Form **8879**

IRS e-file Signature Authorization

OMB No. 1545-0074

2018

Department of the Treasury Internal Revenue Service ▶ Return completed Form 8879 to your ERO. (Don't send to the IRS.)
 ▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID) 587278201906201usd8m							
Taxpayer's name	Social security number	Social security number					
SAHANA BASAPPA	860-08-5935						
Spouse's name	Spouse's social secur	ity number					
Part I Tax Return Information — Tax Year Ending December 3	 31, 2018 (Whole dollars only)	<u> </u>					
1 Adjusted gross income (Form 1040, line 7; Form 1040NR, line 35) .		1	59,416.				
2 Total tax (Form 1040, line 15; Form 1040NR, line 61)		2	6,373.				
3 Federal income tax withheld from Forms W-2 and 1099 (Form 1040, lir		3	10,544.				
4 Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 104		4	4,171.				
5 Amount you owe (Form 1040, line 22; Form 1040NR, line 75)		5	-,				
Part II Taxpayer Declaration and Signature Authorization (Be s	sure you get and keep a co	py of you	ur return)				
in Part I above are the amounts from my electronic income tax return. I consent to allow originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledge reason for any delay in processing the return or refund, and (c) the date of any refund. If a Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial instit of my federal taxes owed on this return and/or a payment of estimated tax, and the financial remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received ate. I also authorize the financial institutions involved in the processing of the electronic answer inquiries and resolve issues related to the payment. I further acknowledge that the electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.	gement of receipt or reason for reject pplicable, I authorize the U.S. Treasur tution account indicated in the tax pre I institution to debit the entry to this a authorization. To revoke (cancel) a payed no later than 2 business days prigayment of taxes to receive confide	ion of the tra ry and its de eparation sof ecount. This yment, I mus or to the par ential informa	ansmission, (b) the esignated Financial itware for payment authorization is to st contact the U.S. yment (settlement) ation necessary to				
Taxpayer's PIN: check one box only	_						
▼ I authorize GLOBAL TAXES LLC 1	to enter or generate my PIN	8 5 9	3 5				
ERO firm name		nter five digi	ts, but				
as my signature on my tax year 2018 electronically filed income tax r	return. d	on't enter all	zeros				
I will enter my PIN as my signature on my tax year 2018 electronical entering your own PIN and your return is filed using the Practitioner I							
Your signature ▶	Date						
Spouse's PIN: check one box only	Г						
☐ I authorize	to enter or generate my PIN						
ERO firm name	E	nter five digi	ts, but				
as my signature on my tax year 2018 electronically filed income tax r	return. d	on't enter all	zeros				
I will enter my PIN as my signature on my tax year 2018 electronical entering your own PIN and your return is filed using the Practitioner F							
Spouse's signature ▶	Date ▶						
Practitioner PIN Method Returns Onl	v—continue below						
Part III Certification and Authentication — Practitioner PIN Me	-						
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-sele		8 1 2 nter all zeros					
I certify that the above numeric entry is my PIN, which is my signature for the taxpayer(s) indicated above. I confirm that I am submitting this return in a method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providers of Indiv	accordance with the requiremen	iled incom nts of the I	e tax return for Practitioner PIN				
ERO's signature ▶	Date ▶						
	Var. Landa and						
ERO Must Retain This Form — S Don't Submit This Form to the IRS Unles							

Form **9325**

Department of the Treasury - Internal Revenue Service

(January 2017)

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank y	ou for participating in IRS <i>e-file</i> . 860-08-5935		
Гахрауе	name SAHANA BASAPPA		
Гахрауе	r address (optional)		
2901 S	OUTH KING DRIVE		
CHICAG	O IL 60616		
1. 🗶	Your federal income tax return for2018	was filed electronically with the	Philadelphia
	Submission Processing Center. The electronic filing	services were provided byGLOB	BAL TAXES LLC
2. 🗵	Your return was accepted on 03/03/2019 us signature. You entered a PIN or authorized the Elector you. The Submission ID assigned to your return	ctronic Return Originator (ERO) to en	
3.	Your return was accepted on	Allow 4 to 6 weeks for the prod	cessing of your return.
	The Earned Income Credit or a dependent's exemp child's name and social security number mismatch.		or disallowed due to a
4.	Your electronic funds withdrawal payment request	was accepted for processing.	
5.	Your electronic funds withdrawal payment request tax" section.	vas not accepted for processing. Ref	er to the "If You Owe
6.	Your Form 4868, Application for Automatic Extension accepted on The Suits		

DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

If You Need to Make a Change to Your Return

If you need to make a change or correct the return you filed electronically, you should send a Form 1040X, Amended U.S. Individual Income Tax Return, to the IRS Submission Processing Center that processes paper returns for your area. The address is available at *www.irs.gov*, or you can call the IRS toll-free at 1-800-829-1040.

