Form **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

Submi	ission Identification Number (SID)		-		
Taxpaye	er's name	Social secu	rity numb	er	
SAN	JEEV THUMMALA	101-83	3-0409	9	
Spouse'	's name	Spouse's so	cial secu	rity numb	er
	ASA YADAV NUCHU	934-96			
Part	, , ,	nter year you	are aut	horizin	g.)
	whole dollars only on lines 1 through 5.				
	Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.				
1	Adjusted gross income		1		6,523.
2 3	Total tax		2		1,564.
3 4	Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3		<u>6,619.</u>
4 5	Amount you owe		5		5,055.
Part		d keen a co		our ret	urn)
	penalties of perjury, I declare that I have examined a copy of the income tax return (original or amend				
to send for any Agent t paymen authori: paymen busines taxes t person	(original or amended) I am now authorizing. I consent to allow my intermediate service provider, trard my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account of my federal taxes owed on this return and/or a payment of estimated tax, and the financial instituation is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terming the unit of the payment (settlement) date. I also authorize the financial institutions involved in the receive confidential information necessary to answer inquiries and resolve issues related to the all identification number (PIN) below is my signature for the income tax return (original or amended) and the payment (season).	rejection of the e U.S. Treasury indicated in the tution to debit th nate the authorize requests must be the processing the payment. I further than the processing the payment. I further than the processing the payment.	transmis and its c tax prep e entry t zation. T pe receiv of the ele rther ac	sion, (b) lesignate learation so this acc o revoke led no la ectronic p knowledge	the reasor d Financia oftware fo count. This (cancel) a ter than 2 payment o
	nic Funds Withdrawal Consent.				7
-	nyer's PIN: check one box only	. 511 3	3 0 4	0 9	
×	I authorize to enter or genera	· E		digits, but	
	signature on the income tax return (original or amended) I am now authorizing.	a	on't ente	r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I are if you are entering your own PIN and your return is filed using the Practitioner PIN m below.				
Your s	signature ► Date ▶	-			
Snous	se's PIN: check one box only				
X	_	sto my DINI	2 6	5 6	as my
_	ERO firm name	· · ·		diaits. but	_ ,
	signature on the income tax return (original or amended) I am now authorizing.			r all zeros	
	I will enter my PIN as my signature on the income tax return (original or amended) I are if you are entering your own PIN and your return is filed using the Practitioner PIN m below.				
Spous	se's signature ▶ Date ▶	•			
	Practitioner PIN Method Returns Only—continue bel	ow			
Part	III Certification and Authentication — Practitioner PIN Method Only				
ERO's	s EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.				
	Serior in Enter your on aight Entertone wearsy your more aight controlled in in	Don't er	ter all ze	ros	
authori	y that the above numeric entry is my PIN, which is my signature for the electronic individual incoming the control of the for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am suments 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 Pinch P	ubmitting this re-	turn in a	ccordand	
ERO's	s signature ► Date ▶	•			
	ERO Must Retain This Form — See Instructions				
	Don't Submit This Form to the IRS Unless Requested T				

Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

2022	
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OMB No. 1545-0074

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

Filing Status Check only				ed filing separately		_	•	, –	spou	se (QSS)	-
one box.		u checked the MFS box, enter the r		our spouse. If you	check	ed the HOH or	r QSS box, ent	er the	child's	name if th	e qualifying
Your first name		on is a child but not your dependen	Last na	mo					our soo	ial securit	v numbor
	and mi	udie mitiai								3-0409	-
SANJEEV	nouse's	first name and middle initial	Last na	MALA me							urity number
MANASA N			NUCH							6-2656	
		r and street). If you have a P.O. box, see					Apt. no.				on Campaign
1318 E A	,						11	- 1		ere if you,	
		ce. If you have a foreign address, also c	omplete si	paces below.	Sta	ite	ZIP code	s	pouse i	f filing join	tly, want \$3
SCHAUMBU		, ,,,			II		60173		_	this fund. (w will not	Checking a
Foreign country			l F	Foreign province/stat	_		Foreign postal of			or refund.	change
				3 p		,				You	Spouse
Digital	At an	y time during 2022, did you: (a) red	eive (as	a reward. award. d	or pavr	ment for prope	rtv or services	s): or (b) sell.		
Assets		ange, gift, or otherwise dispose of								Yes	⊠ No
Standard	Som	eone can claim:	ependent	Your spot	use as	a dependent					
Deduction		Spouse itemizes on a separate retu	rn or you	were a dual-statu	s alien	1					
Age/Blindness	You:	☐ Were born before January 2,	1958	Are blind S	pouse	: Was bor	rn before Janu	ary 2, ⁻	1958	☐ Is bli	nd
Dependents	s (see	instructions):		(2) Social secur	ity	(3) Relationsh	ip (4) Check	the box	if qualifi	es for (see	instructions):
If more		rst name Last name		number	-	to you	Child	tax cred	lit C	Credit for oth	ner dependents
than four	KAR	THIK THUMMALA		960-96-52	04	Son				[X
dependents, see instruction:											
and check											
here \square											
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .					1a	4	16,523.
	b	Household employee wages not r	eported	on Form(s) W-2.					1b		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1	a (see ins	structions)					1c		
attach Forms	d	Medicaid waiver payments not re	ported or	n Form(s) W-2 (see	e instru	uctions)			1d		
W-2G and 1099-R if tax	е	Taxable dependent care benefits		·					1e		
was withheld.	f	Employer-provided adoption bene							1f		
If you did not	g	Wages from Form 8919, line 6 .							1g		
get a Form W-2, see	h	Other earned income (see instruc-				1			1h		0.
instructions.	i	Nontaxable combat pay election	(see instr	ructions)		<u>1</u> i				١.	
	Z	Add lines 1a through 1h							1z	4	16,523.
Attach Sch. B	2a	Tax-exempt interest	2a			axable interes			2b		
if required.	3a	Qualified dividends	3a			Ordinary divide			3b		
	4a	IRA distributions	4a			axable amoun			4b		
Standard Deduction for—	5a	Pensions and annuities	5a			axable amoun			5b		
Single or	6a	Social security benefits	6a			axable amoun	τ		6b		
Married filing separately,	c	If you elect to use the lump-sum e		·	•	,		. 📙	7	1	
\$12,950	7	Capital gain or (loss). Attach Sche						. Ш	7		
Married filing jointly or	8	Other income from Schedule 1, lir		This is your total :					8		IC F22
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7							9	4	16,523.
\$25,900	10	Adjustments to income from Sche							10		
Head of household,	11	Subtract line 10 from line 9. This i	•	-					11		<u>16,523.</u>
\$19,400	12	Standard deduction or itemized							12	1	25,900.
If you checked any box under	13	Qualified business income deduc							13	-	
Standard Deduction,	14 15	Add lines 12 and 13 Subtract line 14 from line 11. If ze							15		25,900.
see instructions.	10	Cubitact inte 14 itotil ille 11. Il Ze	io oi iest	s, ciitci -∪ IIIIS IS	your I	LUNADIE IIICUII			15		20,623.

