



Illinois Department of Revenue
2023 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.

A

332-96-7429 1977 350-94-4248 1980

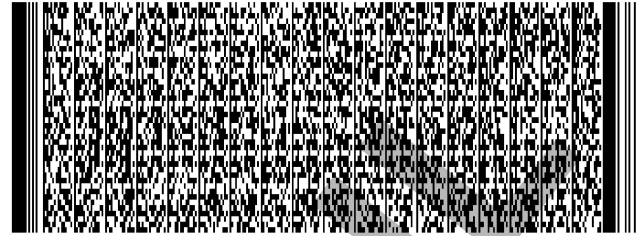
ALI ASGHER HUSAIN

RAMNIK GILL

8 MESA DR

SOUTH BARRINGTON IL 60010

AAHUSAIN@GMAIL.COM



B Filing status: Single Married filing jointly Married filing separately Widowed Head of household

C Check if someone can claim you, or your spouse if filing jointly, as a dependent. See instructions. You Spouse

D Check the box if this applies to you during 2023: Nonresident - Attach Sch. NR Part-year resident - Attach Sch. NR

Step 2: Income

(Whole dollars only)

1 Federal adjusted gross income from your federal Form 1040 or 1040-SR, Line 11.	1	<u>517,377.00</u>
2 Federally tax-exempt interest and dividend income from your federal Form 1040 or 1040-SR, Line 2a.	2	<u>.00</u>
3 Other additions. Attach Schedule M.	3	<u>.00</u>
4 Total income. Add Lines 1 through 3.	4	<u>517,377.00</u>

Step 3: Base Income

5 Social Security benefits and certain retirement plan income received if included in Line 1. Attach Page 1 of federal return.	5	<u>.00</u>
6 Illinois Income Tax overpayment included in federal Form 1040 or 1040-SR, Schedule 1, Ln. 1.	6	<u>.00</u>
7 Other subtractions. Attach Schedule M.	7	<u>.00</u>
8 Add Lines 5, 6, and 7. This is the total of your subtractions.	8	<u>.00</u>
9 Illinois base income. Subtract Line 8 from Line 4.	9	<u>517,377.00</u>

Step 4: Exemptions - See instructions for income limitations

10 a Enter the exemption amount for yourself and your spouse. See instructions.	a	<u>.00</u>
b Check if 65 or older: <input type="checkbox"/> You + <input type="checkbox"/> Spouse # of checkboxes X \$1,000 =	b	<u>.00</u>
c Check if legally blind: <input type="checkbox"/> You + <input type="checkbox"/> Spouse # of checkboxes X \$1,000 =	c	<u>.00</u>
d If you are claiming dependents, enter the amount from Schedule IL-E/EIC, Step 2, Line 1. Attach Schedule IL-E/EIC.	d	<u>.00</u>
Exemption allowance. Add Lines 10a through 10d.	10	<u>.00</u>

Step 5: Net Income and Tax

11 Residents: Net income. Subtract Line 10 from Line 9. Nonresidents and part-year residents: Enter the Illinois net income from Schedule NR. Attach Schedule NR.	11	<u>517,377.00</u>
12 Residents: Multiply Line 11 by 4.95% (.0495). Cannot be less than zero. Nonresidents and part-year residents: Enter the tax from Schedule NR.	12	<u>25,610.00</u>
13 Recapture of investment tax credits. Attach Schedule 4255.	13	<u>.00</u>
14 Income tax. Add Lines 12 and 13. Cannot be less than zero.	14	<u>25,610.00</u>

Step 6: Tax After Nonrefundable Credits

15 Income tax paid to another state while an Illinois resident. Attach Schedule CR.	15	<u>.00</u>
16 Property tax, K-12 education expense, and volunteer emergency worker credit amount from Schedule ICR. Attach Schedule ICR.	16	<u>.00</u>
17 Credit amount from Schedule 1299-C. Attach Schedule 1299-C.	17	<u>.00</u>
18 Add Lines 15, 16, and 17. This is the total of your credits. Cannot exceed the tax amount on Line 14.	18	<u>0.00</u>
19 Tax after nonrefundable credits. Subtract Line 18 from Line 14.	19	<u>25,610.00</u>