If You Need to Ask About Your Refund

The IRS notifies your Electronic Return Originator (ERO) when your return is accepted, usually within 48 hours. If your return was not accepted, the IRS notifies your ERO of the reasons for rejection. If it has been more than three weeks since the IRS accepted your return and you have not received your refund, go to *www.irs.gov* and click on "Where's My Refund?" to view your refund status. Exception: If box 3 above is checked, allow 4 to 6 weeks for processing of your return. A notice will be sent to you advising of changes to your return.

Also, you can call the TeleTax line at 1-800-829-4477, for automated refund information. You should have available the first social security number shown on your return, your filing status, and the exact amount of the refund you expect. TeleTax gives you the date for mailing or depositing your refund. You should receive your refund check within 30 days of the date given by TeleTax, or within one week of that date, if you chose direct deposit. If you do not receive it by then, or if TeleTax does not give your refund information, call the Refund Hotline at 1-800-829-1954.

BAA REV 10/17/18 PRO Form **9325** (Rev. 1-2017)

The IRS uses refunds to cover overdue taxes and notifies you when this occurs. The Fiscal Service offsets refunds through the Treasury Offset Program to cover past due child support, federal agency non-tax debts such as student loans and state income tax obligations. Fiscal Service sends you an offset notice if it applies your refund or part of your refund to non-tax debts. If you have questions about the offset, contact the agency identified in the notice. You may also call the Treasury Offset Program Call Center at 1-800-304-3107, if you have additional questions.

If You Owe Tax

If your return has a balance due, you must pay the amount you owe by the prescribed due date. If you paid by electronic funds withdrawal (direct debit) or by credit card, no voucher is needed. The credit card service providers will charge a convenience fee based on the amount of taxes you are paying. The fees and the type of credit or debit cards accepted may vary between providers. You will be told the amount of the fee during the transaction and you will be given the option to either continue or end the transaction. For information on paying your taxes electronically, including by credit or debit card, go to www.irs.gov/e-pay.

If you are not paying electronically you may use Form 1040-V, Payment Voucher, which you can obtain from your Electronic Return Originator. If the IRS does not receive your payment by the prescribed due date, you will receive a notice that requests full payment of the tax due, plus penalties and interest. If you can not pay the amount in full, complete Form 9465, Installment Agreement Request, which you may file electronically. To apply for an installment agreement online, go to www.irs.gov. You may also order Form 9465 by calling 1-800-TAX-FORM (1-800-829-3676). If approved, the IRS charges a user fee to set up an installment agreement.

If You Need to Inquire About Your Electronic Funds Withdrawal Payment

You may call 1-888-353-4537 to inquire about the status of your electronic funds withdrawal payment. If there is a change to the bank account information included on your return, you should call this number to cancel a scheduled payment. You should have available the social security number of the first person listed on the tax return, the payment amount, and the bank account number. Cancellation requests must be received no later than 11:59 p.m. E.T. two business days prior to the scheduled payment date.

Tax Refund Related Financial Products

Financial institutions offer a variety of financial products to taxpayers based on their refunds. Contracts for financial products are between you and the financial institution. The IRS is not associated with the contract. If you have questions about tax refund related products, contact your Electronic Return Originator or the lender.

