES LLC				Firm's FEIN		843171965				
	Firm's address	245 ROO	NEY CT E	BRUNSWIC	KNJ 08816	Firm's phone		(678) 965	-9522		
Third	Designee's name (pl	ease print)			Designee's phone nun	nber		Check if the Department may discuss this return with the third			
Party											
Designee			( )		party designee shown in this step.						

## Refer to the 2022 IL-1040 Instructions for the address to mail your return.



Illinois Department of Revenue

# 2022 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)

OMPRAKASH NACHAM Your name as shown on Form IL	-1040	<u>2</u> 7 Your Social S	<u>4</u> _ <u>1</u> Security numbe	r 7 – 1	2	0 5
Form type En		<b>Column C</b> Wages, Winnings, Gross ions, Compensation, et	s Illinois Wag	Column D Jes, Winnings, Gross s, Compensation, etc	IIIi	Column E nois Income ax Withheld
<b>1</b> <u>W</u> <u>32-03</u>	375147 000 8 <b>\$</b>	115,948 <b>.00</b>	\$	115,948 <b>.00</b>	\$	6,182 <b>.00</b>
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)

ANUHYA JAMILI	8	3	8	4	6		7	7	3	5
Your spouse's name as shown on Form IL-1040	Your s	pouse	's Socia	al Security	numbe	r				

	Column A Form type	Column B Employer/Payer Identification Number	Federal Wag	column C ges, Winnings, Gross s, Compensation, etc.	Illinois Wa	Column D ages, Winnings, Gross ons, Compensation, etc.	III	Column E inois Income fax Withheld
6	W	22-3338103 000 3	\$	72,287 <b>.00</b>	\$	72,287 <b>.00</b>	\$	3,578 <b>.00</b>
7	W	26-1186485 0007	\$	54,821 <b>.00</b>	\$	54,821 <b>.00</b>	\$	2,713 <b>.00</b>
8	W	361924025/0006	- \$	3,043 <b>.00</b>	\$	3,043 <b>.00</b>	\$	151 <b>.00</b>
9	W	20-8775560	\$	49,040 <u>•00</u>	\$	49,040 <u>•00</u>	\$	2,421 <b>.00</b>
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 \$** 15,045**.00** 

# ➡ Attach all Schedules IL-WIT to your IL-1040.

3	Illinois Department of Reve	enue 🗌		
S.	2022 IL-8453 Illinois I ( <u>Do not mail</u> Form IL-8453 to the	Individual	Income Tax Elect	
Step	1: Provide taxpayer information			
	OMPRAKASH ANUHYA JAMII			<u>2</u> <u>7</u> <u>4</u> <u>-</u> <u>1</u> <u>7</u> <u>-</u> <u>1</u> <u>2</u> <u>0</u> <u>5</u>
Drint	First name and middle initial Spouse's first name (an	nd last name if differ	ent) Last name	Social Security number
or	t 3 COMMONS CIRCLE Mailing address			8 3 8 - 4 6 - 7 7 3 5 Spouse's Social Security number
type	HAWTHORN WOODS	IL	60047	(612) 478-9004
	City	State	ZIP	Daytime phone number
Ster	2: Complete information from tax ret	urn	Choose one: 🗙 II	
-	Net income from Form IL-1040 or IL-1040-X,			<b>1</b> 290,2891.00
	Tax from Form IL-1040 or IL-1040-X, Line 14			<b>2</b> 14,369  <b>00</b>
<b>3</b>	Illinois Income Tax withheld from Form IL-104	0 or IL-1040-X,	Line 25 only (enter "0" if no	
	Overpayment from Form IL-1040, Line 36 or			4676  00
	Total amount due from Form IL-1040, Line 40			5
<b>6</b> I	Filing status: Single $\stackrel{\textstyle{\times}}{}$ Married filing jo	ointly Marrie	ed filing separately Wide	owed Head of household
does withir 7   8 / 9 <sup>-</sup> 10   11		DOR will only pe       ernational funds.       2     2       0     1     0       ings       Irawn:     _//	erform direct transactions ( <i>e.g.</i> Electronic payments will not	within the electronic transmission. Illinois , debit, deposit) with financial institutions located be accepted and refunds will be via paper check.
	• 4: Taxpayer declaration and signature			
×	I consent that my refund may be directly d correct. If I have filed a joint return, this is			
	I authorize the Illinois Department of Reve withdrawal as designated in the electronic p financial institutions involved in the proces necessary to answer inquiries and resolve	portion of my 202 sing of an elect	22 Illinois Original or Amender ronic overpayment of taxes to	d Individual Income Tax return. I authorize the
	I do not want direct deposit of my refund, o	or an electronic	funds withdrawal (direct debi	t) of my balance due.
returr and a	er penalties of perjury, I declare the information of n originator (ERO) are identical. To the best of m accompanying information may be sent to IDOR accepted or rejected. If rejected, I authorize ID0	ny knowledge, m R by my ERO. I au	y return is true, correct, and co uthorize IDOR to inform my EF	omplete. I consent that my return, this declaration, RO and/or the transmitter when my return has
Sigr	Your signature	Date	Spouse's signature (if	joint return, <b>both</b> must sign) Date
	5: Electronic return originator (ERO)			· · · · · · · · · · · · · · · · · · ·
I dec inforr		tronic Form IL-1 s program and c	1040 or IL-1040-X, the inform declare, under penalties of pe	ation on this Form IL-8453, and accompanying
			04/04/2023	Check if paid preparer: X (See instructions.)
	ERO's signature		Date	
ERO	GLOBAL TAXES LLC			<u>P</u> 02082703
use	r inn s name or your name ir seir-employed			Your PTIN
only	245 ROONEY CT Mailing address			$\frac{8}{\text{Federal employer identification number (FEIN)}} = \frac{8}{2} - \frac{2}{2} - \frac{1}{2} - \frac{4}{2} - \frac{8}{2} - \frac{7}{2}$
	F BRUNSWICK	NJ	08816	(678) 965-9522

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.

State

City

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.

ZIP