Step 7: Other Taxes

20 Household employment tax. See instructions.	20	<u>.00</u>
21 Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table in the instructions. Do not leave blank.	21	<u>0.00</u>
22 Compassionate Use of Medical Cannabis Program Act and sale of assets by gaming licensee surcharges.	22	<u>.00</u>
23 Total Tax. Add Lines 19, 20, 21, and 22.	23	<u>25,610.00</u>





24 Total tax from Page 1, Line 23. 24 25,610.00

Step 8: Payments and Refundable Credit

25 Illinois Income Tax withheld. **Attach** Schedule IL-WIT. 25 24,482.00

26 Estimated payments from Forms IL-1040-ES and IL-505-I, including any overpayment applied from a prior year return. 26 .00

27 Pass-through withholding. **Attach** Schedule K-1-P or K-1-T. 27 .00

28 Pass-through entity tax credit. **Attach** Schedule K-1-P or K-1-T. 28 .00

29 Earned Income Credit from Schedule IL-E/EIC, Step 4, Line 9. **Attach** Schedule IL-E/EIC. 29 .00

30 **Total payments and refundable credit.** Add Lines 25 through 29. 30 24,482.00

Step 9: Total

31 If Line 30 is greater than Line 24, subtract Line 24 from Line 30. 31 .00

32 If Line 24 is greater than Line 30, subtract Line 30 from Line 24. 32 1,128.00

Step 10: Underpayment of Estimated Tax Penalty and Donations

33 Late-payment penalty for underpayment of estimated tax. 33 .00

a Check if at least two-thirds of your federal gross income is from farming.

b Check if you or your spouse are 65 or older and permanently living in a nursing home.

c Check if your income was not received evenly during the year and you annualized your income on Form IL-2210. **Attach** Form IL-2210.

d Check if you were not required to file an Illinois Individual Income Tax return in the previous tax year.

34 Voluntary charitable donations. **Attach** Schedule G. 34 .00

35 **Total penalty and donations.** Add Lines 33 and 34. 35 .00

Step 11: Refund or Amount you owe

36 If you have an amount on Line 31 and this amount is greater than Line 35, subtract Line 35 from Line 31. This is your **overpayment**. 36 .00

37 Amount from Line 36 you want **refunded to you**. Check **one** box on Line 38. See instructions. 37 .00

38 I choose to receive my refund by

a **direct deposit** - Complete the information below if you check this box.

You may also contribute to college savings funds here. See instructions!

Routing number	<input type="text"/>	<input type="checkbox"/> Checking or	<input type="checkbox"/> Savings
Account number	<input type="text"/>		

b **paper check**.

39 Amount to be **credited forward**. Subtract Line 37 from Line 36. See instructions. 39 .00

40 **If you have an amount on Line 32**, add Lines 32 and 35. **If you have an amount on Line 31**, and this amount is less than Line 35, subtract Line 31 from Line 35. **If Lines 31 and 32 are blank (zero)**, enter the amount from Line 35. This is the **amount you owe**. See instructions. 40 1,128.00

Step 12: Health Insurance Checkbox and Signature

41 Check this box and include your email address in Step 1 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 Here	Your signature	Date (mm/dd/yyyy)	Spouse's signature	Date (mm/dd/yyyy)	Daytime phone number
					(972) 679-4297
Paid Preparer Use Only	Print/Type paid preparer's name		Paid preparer's signature		Date (mm/dd/yyyy)
	VENKATA SAI PAVAN KUMAR DUDIPALLI		VENKATA SAI PAVAN KUMAR DUDIPALLI		<input type="checkbox"/> Check if self-employed
	Paid Preparer's PTIN		P02470833		
Third Party Designee	Firm's name ▶ GLOBAL TAXES LLC			Firm's FEIN ▶	882145487
	Firm's address ▶ 245 ROONEY CT E BRUNSWICKNJ 08816			Firm's phone ▶	(678) 965-9522
	Designee's name (please print)			Designee's phone number	
				()	
	<input type="checkbox"/> Check if the Department may discuss this return with the third party designee shown in this step.				

Refer to the 2023 IL-1040 Instructions for the address to mail your return.



Read this information first

Complete this schedule only if you are eligible for the

- Illinois Property Tax Credit - See Publication 108.
K-12 Education Expense Credit - See Publications 112, 119, & 132.
Volunteer Emergency Worker Credit - See Instructions.

- You must complete Form IL-1040 through Line 14 and Schedule CR, if applicable, before completing this schedule.
The total amount of Illinois Property Tax Credit, K-12 Education Expense Credit, and Volunteer Emergency Worker Credit cannot exceed tax due.