Catalog Number 12901K BAA www.irs.gov REV 10/17/18 PRO Form **9325** (Rev. 1-2017)

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

<u> </u>	U.	3. Illulviduai illeoille	; Iax	Ketui		- OIVIB NO.	. 1545-0074	IRS Use	Only—L	Jo not wri	te or staple ir	1 this space.
Filing status:	X s	Single Married filing jointly	Mar	ried filing s	separately	Head of household	Qualify	ing widow	(er)			
Your first name	and ini	tial		Last name	•				Y	our soc	ial security	/ number
SAHANA				BASAPI	PA				8	60-0	8-5935)
Your standard d	educti	on: Someone can claim yo	u as a de	ependent	You were	born before Janua	ry 2, 1954	Yo	u are b			
If joint return, sp	ouse's	s first name and initial		Last name	•				S	pouse's	social secu	urity number
Spouse standard	deduct	ion: Someone can claim your	spouse a	as a deper	ndent Sp	oouse was born befo	ore January	2, 1954	×	Full-ye	ear health ca	are coverage
Spouse is bli	nd	Spouse itemizes on a sepa	arate retu	rn or you v	vere dual-status	alien				or exe	mpt (see ins	st.)
Home address (numbe	er and street). If you have a P.O. bo	ox, see ir	nstructions	S.			Apt. no.			al Election C	Campaign
2901 SOU	TH :	KING DRIVE							(8	see inst.)	You	Spouse
City, town or po	st offic	e, state, and ZIP code. If you have	e a foreig	n address	s, attach Schedu	le 6.					nan four dep	
Chicago									S	ee inst. a	and 🗸 here	→
Dependents (see ir	,		(2) Soc	ial security number	(3) Relationship	o to you	Child +			for (see inst.)	,
(1) First name		Last name						Chila t	ax credi	. (realt for othe	er dependents
											<u>_</u>	
									<u> </u>			
										-		┪
Sign	Under p	enalties of perjury, I declare that I have	examined	this return :	and accompanying	schedules and statem	ents, and to th	e best of m	y knowle	edge and I	belief, they ar	⊒ re true,
	correct,	and complete. Declaration of preparer			s based on all info	rmation of which prepa						
Joint return?	Y	our signature			Date	Your occupation		-		e IRS sen , enter it	you an Iden	ntity Protection
See instructions.	_	pouse's signature. If a joint return,	la a d la 1001	int ninn	Date	SOFTWARE I		R		(see inst.)		ntity Protection
Keep a copy for your records.	3	bouse's signature. If a joint return,	DOLII III	ust sign.	Date	Spouse's occupat	.1011		PIN.	, enter it	$\dot{\Box}$	Tilly Protection
	Pi	reparer's name	Prepare	er's signat	ure		PTIN		Firm's	(see inst.)	Check if:	
Paid		ANA RUPA VENKATA SATYA SAI MANIKUMAR	, ropart	o. o o.ga.	u. 0		P0209	1332			l	Party Designee
Preparer		rm's name ▶ GLOBAL TA	XES I							1 =	employed	
Use Only		rm's address ► 2530 Pebb			n Cummin	g GA 30041	T HOHO HO	<u> </u>				
For Disclosure, F		y Act, and Paperwork Reduction									Form	1040 (2018
Form 1040 (2018)										_		Page 2
	1	Wages, salaries, tips, etc. Attach	1) W-2 . 					1	+		3,916.
Attach Form(s)	2a	Tax-exempt interest	2a			b Taxable			2b			
W-2. Also attach Form(s) W-2G and	3a 4a	Qualified dividends IRAs, pensions, and annuities .	3a 4a				y dividends amount .		3b 4b			
1099-R if tax was withheld.	4 а 5а	Social security benefits	5a		<u> </u>		amount .		5b			
	6	Total income. Add lines 1 through 5. /		mount from	Schedule 1, line 2	4 500			6	+	5	9,416.
	7	Adjusted gross income. If you	have no				rom line 6;	otherwise,				
Standard Deduction for—	_	subtract Schedule 1, line 36, from							7			9,416.
Single or married	8	Standard deduction or itemized		•	,				8	+		2,000.
filing separately, \$12,000	9	Qualified business income deduction. Taxable income. Subtract lines 8	•		*				10	_		7,416.
Married filing		a Tax (see inst.) 6,373. (check					_		10	+		7,110.
jointly or Qualifying widow(er),		b Add any amount from Schedu						▶ □	′ ₁₁			6,373.
\$24,000 • Head of	12	a Child tax credit/credit for other depe					· · · · · · · · · · · · · · · · · · ·	=	12			0,575.
household, \$18,000	13	Subtract line 12 from line 11. If z							13			6,373.
If you checked	14	Other taxes. Attach Schedule 4							14			0.
any box under Standard	15	Total tax. Add lines 13 and 14							15			6,373.
deduction, see instructions.	16	Federal income tax withheld from	n Forms	W-2 and	1099				16		1	0,544.
	17	Refundable credits: a EIC (see inst	t.) <u>No</u>		b Sch. 8812	c Fo	rm 8863					
		Add any amount from Schedule							17			
	18	Add lines 16 and 17. These are y							18			0,544.
Refund	19	If line 18 is more than line 15, su				•	•		19			$\frac{4,171}{4,171}$
Direct deposit?	20a	Amount of line 19 you want refu	1 1	1 1			 Leinen	P ∐ Coudes:	20a	1		4,171.
See instructions.	► b ► d	Routing number 0 7 1 Account number 1 2 8			1 3 L 9 8	c Type: X Chec	king [_]	Savings !				
	21	Account number <u>I Z Z C</u> Amount of line 19 you want applie				. ▶ 21		j				
Amount You Owe	22	Amount you owe. Subtract line					tions	. •	22			
	23	Estimated tax penalty (see instru				· 1						