Form 1040 (2022	2)									F	Page 2
Tax and	16	Tax (see instructions). Check if	any from Form	(s): 1 881	4 2 🗌 4972	3 [16	2,00	64.
Credits	17	Amount from Schedule 2, line	3						17		
	18	Add lines 16 and 17							18	2,00	64.
	19	Child tax credit or credit for ot	her dependent	s from Sched	ule 8812				19	50	00.
	20	Amount from Schedule 3, line	8						20		
	21	Add lines 19 and 20							21	50	00.
	22	Subtract line 21 from line 18. I	f zero or less, e	enter -0					22	1,50	64.
	23	Other taxes, including self-em	ployment tax,	from Schedule	2, line 21 .				23		0.
	24	Add lines 22 and 23. This is yo	our total tax						24	1,50	
Payments	25	Federal income tax withheld fr									
•	а	Form(s) W-2				25	a 6	,619.			
	b	Form(s) 1099				25	b				
	С	Other forms (see instructions)				25	С				
	d	Add lines 25a through 25c .							25d	6,6	19.
K	26	2022 estimated tax payments	and amount a	oplied from 20	21 return				26		
If you have a qualifying child,	27	Earned income credit (EIC) .				27	7				
attach Sch. EIC.	28	Additional child tax credit from					3				
	29	American opportunity credit from	om Form 8863	, line 8		29	9				
	30	Reserved for future use				30)				
	31	Amount from Schedule 3, line					1				
	32	Add lines 27, 28, 29, and 31. T	These are your	total other pa	ayments and re	efunda	ble credits		32		
	33	Add lines 25d, 26, and 32. The	,		-				33	6,6	19.
Refund	34	If line 33 is more than line 24,							34	5,0!	55.
neiulia	35a	Amount of line 34 you want re				-	=		35a	5,0!	55.
Direct deposit?	b	Routing number 0 8 1 9						Savings			
See instructions.	d	Account number 2 9 1 (_		Ü			
	36	Amount of line 34 you want ap				36	3				
Amount You Owe	37	Subtract line 33 from line 24. The For details on how to pay, go				s			37		
	38	Estimated tax penalty (see inst	tructions) .			38	3				
Third Party Designee		you want to allow another p	person to disc	uss this retur	n with the IR	S? See	Yes. C	omplete	below.	⊠ No	
· ·	De	signee's		Phone				onal iden	tification		
	nar	ne		no.			num	ber (PIN)			
Sign Here		der penalties of perjury, I declare tha ief, they are true, correct, and comple			, , ,			,		,	0
TICIC	Yo	ur signature		Date	Your occupation	n		Pro	tection P	nt you an Identity IN, enter it here	
Joint return?					SOFTWARE		INEER	`	e inst.)		$\perp \perp$
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return, bo	th must sign.	Date	Spouse's occup	oation				nt your spouse a ection PIN, enter	
your records.					HOME MAK	רס		- 1	e inst.)	Schon File, enter	Triere
	———	one no. (224)659-9895		Email address			V@CMATI C	лм 			
			Preparer's signat		SANJEEV.THU	Da		PTIN		Check if:	
Paid		,	, p = 5 5.9.14t				-			Self-emplo	oved
Preparer		 m's name GLOBAL TAXI	PC TTC					Dha	200 00	can ample	
Use Only		m's name GLOBAL TAXI m's address 245 ROONEY		NSWICK N	J 08816				one no.		
0-1				TADMICK INC				Firr	n's EIN	- 4044	0 (0.5.5.5
GO TO WWW.Irs.go	v/r-orn	11040 for instructions and the latest	iniormation.		BAA	RE∖	/ 01/09/23 PRO			Form 1040	J (2022)

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

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

2022

OMB No. 1545-0074

Attachment Sequence No. 47

Your social security number

Department of the Treasury Internal Revenue Service Name(s) shown on return Go to www.irs.gov/Schedule8812 for instructions and the latest information.