Step 1: Provide the following information

ALI ASGHER HUSAIN & RAMNIK GILL

Your name as shown on your Form IL-1040

3 3 2 9 6 7 4 2 9
Your Social Security number

Step 2: Figure your nonrefundable credit

- 1 Enter the amount of tax from your Form IL-1040, Line 14. 1 25,610.00
2 Enter the amount of credit for tax paid to other states from your Form IL-1040, Line 15. 2 .00
3 Subtract Line 2 from Line 1. 3 25,610.00

Section A - Illinois Property Tax Credit (See instructions for directions on how to obtain your property number)

- 4 a Enter the total amount of Illinois Property Tax paid during the tax year for the real estate that includes your principal residence. 4a 5,161.00
b Enter the county and property number of your principal residence. See instructions.
4b COOK County 21 CHIPPING CAMPDEN DR Property number
c Enter the county and property number of an adjoining lot, if included in Line 4a.
4c County Property number
d Enter the county and property number of another adjoining lot, if included in Line 4a.
4d County Property number
e Enter the portion of your tax bill that is deductible as a business expense on U.S. income tax forms or schedules, even if you did not take the federal deduction. 4e .00
f Subtract Line 4e from Line 4a. 4f 5,161.00
g Multiply Line 4f by 5% (.05). 4g 258.00
5 Compare Lines 3 and 4g, and enter the lesser amount here. 5 0.00
6 Subtract Line 5 from Line 3. 6 25,610.00

Section B - K-12 Education Expense Credit

Note: You must complete the K-12 Education Expense Credit Worksheet on the last page of this schedule and attach any receipt(s) you received from your student's school to claim an education expense credit.

- 7 a Enter the total amount of K-12 education expenses from Line 15 of the worksheet on Page 3 of this schedule. 7a .00
b You may not take a credit for the first \$250 paid. 7b 250.00
c Subtract Line 7b from Line 7a. If the result is negative, enter "zero." 7c .00
d Multiply Line 7c by 25% (.25). Compare the result and \$750, and enter the lesser amount here. 7d .00
8 Compare Lines 6 and 7d, and enter the lesser amount here. 8 .00
9 Subtract Line 8 from Line 6. 9 25,610.00

Continue on Page 2. ->



Schedule ICR Illinois Credits

Step 2: Figure your nonrefundable credit, continued

Section C - Volunteer Emergency Worker Credit - see instructions.

Note: This credit is only available if you received a Volunteer Emergency Worker Credit Certificate from the Illinois Department of Revenue.

10 a Enter your Volunteer Emergency Worker Credit Certificate Number.

10a _____

b Enter your spouse's Volunteer Emergency Worker Credit Certificate Number.

10b _____

c Enter \$500.00 if you, or your spouse if married filing jointly, were awarded the volunteer emergency worker credit. Enter \$1,000.00 if married filing jointly, and **both** you and your spouse were awarded the credit.

10c _____ .00

11 Compare Lines 9 and 10c, and enter the lesser amount here.

11 _____ .00

12 Subtract Line 11 from Line 9.

12 _____ 25,610.00

Section D - Total Nonrefundable Credit

13 Add Lines 5, 8, and 11. This is your nonrefundable credit amount. Enter this amount on Form IL-1040, Line 16.

→ **13** _____ 0.00

DO NOT MAIL

Continue on Page 3. →



K-12 Education Expense Credit Worksheet

Note You must complete this worksheet and attach any receipt(s) you received from your student's school to claim an education expense credit.

14 Complete the following information for each of your qualifying students. If a student attended more than one qualifying school during the calendar year, please list separately. If you need more space, attach a separate piece of paper following this format.