BAA

SCHEDULE 1 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Income and Adjustments to Income

► Attach to Form 1040.

► Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2018
Attachment
Sequence No. 01

name(s) snown on							ociai security number
SAHANA BA	SAPPA	A				860	0-08-5935
Additional	1–9b	Reserved				1–9b	
Income	10	Taxable refunds, credits, or offsets of state and local income taxes					
	11		11				
	12	Business income or (loss). Attach Schedule C or C-EZ	12				
	13	Capital gain or (loss). Attach Schedule D if required. If not re	13				
	14	Other gains or (losses). Attach Form 4797	14				
	15a	Reserved	15b				
	16a	Reserved	16b				
	17	Rental real estate, royalties, partnerships, S corporations, trus	ts, etc.	. Attach Sched	ule E	17	-4,500.
	18	Farm income or (loss). Attach Schedule F	18				
	19	Unemployment compensation				19	
	20 a	Reserved				20b	
	21	Other income. List type and amount ▶				21	
	22	Combine the amounts in the far right column. If you don' income, enter here and include on Form 1040, line 6. Other				22	-4,500.
Adimeters	23	Educator expenses	23	e, go to line 23	·	22	-4,500.
Adjustments		Certain business expenses of reservists, performing artists,	23				
to Income	24	and fee-basis government officials. Attach Form 2106	24				
	25	Health savings account deduction. Attach Form 8889 .	25				
	26	Moving expenses for members of the Armed Forces. Attach Form 3903	26				
	27	Deductible part of self-employment tax. Attach Schedule SE	27				
	28	Self-employed SEP, SIMPLE, and qualified plans	28				
	29	Self-employed health insurance deduction	29				
	30	Penalty on early withdrawal of savings	30				
	31a	Alimony paid b Recipient's SSN ▶	31a				
	32	IRA deduction	32				
	33	Student loan interest deduction	33				
	34	Reserved	34				
	35	Reserved	35				
	36	Add lines 23 through 35				36	

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2018

REV 12/21/18 PRO

SCHEDULE E (Form 1040)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

► Attach to Form 1040, 1040NR, or Form 1041.

► Go to www.irs.gov/ScheduleE for instructions and the latest information.