101-83-0409 SANJEEV THUMMALA & MANASA YADAV NUCHU **Child Tax Credit and Credit for Other Dependents** 1 Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR 1 46,523. Enter income from Puerto Rico that you excluded 2a Enter the amounts from lines 45 and 50 of your Form 2555 . . . b 2b 0 c Enter the amount from line 15 of your Form 4563 Add lines 2a through 2c 2d3 3 46,523. 4 Number of qualifying children under age 17 with the required social security number 0 5 5 6 Number of other dependents, including any qualifying children who are not under age Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4. 7 7 500. 8 8 500. Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000 9 400,000. Subtract line 9 from line 3. 10 • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 10 0. 11 11 0. Is the amount on line 8 more than the amount on line 11? . . . 12 500. No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lines 14 and 27. **X** Yes. Subtract line 11 from line 8. Enter the result. 13 Enter the amount from the Credit Limit Worksheet A 13 2,064. Enter the smaller of line 12 or 13. This is your child tax credit and credit for other dependents. 500. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19. If the amount on line 12 is more than the amount on line 14, you may be able to take the additional child tax credit on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

BAA

Schedule 8812 (Form 1040) 2022

Part	II-A Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line	27 .	
16a	Subtract line 14 from line 12. If zero, stop here; you cannot take the additional child tax credit. Skip Parts II-A		
	and II-B. Enter -0- on line 27	16a	0.
b	Number of qualifying children under 17 with the required social security number: x \$1,500.		
	Enter the result. If zero, stop here ; you cannot claim the additional child tax credit. Skip Parts II-A and II-B.		
	Enter -0- on line 27	16b	
	TIP: The number of children you use for this line is the same as the number of children you used for line 4.		
17	Enter the smaller of line 16a or line 16b	17	
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result $\dots \dots \dots \dots \dots \dots \dots \dots \dots$	20	
	Next. On line 16b, is the amount \$4,500 or more?		
	No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	☐ Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
	Otherwise, go to line 21.		
Part	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	s of P	uerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see		
	instructions		
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form		
	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22		
23	Add lines 21 and 22		
24	1040 and		
	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27,		
	and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	
26	Enter the larger of line 20 or line 25	26	
	Next, enter the smaller of line 17 or line 26 on line 27.		
	II-C Additional Child Tax Credit		
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	

or for fiscal year ending	_		/	_
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Step 1: Personal Information Enter personal information and Social Security numbers (SSN). You must provide the entire SSN(s) - no partial SSN.