A	B	C	D	E	F	G
Student's name	Social Security number	Grade (K-12 only)	School name (IL K-12 schools only or enter "home school," if applicable)	School city (IL cities only)	School type (check only one) P = Public N = Non-public H = Home school	Total tuition, book/lab fees
a _____	_____	_____	_____	_____	<input type="checkbox"/> P <input type="checkbox"/> N <input type="checkbox"/> H	_____
b _____	_____	_____	_____	_____	<input type="checkbox"/> P <input type="checkbox"/> N <input type="checkbox"/> H	_____
c _____	_____	_____	_____	_____	<input type="checkbox"/> P <input type="checkbox"/> N <input type="checkbox"/> H	_____
d _____	_____	_____	_____	_____	<input type="checkbox"/> P <input type="checkbox"/> N <input type="checkbox"/> H	_____
e _____	_____	_____	_____	_____	<input type="checkbox"/> P <input type="checkbox"/> N <input type="checkbox"/> H	_____
f _____	_____	_____	_____	_____	<input type="checkbox"/> P <input type="checkbox"/> N <input type="checkbox"/> H	_____
g _____	_____	_____	_____	_____	<input type="checkbox"/> P <input type="checkbox"/> N <input type="checkbox"/> H	_____
h _____	_____	_____	_____	_____	<input type="checkbox"/> P <input type="checkbox"/> N <input type="checkbox"/> H	_____
i _____	_____	_____	_____	_____	<input type="checkbox"/> P <input type="checkbox"/> N <input type="checkbox"/> H	_____
j _____	_____	_____	_____	_____	<input type="checkbox"/> P <input type="checkbox"/> N <input type="checkbox"/> H	_____

15 Add the amounts in Column G for Lines 14a through 14j (and the amounts from Column G of any additional pages you attached). This is the total amount of your qualified education expenses for this year. Enter this amount here and on Step 2, Line 7a of this schedule.

15 .00

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



Read this information first

Complete this schedule only if you are claiming

- dependents (Step 2) or
the Illinois Earned Income Tax Credit (EITC) (Step 3).

New for 2023! Taxpayers who did not qualify for the federal EITC or qualified for a smaller amount, but did meet federal income guidelines, now qualify for the Illinois EITC if the taxpayer is filing

- with an Individual Taxpayer Identification Number (ITIN), or
without a qualifying child and is at least age 18 or older (including taxpayers over ages 65).

The Illinois Expanded EITC Worksheet on Page 3 was added to determine the federal EITC calculation on which the Illinois EITC amount is figured.

Note: The total amount of Illinois EITC may exceed the amount of tax.

Attach: If claiming the Illinois EITC, you must attach a copy of pages 1 and 2 of your federal Form 1040 or 1040-SR to this schedule.

Warning: If you fraudulently claim the EITC, you may not be allowed to claim the credit for up to ten years. You also may have to pay penalties.

Step 1: Provide the following information

ALI ASGHER HUSAIN & RAMNIK GILL

Your name as shown on your Form IL-1040

3 3 2 9 6 7 4 2 9
Your Social Security number

Illinois Dependent Exemption Allowance

Step 2: Dependent information

Complete the table for each person you are claiming as a dependent. Note: If you are claiming more than ten dependents, complete and attach additional Dependent information tables.

Table with 9 columns: Dependent's first name, Dependent's last name, Social Security number or Individual Taxpayer Identification 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. Rows include SAHIR, DUA, and MIR.

1 Multiply the total number of dependents you are claiming by \$2,425. 3 X \$2,425.

Enter the result here and on Form IL-1040, Line 10d.

1 7,275.00

Continue to Page 2 to calculate Illinois Earned Income Tax Credit





Illinois Earned Income Tax Credit

Complete this section **only** if you qualify for the Illinois EITC. **New for 2023**, even if you did not qualify for the federal EITC, you may be able to qualify for the Illinois EITC. See instructions to find out if you qualify. **Note:** You must complete the table in Step 3 **only** if you are claiming a qualifying child not included in Step 2. **Attach:** a copy of federal Form 1040 or 1040-SR, Pages 1 and 2.

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

Step 3: Qualifying Child Information

Complete the table for qualifying children that are **not** included in Step 2.

Child's first name	Child's last name	Social Security number or Individual Taxpayer Identification 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
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	

- 1 Enter your wages, salaries and tips from your federal Form 1040 or 1040-SR, Line 1z. 1 _____ .00
- 2 Enter your business income or (loss) from your federal Form 1040 or 1040-SR, Schedule 1, Line 3. 2 _____ .00
If you report an amount on Line 2, you must answer the question in Line 2a below.
- 2a Does your occupation require a city, state, or county issued professional license, registration, or certification? 2a Yes No
- 3 If you are filing your 2023 federal return as married filing jointly but are filing your 2023 Illinois return as married filing separately, enter your federal adjusted gross income (AGI) from your married filing jointly federal Form 1040 or 1040-SR, Line 11. 3 _____ .00
- 3a If you entered an amount on Line 3, enter your spouse's Social Security number from your married filing jointly federal return. 3a _____
- 4 Is the statutory employee box marked on your W-2, Wage and Tax Statement, Box 13? 4 Yes No