2018
Attachment
Sequence No. 13

OMB No. 1545-0074

Internal Revenue Service (99)
Name(s) shown on return

Department of the Treasury

Your social security number

SAHA	NA BASAPPA							860	-08-593	35
Part	Income or Loss From	Rental Real Estate and Roy	/alties	Note	: If you	are in th	e business	of renting	personal p	roperty, use
	Schedule C or C-EZ (see	instructions). If you are an individ	dual, repo	rt far	m renta	al income	or loss fron	n Form 4	835 on pag	e 2, line 40.
A Dic	d vou make any payments in 2	2018 that would require you to	file Form	n(s) 1	099? (see insti	ructions)		\Box	Yes X No
		required Forms 1099?		٠,,		•	,			Yes ☐ No
1a		roperty (street, city, state, ZIP							· · <u> </u>	
A	+ '	D TELANGANA IN 50007								
В	IIIDEKABA	D TELANGANA IN 50007								
C										
	Type of Property 2			-1		Eair	Rental	Dorso	nal Use	
10	(from list below)	For each rental real estate prop above, report the number of fai	r rental a	a nd			ays		ays	QJV
	(personal use davs. Check the C	V box		Α.				-	
_ <u>A</u>	3	only if you meet the requirement a qualified joint venture. See ins	nts to file	as	<u>A</u>		365		0	
B	 `	a qualifica joint ventare. Oce in	3ti dotion.	·	В					
C					С					
	of Property:									
	, ,	Vacation/Short-Term Rental				7 Self-				
			6 Royal	ties		8 Othe	r (describe	!)		
Incom		Properties:			Α			3		С
3	Rents received		3			500.				
4	Royalties received		4							
Expen	ises:									
5	Advertising		5							
6	Auto and travel (see instruct	ions)	6							
7	Cleaning and maintenance		7					•		
8	Commissions		8							
9	Insurance		9							
10	Legal and other professiona		10							
11	Management fees		11							
12	Mortgage interest paid to ba		12							
13	Other interest		13		5	,000.				
14	Repairs		14			,				
15	Supplies		15					•		
16	Taxes		16					•		
17	Utilities		17							
18	Depreciation expense or dep		18							
19	Other (list)		19							· · · · · · · · · · · · · · · · · · ·
20	Total expenses. Add lines 5	through 10	20			,000.				
	•		20		٦,	,000.				
21	Subtract line 20 from line 3									
	file Form 6198	tions to find out if you must	21		_1	,500.				
			21			, 500.				
22	Deductible rental real estate		00 /		1	F00 \	,			,
00-	on Form 8582 (see instruction	-	22 (500.)	(F 0 0	, (,
23a		d on line 3 for all rental proper				23a		500		
b	•	d on line 4 for all royalty properties	erues .	•		23b				
C		d on line 12 for all properties		•		23c		-		
d		d on line 18 for all properties				23d		F 000	,	
е	Total of all amounts reported					23e		5,000		
24	•	unts shown on line 21. Do not							24	
25	Losses. Add royalty losses fro	om line 21 and rental real estate	losses fro	om lir	ne 22. I	Enter tota	al losses he	re . _2	25 (4,500.)
26	Total rental real estate and	d royalty income or (loss).	Combine	lines	s 24 aı	nd 25. E	nter the re	sult		
		d line 40 on page 2 do not a								
	Schedule 1 (Form 1040), lin	e 17, or Form 1040NR, line 1	18. Othe	rwise	e, inclu	ude this	amount in	the		
	total on line 41 on page 2.							. 2	26	-4,500.

2018 Form IL-1040

Individual Income Tax Return 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

860-08-5935

SAHANA BASAPPA

2901 SOUTH KING DRIVE



	Chi	.cago IL 60616			
	B C D	Filing status: Single or head of household Married filing jointly Married filing Check If someone can claim you, or your spouse if filing jointly, as a dependent. See instruction Check the box if this applies to you during 2018: Nonresident - Attach Sch. NR	ctions. 🗖 Yo	ou 🔲 Spouse	е
	Ste	p 2: Income		(Who	le dollars only)
	1	Federal adjusted gross income from your federal Form 1040, Line 7. Federally tax-exempt interest and dividend income from your federal Form 1040, Line 2a		1	59,416 <u>.00</u> .00
	3	Other additions. Attach Schedule M.	a.	3	.00
	4	Total income. Add Lines 1 through 3.		4	59,416 _{.00}
*	Ste	p 3: Base Income			
and 1099 forms here	5 6 7	Social Security benefits and certain retirement plan income received if included in Line 1. Attach Page 2 of federal return. Illinois Income Tax overpayment included in federal Form 1040, Schedule 1, Ln. 10. Other subtractions. Attach Schedule M. Check if Line 7 includes any amount from Schedule 1299-C.	5 6 7	.00 .00 .00	
9 fc	8	Add Lines 5, 6, and 7. This is the total of your subtractions.		8	.00 59,416.00
109	9	Illinois base income. Subtract Line 8 from Line 4.		9	59,416.00
Staple W-2 and	10	p 4: Exemptions a Enter the exemption amount for yourself and your spouse. See instructions. b Check if 65 or older: ☐ You + ☐ Spouse # of checkboxes X \$1,000 = c Check if legally blind: ☐ You + ☐ Spouse # of checkboxes X \$1,000 = d If you are claiming dependents, enter the amount from Schedule IL-E/EIC, Step 2, Line 1. Attach Schedule IL-E/EIC. Exemption allowance. Add Lines a through d.	b	, 225,00 .00 .00 0,00 10	2,225.00

Step 5: Net Income and Tax

Residents: Net income. Subtract Line 10 from Line 9.