SAI MAN	1-83-0409 1984 NJEEV NASA YADAV	934-96-2656 THUMMALA NUCHU					
131	18 E ALGONQUIN RD		11		NATIONAL CONTRACTORS OF		\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
SCH	HAUMBURG IL	60173	COOK	IIII ISAA ISAA CIRAA KARAA	PANA PER ANNA PER PER ANTARIEN	LISEDIA ISA ISA	ABANKA III
		SANJEEV.THUMMA	LA.Y@GMAIL.CO	MC			
B Fil	ing status: 🔲 Single 🗵	Married filing jointly	√	ling separately \text{Widowe}	d 🔲 Head of h	nousehold	
C C	neck If someone can claim	you, or your spouse if	filing jointly, as	a dependent. See instruction	s. 🗌 You 🔲 🤄	Spouse	
		1		nt - Attach Sch. NR 🔲 Par			NR
		to you during 2022.		it Attaon contract	r your rootdone		dollars only)
_	ep 2: Income		Town 1010 o	# 1040 CD 1 inc 11		4	
1 2	Federal adjusted gross inc			r 1040-5R, Line 11. r federal Form 1040 or 1040	-SR. Line 2a.	2	46,523 <u>.00</u> .00
3	Other additions. Attach S				or i,o	3	.00
4	Total income. Add Lines	1 through 3.				4	46,523 _{.00}
Ste	ep 3: Base Income						
5	Social Security benefits a				_		
2 6	received if included in Lir				5	.00	
	Illinois Income Tax overpa Schedule 1, Ln. 1.	ayment included in le	derai Form 104	0 01 1040-SH,	6	.00	
2 7	Other subtractions. Attac	ch Schedule M.			7	.00	
8	Add Lines 5, 6, and 7. Th		subtractions.			8	.00.
5 9	Illinois base income. Su	ubtract Line 8 from Li	ine 4.			9	46,523 _{.00}
Ste	ep 4: Exemptions						
10	a Enter the exemption arb Check if 65 or older:c Check if legally blind:	☐ You + ☐ Spe	ouse # of o	See instructions. checkboxes X \$1,000 = checkboxes X \$1,000 =			
ב ט			ount from Sched	dule IL-E/EIC, Step 2, Line 1.	. 2.42	E	
-					d 2,42	<u>3 .00</u> 10	7,275,00
5	Attach Schedule IL-E/E		th 10d				
	Exemption allowance.	Add Lines 10a throug	gh 10d.				
	Exemption allowance. App 5: Net Income and Ta	Add Lines 10a throug ax					
	Exemption allowance. A ep 5: Net Income and Ta Residents: Net income.	Add Lines 10a throug ax . Subtract Line 10 fro	om Line 9.	t income from Schedule NR.	Attach Schedule		39,248.00
11	Exemption allowance. A ep 5: Net Income and Ta Residents: Net income.	Add Lines 10a through ax . Subtract Line 10 fro -year residents:	om Line 9. er the Illinois ne	t income from Schedule NR	Attach Schedule		
11 12	ep 5: Net Income and Ta Residents: Net Income. Nonresidents and part- Residents: Multiply Line Nonresidents and part-	Add Lines 10a through ax . Subtract Line 10 fro -year residents: Enter a 11 by 4.95% (.0495) -year residents: Enter	om Line 9. er the Illinois ne). Cannot be led er the tax from	ss than zero. Schedule NR.	Attach Schedule	NR. 11	39,248 _{.00} 1,943 _{.00}
11 12 13	ep 5: Net Income and Ta Residents: Net income. Nonresidents and part- Residents: Multiply Line Nonresidents and part- Recapture of investment	Add Lines 10a through ax . Subtract Line 10 fro -year residents: Enter 11 by 4.95% (.0495) -year residents: Enter tax credits. Attach S	om Line 9. er the Illinois ne). Cannot be leser the tax from Schedule 4255.	ss than zero. Schedule NR.	Attach Schedule	NR. 11 12 13	39,248 _{.00} 1,943 _{.00}
11 12 13 14	ep 5: Net Income and Ta Residents: Net income. Nonresidents and part- Residents: Multiply Line Nonresidents and part- Recapture of investment Income tax. Add Lines 1	Add Lines 10a through fax. Subtract Line 10 fro-year residents: Entered 11 by 4.95% (.0495) year residents: Entered 12 and 13. Cannot be	om Line 9. er the Illinois ne). Cannot be leser the tax from Schedule 4255.	ss than zero. Schedule NR.	Attach Schedule	NR. 11	39,248 _{.00} 1,943 _{.00}
11 12 13 14 Ste	ep 5: Net Income and Ta Residents: Net income. Nonresidents and part- Residents: Multiply Line Nonresidents and part- Recapture of investment Income tax. Add Lines 1	Add Lines 10a throughax . Subtract Line 10 frogen residents: Entered 11 by 4.95% (.0495) repar residents: Entered tax credits. Attach Selection 13. Cannot be andable Credits	om Line 9. er the Illinois ne). Cannot be leser the tax from Schedule 4255. e less than zero	ss than zero. Schedule NR.	`	NR. 11 12 13 14	39,248 _{.00} 1,943 _{.00}
11 12 13 14 Ste 15	ep 5: Net Income and Ta Residents: Net income. Nonresidents and part- Residents: Multiply Line Nonresidents and part- Recapture of investment Income tax. Add Lines 1 ep 6: Tax After Nonrefu Income tax paid to anoth	Add Lines 10a throughax . Subtract Line 10 from the subtract Line 10	om Line 9. er the Illinois ne). Cannot be leser the tax from Schedule 4255. e less than zero	ss than zero. Schedule NR	Attach Schedule . 15	NR. 11 12 13	39,248 _{.00} 1,943 _{.00}
11 12 13 14 Ste	ep 5: Net Income and Ta Residents: Net income. Nonresidents and part- Residents: Multiply Line Nonresidents and part- Recapture of investment Income tax. Add Lines 1 ep 6: Tax After Nonrefu Income tax paid to anoth Property tax and K-12 ed	Add Lines 10a throughax . Subtract Line 10 from the subtract Line 10	om Line 9. er the Illinois ne). Cannot be leser the tax from Schedule 4255. e less than zero	ss than zero. Schedule NR	15	NR. 11 12 13 14 .00	39,248 _{.00} 1,943 _{.00}
11 12 13 14 Ste 15	ep 5: Net Income and Ta Residents: Net income. Nonresidents and part- Residents: Multiply Line Nonresidents and part- Recapture of investment Income tax. Add Lines 1 ep 6: Tax After Nonrefu Income tax paid to anoth Property tax and K-12 ed Attach Schedule ICR.	Add Lines 10a through fax. Subtract Line 10 from the subtract Line 11 from the subtract Line 12 and 13. Cannot be subtract Line 13. Cannot be subtract Line 14 from the subtract Line 15 from the subtract Line 16 from the subtra	om Line 9. er the Illinois ne). Cannot be leser the tax from Schedule 4255. e less than zero nois resident. At	ss than zero. Schedule NR.	`	NR. 11 12 13 14	39,248 _{.00} 1,943 _{.00}
11 12 13 14 Ste 15 16 17 18	ep 5: Net Income and Ta Residents: Net income. Nonresidents and part- Residents: Multiply Line Nonresidents and part- Recapture of investment Income tax. Add Lines 1 ep 6: Tax After Nonrefu Income tax paid to anoth Property tax and K-12 ed Attach Schedule ICR. Credit amount from Sche Add Lines 15, 16, and 17	Add Lines 10a through fax. Subtract Line 10 from the subtract Line 11 from the subtract Line 12 from the subtract Line 10	om Line 9. er the Illinois ne). Cannot be leser the tax from Schedule 4255. e less than zero nois resident. At edit amount from Schedule 129 your credits. Car	ss than zero. Schedule NR. ttach Schedule CR. n Schedule ICR. 9-C. nnot exceed the tax amount	15 16 17	NR. 11 12 13 140000000000	39,248.00 1,943.00 .00 1,943.00
11 12 13 14 Ste 15 16 17 18 19	ep 5: Net Income and Ta Residents: Net income. Nonresidents and part- Residents: Multiply Line Nonresidents and part- Recapture of investment Income tax. Add Lines 1 ep 6: Tax After Nonrefu Income tax paid to anoth Property tax and K-12 ed Attach Schedule ICR. Credit amount from Sche Add Lines 15, 16, and 17 Tax after nonrefundable	Add Lines 10a through fax. Subtract Line 10 from the subtract Line 11 from the subtract Line 12 from the subtract Line 10	om Line 9. er the Illinois ne). Cannot be leser the tax from Schedule 4255. e less than zero nois resident. At edit amount from Schedule 129 your credits. Car	ss than zero. Schedule NR. ttach Schedule CR. n Schedule ICR. 9-C. nnot exceed the tax amount	15 16 17	NR. 11 12 13 14 .00	39,248.00 1,943.00 .00 1,943.00
11 12 13 14 Ste 15 16 17 18 19 Ste 19 Ste	ep 5: Net Income and Ta Residents: Net income. Nonresidents and part- Residents: Multiply Line Nonresidents and part- Recapture of investment Income tax. Add Lines 1 ep 6: Tax After Nonrefu Income tax paid to anoth Property tax and K-12 ed Attach Schedule ICR. Credit amount from Sche Add Lines 15, 16, and 17 Tax after nonrefundable ep 7: Other Taxes	Add Lines 10a throughax . Subtract Line 10 frogen residents: Entered 11 by 4.95% (.0495) and 13. Cannot be and 13. Cannot be and 13. Cannot be and 14. Cannot be and 15. Cannot be and 16. Cannot be and 16. Cannot be and 17. This is the total of your credits. Subtract L	om Line 9. er the Illinois ne). Cannot be leser the tax from Schedule 4255. e less than zero nois resident. At edit amount fror n Schedule 129 rour credits. Car ine 18 from Lin	ss than zero. Schedule NR. ttach Schedule CR. n Schedule ICR. 9-C. nnot exceed the tax amount	15 16 17	NR. 11	39,248.00 1,943.00 .00 1,943.00 0.00 1,943.00
11 12 13 14 Ste 15 16 17 18 19 Ste 20	ep 5: Net Income and Ta Residents: Net income. Nonresidents and part- Residents: Multiply Line Nonresidents and part- Recapture of investment Income tax. Add Lines 1 ep 6: Tax After Nonrefu Income tax paid to anoth Property tax and K-12 ed Attach Schedule ICR. Credit amount from Sche Add Lines 15, 16, and 17 Tax after nonrefundable ep 7: Other Taxes Household employment to	Add Lines 10a throughax Subtract Line 10 frogen residents: Entered 11 by 4.95% (.0495) repear residents: Entered 12 and 13. Cannot be restate while an Illinguation expense credule 1299-C. Attach 7. This is the total of yellow credits. Subtract Lax. See instructions.	om Line 9. er the Illinois ne). Cannot be leser the tax from Schedule 4255. e less than zero nois resident. At edit amount from Schedule 129 rour credits. Car line 18 from Lin	ess than zero. Schedule NR. ettach Schedule CR. In Schedule ICR. 9-C. Innot exceed the tax amount e 14.	15 16 17 on Line 14.	NR. 11 12 13 140000000000	39,248.00 1,943.00 .00 1,943.00
11 12 13 14 Ste 15 16 17 18 19 Ste 19 Ste	ep 5: Net Income and Ta Residents: Net income. Nonresidents and part- Residents: Multiply Line Nonresidents and part- Recapture of investment Income tax. Add Lines 1 ep 6: Tax After Nonrefu Income tax paid to anoth Property tax and K-12 ed Attach Schedule ICR. Credit amount from Sche Add Lines 15, 16, and 17 Tax after nonrefundable ep 7: Other Taxes Household employment to Use tax on internet, mail	Add Lines 10a throughax Subtract Line 10 frogen residents: Entered 11 by 4.95% (.0495) repear residents: Entered 12 and 13. Cannot be restate while an Illinguation expense credule 1299-C. Attach 7. This is the total of your credits. Subtract Lax. See instructions. order, or other out-or	om Line 9. er the Illinois ne). Cannot be leser the tax from Schedule 4255. e less than zero nois resident. At edit amount from Schedule 129 rour credits. Car line 18 from Lin	ss than zero. Schedule NR. ttach Schedule CR. n Schedule ICR. 9-C. nnot exceed the tax amount	15 16 17 on Line 14.	NR. 11	39,248.00 1,943.00 .00 1,943.00 0.00 1,943.00
11 12 13 14 Ste 15 16 17 18 19 Ste 20	ep 5: Net Income and Ta Residents: Net income. Nonresidents and part- Residents: Multiply Line Nonresidents and part- Recapture of investment Income tax. Add Lines 1 ep 6: Tax After Nonrefu Income tax paid to anoth Property tax and K-12 ed Attach Schedule ICR. Credit amount from Sche Add Lines 15, 16, and 17 Tax after nonrefundable ep 7: Other Taxes Household employment to Use tax on internet, mail in the instructions. Do no	Add Lines 10a throughax Subtract Line 10 frogen residents: Entered 11 by 4.95% (.0495) repear residents: Entered 13. Cannot be and 13. Cannot be and 14. Cannot be and 15. Cannot be and 16. Cannot be and 16. Cannot be and 17. This is the total of your credits. Subtract Lax. See instructions. order, or other out-of leave blank.	om Line 9. er the Illinois ne). Cannot be leser the tax from Schedule 4255. e less than zero nois resident. At edit amount from Schedule 129 rour credits. Car ine 18 from Lin	ess than zero. Schedule NR. ettach Schedule CR. In Schedule ICR. 9-C. Innot exceed the tax amount e 14.	15 16 17 on Line 14.	NR. 11	39,248.00 1,943.00 .00 1,943.00 0.00 1,943.00