Step 4: Figure your Illinois EITC

- 5 If you qualify for the federal EITC, go to Line 6. If you do **not** qualify for the federal EITC, but **do** qualify for the Illinois EITC, check this box and **complete** the Illinois Expanded EITC Worksheet on Page 3 before continuing to Line 6. See instructions to find out if you qualify. 5
- 6 Enter the amount of federal Earned Income Tax Credit from your federal Form 1040 or 1040-SR, Line 27, **or** the amount from the Illinois Expanded EITC Worksheet, Line 23. 6 _____ .00
- 7 Multiply the amount on Line 6 by 20% (0.2). 7 _____ .00
- 8 **Illinois residents:** Enter 1.0.
Nonresidents and part-year residents: Enter the decimal from Schedule NR, Line 48. 8 _____ .
- 9 Multiply Line 7 by the decimal on Line 8. This is your **Illinois EITC**.
Enter this amount here and on your Form IL-1040, Line 29. → 9 _____ .00



Illinois Expanded EITC Worksheet - Complete **only** if you checked the box on Step 4, Line 5.

Part 1 Your Earned Income - See instructions.

- 1 Enter the amount from federal Form 1040 or 1040-SR, Line 1z.
- 2 Enter the amount from Line 1 that is from medicaid waiver payments that you don't choose to include in earned income (federal Form 1040 or 1040-SR, Line 1d).
- 3 Subtract Line 2 from Line 1 and enter the result.
- 4 Enter all of your nontaxable combat pay from federal Form 1040 or 1040-SR, Line 1i, if you elect to include it in earned income.
- 5 Add Lines 3 and 4 and enter the result. If you were not self-employed and did not have to file federal Schedule SE, go to Line 15. Otherwise, continue to Line 6.
- 6 Enter the amount from federal Schedule SE, Part I, Line 3.
- 7 Enter the amount from federal Schedule SE, Part I, Line 4b and Line 5a.
- 8 Add Lines 6 and 7 and enter the result.
- 9 Enter the amount from federal Schedule SE, Part I, Line 13.
- 10 Subtract Line 9 from Line 8 and enter the result.
- 11 Enter any net farm profit or (loss) from federal Schedule F, Line 34; and from farm partnerships, federal Schedule K-1 (federal Form 1065), Box 14, Code A.
- 12 Enter any net profit or (loss) from federal Schedule C, Line 31; and federal Schedule K-1 (federal Form 1065), Box 14, Code A (other than farming).
- 13 Enter the amount from federal Schedule C, Line 1, that you are filing as a statutory employee.
- 14 Add Lines 10, 11, 12, and 13 and enter the total.
- 15 Add Lines 5 and 14 and enter the total. If Line 14 is blank, enter the amount from Line 5. If the total is zero or negative, enter "0" zero.
- 16 Is the amount on Line 15 equal to or less than the amount in Table 1 (below) for your filing status and number of qualifying children?
If **yes**, continue to Part 2. If **No**, **STOP; you do not qualify for the Illinois EITC.**

◆ 1 _____

◆ 2 _____

3 _____

◆ 4 _____

5 _____

◆ 6 _____

◆ 7 _____

8 _____

◆ 9 _____

10 _____

◆ 11 _____

◆ 12 _____

◆ 13 _____

14 _____

15 _____

◆ 16 Yes No

Table 1 Federal EITC Income Limits

Qualifying Children Claimed	Filing as Single, Head of Household, or Widowed	Filing as Married Filing Jointly
Zero	\$17,640	\$24,210
One	\$46,560	\$53,120
Two	\$52,918	\$59,478
Three	\$56,838	\$63,398