12,894.00 Nonresidents and part-year residents: Enter the Illinois net income from Schedule NR. Attach Schedule NR. 11_

Residents: Multiply Line 11 by 4.95% (.0495). Cannot be less than zero.

Nonresidents and part-year residents: Enter the tax from Schedule NR.

Recapture of investment tax credits. Attach Schedule 4255.

13 .00 638.00 14 14 Income tax. Add Lines 12 and 13. Cannot be less than zero.

Step 6: Tax After Nonrefundable Credits

15 Income tax paid to another state while an Illinois resident. Attach Schedule CR. 15 .00

Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR.

17 Credit amount from Schedule 1299-C. Attach Schedule 1299-C.

0.00 Add Lines 15, 16, and 17. This is the total of your credits. Cannot exceed the tax amount on Line 14. 18 638.00

19 Tax after nonrefundable credits. Subtract Line 18 from Line 14.

Step 7: Other Taxes

20 Household employment tax. See instructions.

21 Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table in the instructions. Do not leave blank.

Compassionate Use of Medical Cannabis Pilot Program Act Surcharge.

23 Total Tax. Add Lines 19, 20, 21, and 22. IL-1040 Front (R-12/18)

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.

Printed by authority of the State of Illinois, 1. ID: 3WM REV 01/08/19 PRO



638.00

.00

0<u>.00</u>

.00 638.00

12

.00

.00

20

21

22

16

Staple your check and IL-1040-V

24 Total	al tax from Page 1, Line 23.					24	638.00		
Step 8: Payments and Refundable Credit									
25 Illin	nois Income Tax withheld. Attacl	h Schedule IL-WI	T.		25	386 <u>.00</u>			
26 Est	timated payments from Forms II	L-1040-ES and IL	-505-I,						
	luding any overpayment applied				26	.00			
	ss-through withholding. Attach S				27	.00			
	rned Income Credit from Schedu	•			28	<u></u>	886.00		
	tal payments and refundable o	credit. Add Lines	25 through	28.		29	880.00		
Step 9			1: 00			00	248.00		
	ine 29 is greater than Line 24, su					30 31			
	ine 24 is greater than Line 29, su			otiona Only com	mlata Ctan 10 f		.00		
•	0: Underpayment of Estima derpayment of estimated to			•		or late-paym	ient penaity		
	e-payment penalty for underpay			y Charitable dona	32	.00			
	Check if at least two-thirds of	•		s from farming	02	.00			
_	Check if you or your spouse			-	home.				
	☐ Check if your income was not		•			n Form IL-221	0.		
	Attach Form IL-2210.								
	Check if you were not require			Income Tax return in	the previous tax y	ear.			
	untary charitable donations. Att				33				
34 Tot	tal penalty and donations. Add	d Lines 32 and 33	3.			34	.00		
Step 1	1: Refund								
35 If v	ou have an amount on Line 30	and this amount is	s greater th	an Line 34. subtract L	ine 34 from Line 3	30.			
-	s is your overpayment .		9			35	248.00		
	ount from Line 35 you want ref u	unded to you. Ch	eck one box	on Line 37. See instr	ructions.	36	248.00		
37 Ich	noose to receive my refund by								
	direct deposit - Complete th	ne information bel	ow if you ch	neck this box.					
	Routing numbe	er 0 7 1 0	0 0 0	1 3 × Ch	ecking or Savi	ings			
						90			
	Account number	er 1 2 8 7	5 3 1	9 8					
b [🗌 Illinois Individual Income T	ax refund debit	card.						
c [☐ paper check.								
38 Am	ount to be credited forward. Su	btract Line 36 fro	m Line 35.	See instructions.		38	.00		
Step 1	2: Amount You Owe								
39 If ye	ou have an amount on Line 31,	add Lines 31 and	34. - or -						
-	ou have an amount on Line 30			Line 34,					
sub	otract Line 30 from Line 34. This	s is the amount y e	ou owe . Se	e instructions.		39	.00		
Step 1	3: If this is a joint return, both yo	ou and your spouse	e must sign l	below.					