24 Tot	tal tax from Page 1, Line 23.							24	1,943.00
Step 8:	Payments and Refunda	ble Credit							
	ois Income Tax withheld. Atta mated payments from Forms						25 2 ,	063.00	
	uding any overpayment applic		•				26	.00	
	s-through withholding. Attach						27	.00	
28 Pas	s-through entity tax credit. Att	ach Schedule K-1	-P or K-1-T.				28	.00	
	ned Income Credit from Sche	-			chedule IL-E	E/EIC.	29	.00	
	al payments and refundable	credit. Add Lines	s 25 through	29.				30	2,063.00
Step 9:									
	ne 30 is greater than Line 24, s							31	120.00
	ne 24 is greater than Line 30, s							32	.00
-): Underpayment of Estim		-	ations	3				
	e-payment penalty for underp	-					33	.00	
_	Check if at least two-thirds				•	uraina h	0.000		
_	Check if you or your spoused Check if your income was n		•	•	•	•		on Form II -221	10
٠ ـ	Attach Form IL-2210.	ot received everily	during the y	year ari	u you aiii	iualizec	i your income (5111 O1111 IL-22 I	0.
dГ	Check if you were not requ	red to file an Illino	is Individual	Incom	e Tax retui	rn in th	e previous tax	vear.	
	intary charitable donations. A						34	.00	
	al penalty and donations. A							35	.00
Step 11	: Refund or Amount you	ı owe							
-	u have an amount on Line 3		is greater th	an Line	35. subtr	ract Lin	e 35 from Line	31.	
-	is your overpayment .		3		,			36	120.00
37 Amo	ount from Line 36 you want re	funded to you . Ch	neck one box	x on Lir	e 38. See	instruc	tions.	37	120.00
38 I cho	oose to receive my refund by								
a⊵	direct deposit - Complete	the information be	low if you ch	neck thi	s box.				
	You may also contribute	Routing number	0 8 1 9	0 6	4 8 0	8	X Checki	ng or Savi	ngs
	to college savings funds	Account number						g	90
	Tiere. See instructions:	Account number	2 9 1 0	3 !	5 2 8	4 0	1 1		
b [paper check.								
39 Amo	ount to be credited forward. S	Subtract Line 37 fro	om Line 36.	See ins	structions.			39	.00
40 If yo	u have an amount on Line 32	2, add Lines 32 an	d 35. - or -						
If yo	u have an amount on Line 3	I and this amount	is less than	Line 35	5,				
subt	tract Line 31 from Line 35. Th	is is the amount y	you owe . Se	e instru	uctions.			40	.00
Step 12	2: Health Insurance Che	ckbox and Sigr	nature						
41 🗆	Check this box if IDOR may	share vour income	e information	with o	ther Illinois	s state	agencies in or	der to determir	ne
_	your eligibility for health insu						3		
_	ure - Note: If this is a joint retu		•	_					
Under p	enalties of perjury, I state th	at I nave examine	a this returr	n and, t	o tne besi	t ot my	knowledge, it	is true, correc	t, and complete.
Sign	Your signature	Date (mm/dd/yyyy)	Spouse's sig	nature		Da	te (mm/dd/yyyy)	Daytime phone	e number
Here								(224) 659	9-9895
	Print/Type paid preparer's name)	Paid prepare	r's signa	ature	Da	te (mm/dd/yyyy)	Check if	Paid Preparer's PTIN
Paid								self-employed	
Preparer	Firm's name GLOBAL	TAXES LLC				Fir	m's FEIN		-
Use Only			BRUNSWIC	KNJ O	3816		m's phone	()	
Third	Designee's name (please print)				ee's phone			Check if th	e Department may
Party	,			, Doolgi		, mannot			eturn with the third
Designee				(party designe	e shown in this step.
	Refer to the 202	22 IL-1040 Ins	struction	s for	the add	dress	s to mail ve	our return.	