Part 2 Your Federal EITC Calculation

- 17 Enter your total earned income from Part 1, Line 15.
- 18 Look up the amount on Line 17 in the federal Form 1040 Instructions for Line 27, EIC Table, to find the credit amount. Be sure you use the correct column for your filing status and the correct number of qualifying children. Enter the credit amount here.
- 19 Enter the amount from federal Form 1040 or 1040-SR, Line 11 (AGI).
- 20 Are the amounts on Lines 17 and 19 the same?
If **Yes**, skip Lines 21 and 22, and enter the amount from Line 18 on Line 23. If **No**, go to Line 21.
- 21 If you have:
 - No qualifying children, is the amount on Line 19 less than \$9,800 (\$16,370 if married filing jointly)?
 - 1 or more qualifying children, is the amount on Line 19 less than \$21,560 (\$28,120 if married filing jointly)?
- 22 If **Line 21 is Yes**, leave Line 22 blank and enter the amount from Line 18 on Line 23. If **Line 21 is No**, look up the amount on Line 19 in the federal Form 1040 Instructions for Line 27, EIC Table, to find the credit. Be sure you use the correct column for your filing status and the correct number of qualifying children. Enter the credit amount here.
- 23 If you have an amount on Line 22, compare the amounts on Lines 18 and 22, and enter the smaller amount. **This is your federal EITC calculation. Enter this amount on Page 2, Step 4, Line 6.**

◆ 17 _____

◆ 18 _____

19 _____

◆ 20 Yes No

◆ 21 Yes No

◆ 22 _____

◆ 23 _____



Illinois Department of Revenue

2023 Schedule IL-WIT Illinois Income Tax Withheld

Attach to your Form IL-1040. If you have more than five withholding forms, complete multiple copies of this schedule. **IL Attachment No. 31**

Use the reference for Column A shown in the chart below.

Form Type	Letter Code for Column A	Form Type	Letter Code for Column A
W-2	W	1099-DIV	D
W-2G	WG	1099-INT	I
1099-R	R	1042-S	S
1099-G	G	1099-B	B
1099-MISC	M	1099-K	K
1099-OID	O	1099-NEC	N

Step 1: Provide your withholding records (include all W-2 and 1099 forms that show Illinois withholding)

ALI ASGHER HUSAIN

Your name as shown on Form IL-1040

3 3 2 - 9 6 - 7 4 2 9
Your Social Security number

Column A Form type	Column B Employer/Payer Identification Number	Column C Federal Wages, Winnings, Gross Distributions, Compensation, etc.	Column D Illinois Wages, Winnings, Gross Distributions, Compensation, etc.	Column E Illinois Income Tax Withheld
1 W	27-3572632 000 1	\$ 182,569.00	\$ 182,569.00	\$ 9,037.00
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)

RAMNIK GILL

Your spouse's name as shown on Form IL-1040

3 5 0 - 9 4 - 4 2 4 8
Your spouse's Social Security number

Column A Form type	Column B Employer/Payer Identification Number	Column C Federal Wages, Winnings, Gross Distributions, Compensation, etc.	Column D Illinois Wages, Winnings, Gross Distributions, Compensation, etc.	Column E Illinois Income Tax Withheld
6 W	27-3572632	\$ 132,587.00	\$ 132,587.00	\$ 6,558.00
7 W	54-1780389	\$ 179,528.00	\$ 179,528.00	\$ 8,887.00
8		\$.00	\$.00	\$.00
9		\$.00	\$.00	\$.00
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 \$ 24,482.00

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



Illinois Department of Revenue

Submission ID boxes

Submission ID

2023 IL-8453 Illinois Individual Income Tax Electronic Filing Declaration

(Do not mail Form IL-8453 to the Illinois Department of Revenue unless it is requested for review.)

Step 1: Provide taxpayer information

Form fields for Step 1: Name, address, Social Security number, Spouse's Social Security number, ZIP, Daytime phone number.

Step 2: Complete information from tax return

Choose one: [X] IL-1040 [] IL-1040-X

Table with 2 columns: Line number and Amount. Rows 1-6 for tax return details.

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.

Form fields for Step 3: Routing no., Account no., Type of account, Date, Amount, Name on account.

Step 4: Taxpayer declaration and signature (Sign only after completing Step 2 and, if applicable, Step 3.)

- Consent to direct deposit, authorize IDOR, or do not want direct deposit.

Under penalties of perjury, I declare the information on my electronic Form IL-1040 or IL-1040-X and the information I provided to my electronic return originator (ERO) are identical.

Sign here fields for signature and 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 or IL-1040-X, the information on this Form IL-8453, and accompanying information.

Form fields for Step 5: ERO's signature, Date, Firm's name, Mailing address, City, State, ZIP, Check if paid preparer, Your PTIN, Federal employer identification number, 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.