•	Under penalties of perjury, I s				t of my knowledge,	it is true, corre	ct, and complete.		
Sign				I		(212) 450	-9406		
Here							- J - U U		
пеге	Vous cionatura	Data (mm/dd/ssss)	Chausa'a sia	a a tura	Data (/ / / /)	, ,	and the same		
———	Your signature		Spouse's sig	nature	Date (mm/dd/yyyy)	Daytime phone			
	APPANA RUPA VENKATA SATYA SAI MANIK	KUMAR				Daytime phone	P02090332		
Paid Preparer	APPANA RUPA VENKATA SATYA SAI MANIK Print/Type paid preparer's name	KUMAR	Spouse's sig	r's signature	Date (mm/dd/yyyy)	Daytime phone			
Paid	APPANA RUPA VENKATA SATYA SAI MANIK Print/Type paid preparer's name Firm's name GLOBAL	TAXES LLC	Paid prepare	r's signature	Date (mm/dd/yyyy) Firm's FEIN	Daytime phone	P02090332		
Paid Preparer Use Only	APPANA RUPA VENKATA SATYA SAI MANIK Print/Type paid preparer's name Firm's name GLOBAL	KUMAR	Paid prepare	r's signature	Date (mm/dd/yyyy)	Daytime phone Check if self-employed ()	P02090332 Paid Preparer's PTIN		
Paid Preparer Use Only	APPANA RUPA VENKATA SATYA SAI MANIK Print/Type paid preparer's name Firm's name GLOBAL	TAXES LLC	Paid prepare	r's signature	Date (mm/dd/yyyy) Firm's FEIN	Daytime phone Check if self-employed () Check if the	P02090332 Paid Preparer's PTIN Department may		
Paid Preparer Use Only Third Party	APPANA RUPA VENKATA SATYA SAI MANIK Print/Type paid preparer's name Firm's name GLOBAL Firm's address 2530 Peb	TAXES LLC	Paid prepare	r's signature	Date (mm/dd/yyyy) Firm's FEIN Firm's phone	Daytime phone Check if self-employed Check if the discuss this re	P02090332 Paid Preparer's PTIN Department may sturn with the third		
Paid Preparer Use Only Third Party	APPANA RUPA VENKATA SATYA SAI MANIK Print/Type paid preparer's name Firm's name GLOBAL Firm's address 2530 Peb Designee's name (please print)	TAXES LLC ble Creek LnC	Paid prepare	GA 30041 () Designee's phone num	Date (mm/dd/yyyy) Firm's FEIN Firm's phone ber	Daytime phone Check if self-employed () Check if the discuss this reparty designed	P02090332 Paid Preparer's PTIN Department may		
Paid Preparer Use Only Third Party	APPANA RUPA VENKATA SATYA SAI MANIK Print/Type paid preparer's name Firm's name Firm's address Designee's name (please print) If no paymen	TAXES LLC ble Creek LnC	Paid prepare umming to:	r's signature GA 30041 () Designee's phone num	Date (mm/dd/yyyy) Firm's FEIN Firm's phone ber ayment enclosed	Daytime phone Check if self-employed () Check if the discuss this reparty designed mail to:	P02090332 Paid Preparer's PTIN Department may sturn with the third e shown in this step.		
Paid Preparer Use Only Third Party	APPANA RUPA VENKATA SATYA SAI MANIK Print/Type paid preparer's name Firm's name Firm's address Designee's name (please print) If no paymen ILLINOIS DEI	TAXES LLC ble Creek LnC	Paid prepare umming to:	r's signature GA 30041 () Designee's phone num If pa	Date (mm/dd/yyyy) Firm's FEIN Firm's phone ber ayment enclosed, NOIS DEPARTME	Daytime phone Check if self-employed () Check if the discuss this reparty designed mail to: ENT OF REVE	P02090332 Paid Preparer's PTIN Department may sturn with the third e shown in this step.		
Paid Preparer Use Only Third Party	APPANA RUPA VENKATA SATYA SAI MANIK Print/Type paid preparer's name Firm's name GLOBAL Firm's address 2530 Peb Designee's name (please print) If no paymen ILLINOIS DEI SPRINGFIEL	TAXES LLC ble Creek LnC	Paid prepare umming to:	r's signature GA 30041 () Designee's phone num If pa	Date (mm/dd/yyyy) Firm's FEIN Firm's phone ber ayment enclosed	Daytime phone Check if self-employed () Check if the discuss this reparty designed mail to: ENT OF REVE	P02090332 Paid Preparer's PTIN Department may sturn with the third e shown in this step.		