IL-1040 Back (R-12/22) DR_____ AP___ RR DC IR ID ID: 3WM REV 01/10/23 PRO





Illinois Department of Revenue 2022 Schedule IL-E/EIC Attach to your Form IL-1040

Illinois Exemption and Earned Income Credit

IL Attachment No. 30

Read this information first

Complete this schedule only if you are claiming dependents or are eligible for the Illinois Earned Income Credit. If you fraudulently claim the Earned Income Credit, you may not be allowed to claim the credit for up to ten years. You also may have to pay penalties.

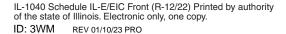
You must have claimed the federal Earned Income Credit in order to claim the Illinois Earned Income Credit. The total amount of Illinois Earned Income Credit may exceed the amount of tax.

<u>≡Note</u> If claiming the Illinois Earned Income Credit, you must attach a copy of pages 1 and 2 of your federal Form 1040 or 1040-SR to this schedule.

THUMMALA &	ide the followin M NUCHU	9	1	0 1 _	8	3 _ 0	4	0 9
	on your Form IL-1040		Your S	Social Security num				
Step 2: Dep	pendent Exem endent information of the search person you are conal Dependent information.	ation claiming as a depe		lf you are claim	ing more	than ten	dependen	ts, comple
Dependent's first name	Dependent's last name	Social Security number	Dependent's relationship to you	Dependent's date of birth (mm/dd/yyyy)	Full time student	Person with disability	Number of months living with you	Eligible for Earned Income Credit
KARTHIK	THUMMALA	960-96-5204	Son	01/31/2016			12	
	umber of dependents you a re and on Form IL-1040, L		251 X \$2,4	25		1		2,425

Continue to Page 2 to calculate Illinois Earned Income Credit







Illinois Earned Income Credit

Complete this section only if you qualify for the Illinois Earned Income Credit. Attach a copy of federal Form 1040 or 1040-SR, Pages 1 and 2. **<u>≡Note</u>** If you are not claiming a qualifying child, do not complete the table below.

Step 3: Qualifying Child Information

Comp

	Child's first name	Child's last name	Social Security number	Child's relationship to you	Child's date of birth (mm/dd/yyyy)	Full time student	Person with disability	Number of months living with you	
			1						
			<u> </u>	<u> </u>	<u> </u>				
		s and tips from your fede				1_			.(
	•	ome or (loss) from your nt on Line 2, you mus		,		. 2			.(
	-	quire a city, state, or cour	-				Yes	1 N.	
		Line 2a, you must enter		_			163] No	
•	certification number.	zino za, you maet onto		anig agonoy and	your noones, rogic	, and in			
		Issuing Agency		Li	cense, Registration	n, or Certifi	ication Num	ber	1
					· ·	<u> </u>			1
									1
									-
									-
									-
]
lf v	ou are filing your 202	2 federal return as marr	ied filing iointly but a	are filing vour 20	22 Illinois				
		2 federal return as marr eparately, enter your fe							
ret	urn as married filing s arried filing jointly fede	eparately, enter your fe ral Form 1040 or 1040-	deral adjusted gross SR, Line 11.	s income (AGI) fr	om your	3_			.(
ret ma a If	urn as married filing s arried filing jointly fede you entered an amou	eparately, enter your feo ral Form 1040 or 1040- nt on Line 3, enter your	deral adjusted gross SR, Line 11.	s income (AGI) fr	om your	_			.(
ret ma a If y ma	urn as married filing s arried filing jointly fede you entered an amou arried filing jointly fede	eparately, enter your fed ral Form 1040 or 1040- nt on Line 3, enter you eral return.	deral adjusted gross SR, Line 11. r spouse's Social Se	s income (AGI) freecurity number f	om your	3 _ 3a 4	 Yes] No [<u>.</u>
ret ma a If y ma	urn as married filing s arried filing jointly fede you entered an amou arried filing jointly fede the statutory employee	eparately, enter your fed ral Form 1040 or 1040- nt on Line 3, enter your eral return. box marked on your W-2	deral adjusted gross SR, Line 11. r spouse's Social Se , Wage and Tax State	s income (AGI) frecurity number frement, Box 13?	om your	3a] No [
ret ma a If y ma Is t	urn as married filing sarried filing jointly fede you entered an amou arried filing jointly fede the statutory employee A: Figure yo	eparately, enter your fed ral Form 1040 or 1040- nt on Line 3, enter your eral return. box marked on your W-2	deral adjusted gross SR, Line 11. r spouse's Social Se , Wage and Tax State	e curity number from the sincome (AGI) from t	om your	3a 4	 Yes	<u>-</u> _] No [
ret ma a If y ma Is t tep	urn as married filing sarried filing jointly fede you entered an amou arried filing jointly fede the statutory employee 1 4: Figure you ter the amount of fed	eparately, enter your fer ral Form 1040 or 1040- nt on Line 3, enter your eral return. box marked on your W-2 our Illinois Ear eral Earned Income Cr	deral adjusted gross SR, Line 11. r spouse's Social Se , Wage and Tax State	e curity number from the sincome (AGI) from t	om your	3a 4 27. 5 _	 Yes] No [
ret ma a If ma Is I	urn as married filing sarried filing jointly fede you entered an amou arried filing jointly fede the statutory employee 1. Figure you ter the amount of fed alltiply the amount on the statutory that is a same and the statutory that is a same and the statutory employee.	eparately, enter your federal Form 1040 or 1040- nt on Line 3, enter your eral return. box marked on your W-2 Our Illinois Ear eral Earned Income Cruline 5 by 18% (.18).	deral adjusted gross SR, Line 11. r spouse's Social Se , Wage and Tax State	e curity number from the sincome (AGI) from t	om your	3a 4	Yes	<u>-</u> _] No [
ret ma a If y ma Is I	urn as married filing sarried filing jointly fede you entered an amount arried filing jointly fede the statutory employee 1. Figure you ter the amount of fedultiply the amount on lands residents: Enter	eparately, enter your federal Form 1040 or 1040- nt on Line 3, enter your eral return. box marked on your W-2 Our Illinois Ear eral Earned Income Cruline 5 by 18% (.18).	deral adjusted gross SR, Line 11. r spouse's Social Se , Wage and Tax State rned Income	e credit ral Form 1040 or	om your rom your	3a 4 27. 5 _	Yes -] No [
ret ma sa If y ma sa I	urn as married filing sarried filing jointly fede you entered an amou arried filing jointly fede the statutory employee O 4: Figure you ter the amount of fed altiply the amount on longing residents: Enterpresidents and partialtiply Line 6 by the definition of the longest partial the presidents and partial the presidents are presidents.	eparately, enter your fed ral Form 1040 or 1040- nt on Line 3, enter your eral return. box marked on your W-2 Dur Illinois Ear eral Earned Income Cruline 5 by 18% (.18). er 1.0.	deral adjusted gross SR, Line 11. r spouse's Social Se, Wage and Tax State rned Income edit from your feder or the decimal from a syour Illinois Earne	e curity number from the security number from 13? Credit ral Form 1040 or Schedule NR, L	om your rom your 1040-SR, Line 2	3a 4 27. 5 _	Yes] No [).

Remember: Intentionally submitting false information is a crime under Section 1301 of the Illinois Income Tax Act





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)

SANJEEV THUMM					3	<u>0</u> <u>4</u>	. 0 9
Your name as show	n on Form IL-1040		Your Social Se	ecurity numbe	r		
Column A Form type	Column B Employer/Payer Identification Number	Federal Wa	Column C ages, Winnings, Gross ns, Compensation, etc.	Illinois Wag	column D ges, Winnings, Gros s, Compensation, e	s II	Column E linois Income Tax Withheld
1 <u>W</u>	38-3374137 000	\$	46,523 •00	\$	46,523 •00	\$	2,063 •00
2		\$	•00	\$	•00	\$	<u>•00</u>
3		\$	•00	\$	•00	\$	•00
4	-	\$	•00	\$	•00	\$	•00
		_	•00	\$	•00	\$	•00
Step 2: Provide		ecords (inc	lude all W-2 and	1099 forms	0 6 _		
Step 2: Provide	spouse's withholding re	ecords (inc	lude all W-2 and	1099 forms	0 6 _		
Step 2: Provide	spouse's withholding re	ecords (inc	lude all W-2 and	1099 forms 4 9 Social Securit	0 6 _	2 6	
Step 2: Provide MANASA YADAV 1 Your spouse's name Column A	Spouse's withholding resolution on Form IL-1040 Column B Employer/Payer	ecords (inc ecords (inc ecords (inc ecords)	lude all W-2 and a your spouse's a Your spouse's a Column C ages, Winnings, Gross	1099 forms 4 _ 9 Social Securit Collinois Wag Distribution	ty number Column D Jes, Winnings, Gros	2 6	5 5 6 Column E linois Income
Step 2: Provide MANASA YADAV I Your spouse's name Column A Form type 6	Spouse's withholding resolved as shown on Form IL-1040 Column B Employer/Payer Identification Number	ecords (inc	9 3 Your spouse's Column C ages, Winnings, Gross ns, Compensation, etc.	1099 forms 4 9 Social Securit C Illinois Wag Distribution	ty number Solumn D Jes, Winnings, Gross, Compensation, e	2 6	Column E linois Income Tax Withheld
Step 2: Provide MANASA YADAV I Your spouse's name Column A Form type 6	Spouse's withholding research NUCHU as shown on Form IL-1040 Column B Employer/Payer Identification Number	ecords (inc	your spouse's Column Cages, Winnings, Gross ns, Compensation, etc.	1099 forms 4 9 Social Securit Collinois Wag Distribution \$	o 6 y number Column D les, Winnings, Gross, Compensation, e	2 6	Column E linois Income Tax Withheld
Step 2: Provide MANASA YADAV I Your spouse's name Column A Form type 6 7 8	Spouse's withholding research NUCHU as shown on Form IL-1040 Column B Employer/Payer Identification Number	Federal War Distribution \$	9 3 Your spouse's Column C ages, Winnings, Gross ns, Compensation, etc. •00 •00	1099 forms 4 9 Social Securit C Illinois Wag Distribution \$ \$	ty number Solumn D Jes, Winnings, Gross, Compensation, e •00 •00	2 6	Column E linois Income Tax Withheld •00

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.

2,063.00 11 \$

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





Illinois Department of Revenue

					_								_							
Submission ID																				

2022 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.)

	' (Do not mail Form	IL-8453 to the Illinois	s Departmen	t of Revenue	unles	s it is requested	for revie	:W.)			
Step	1: Provide taxpayer in								•	•	
		MANASA YADAV NUCHU		Lostnama		1 0 1 - 8 Social Security number	3	04	0	9	
Print	1318 E ALGONQUIN	Spouse's first name (and last nar	me ii dillerent)	Last name		-		2 6	_	_	
or	Mailing address	<u>KD 11 </u>				9 3 4 – 9 Spouse's Social Securit		26	_5	_ 6	
type		TT		C0172		(224) 659-98					
	SCHAUMBURG	IL		60173 ZIP			, ,				
<u> </u>	City	State			<u> </u>	Daytime phone number					
	2: Complete informati			Choose one:	X IL-	1040 🔲 IL-1040-	X	20.0	401		
	let income from Form IL-1						1	39,2			
	ax from Form IL-1040 or II						2	1,9			
	linois Income Tax withheld from Form IL-1040 or IL-1040-X, Line 25 only (enter "0" if none)						3	2,00			
	Overpayment from Form IL						4		<u>20 </u>		
	otal amount due from Forr						5		'-	00	
6 F	Filing status: Single _	Married filing jointly	Married filing	separately	_ Widov	ved Head of ho	usehold				
within 7 F 8 A 9 T 10 E 11 E	not support international Air the United States or those Routing no. (RN): 0 8 Account no. (AN): 2 9 Type of account: X Che Date the payment is to be expected by the Electronic funds withdrawall same on account:	a not funded by international 1 9 0 4 8 0 1 1 0 3 5 2 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	al funds. Electro								
				on letin / Oten	0	if amplicable Ot	0)				
Step	4: Taxpayer declaration	n and signature (Sign	only after cor	npleting Step	2 and	, ir applicable, St	ep 3.)				
×	I consent that my refund correct. If I have filed a j	I may be directly deposited oint return, this is an irrevo	d as designated ocable appointm	in Step 3 and onent of the other	leclare spous	the information on leas an agent to rec	ines 7 thr eive the r	ough 9 i efund.	is		
	 withdrawal as designated financial institutions invo 	epartment of Revenue (ID d in the electronic portion of blved in the processing of a quiries and resolve issues	of my 2022 Illino an electronic ov	is Original or Am erpayment of ta	ended	Individual Income Ta	ıx return. I	authoriz	ze th	е	
	I do not want direct depo	osit of my refund, or an ele	ectronic funds w	rithdrawal (direc	t debit)	of my balance due.					
return and a been Sign		cal. To the best of my knowl ay be sent to IDOR by my I cted, I authorize IDOR to id	ledge, my return ERO. I authorize entify the reasor	is true, correct, a IDOR to inform in(s) so the return	and con my ERC may be	nplete. I consent that D and/or the transmit e corrected and retra	my return er when m nsmitted if	n, this de ny return	clara has		
<u>here</u>	Your signature	Date		Spouse's signa	iture (if jo	int return, both must sigr)	Date			
I decl	5: Electronic return of are that I have examined that I have followed all rayer's return and accompare ERO's signature	his taxpayer's electronic F equirements of this progra	orm IL-1040 or am and declare,	IL-1040-X, the i under penalties	nforma	tion on this Form IL	of my kno	owledge	the		
	Li to a signature			Date							
ERO use	Firm's name or your name if self-	employed				Your PTIN					
only	Mailing address					Federal employer identi	dentification number (FEIN)				
	City	State		7IP		Daytime phone number		-			

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

<u>Do not mail</u> Form IL-8453 and these documents unless requested for review.