Nonresident and Part-Year Resident **Computation of Illinois Tax**

IL Attachment No. 2

SAHANA BASAPPA	8 6 0 _ 0 8 _ 5 9 3 5	
Your name as shown on your Form IL-1040	Your Social Security number	

S	tep 1: Provide the following information
1	Were you, or your spouse if "married filing jointly," a full-year resident of Illinois during the tax year?
	Yes No If you answered "Yes," you cannot use this form (see instructions).
2	If you, or your spouse if "married filing jointly," were a part-year resident during the tax year, tell us your residency dates for 2018.
	A I lived in Illinois from//1_8 to//1_8 Month Day Year Month Day Year State from//1_8 to//1_8 State Month Day Year Month Day Year
	b My spouse lived in Illinois from//1_8 to//1_8 , and from//1_8 to//1_8 Month Day Year Month Day Year State Month Day Year Month Day Year
3	If you were a resident of any of the states listed below during the tax year or if you were in Illinois only to accompany your spouse who was in the military, check the appropriate box.
	☐ Iowa ☐ Kentucky ☐ Michigan ☐ Wisconsin ☐ Military Spouse

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.

4 If you earned income or filed a tax return for the tax year in a state other than those listed above, enter the two-letter abbreviation of that state.

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
Г	5	Wages, salaries, tips, etc. (federal Form 1040, Line 1)	5_	63,916.00	17,895 _{.00}
1	6	Taxable interest (federal Form 1040, Line 2b)	6_	.00	.00
1	7	Ordinary dividends (federal Form 1040, Line 3b)	7_	.00	.00
1	8	Taxable refunds, credits, or offsets of state and local income taxes			
1		(federal Form 1040, Schedule 1, Line 10)	8 _	.00	.00
	9	Alimony received (federal Form 1040, Schedule 1, Line 11)	9_	.00	.00
1	10	Business income or loss (federal Form 1040, Schedule 1, Line 12)	10_	.00	.00
1	11	Capital gain or loss (federal Form 1040, Schedule 1, Line 13)	11 _	.00	
1	12	Other gains or losses (federal Form 1040, Schedule 1, Line 14)	12	.00	
٥	13	Taxable IRAs, pensions, and annuities (federal Form 1040, Line 4b)	13 _	.00	.00
١Ĕ	14	RESERVED	14_		
<u>n</u>	15	Rental real estate, royalties, partnerships, S corporations, trusts, etc.			
=		(federal Form 1040, Schedule 1, Line 17)	15 _	-4,500 <u>.00</u>	<u>-4,500.00</u>
	16	Farm income or loss (federal Form 1040, Schedule 1, Line 18)	16 _	.00	.00
1	17	Unemployment compensation and Alaska Permanent Fund dividends			
		(federal Form 1040, Schedule 1, Line 19)	17_	.00	
	18	Taxable Social Security benefits (federal Form 1040, Line 5b)	18 _	.00	
1	19	Other income. See instructions. (federal Form 1040, Schedule 1, Line 21)			
		Include winnings from the Illinois State Lottery 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	ncome	. 20	13,395 <u>.00</u>

IL-1040 Schedule NR Front (R-12/18)

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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.



Continue with Step 3 on Page 2



				Scnea	
St	ер	3: Continued		Column A Federal Total	Column B Illinois Portion
		Enter the Illinois portion of your federal total income from Page 1, Step 3, Line 20.		21	13,395 _{.00}
		Educator expenses (federal Form 1040, Schedule 1, Line 23)	22	.00	
	23	Certain business expenses of reservists, performing artists, and fee-basis			
		government officials (federal Form 1040, Schedule 1, Line 24)			
		Health savings account deduction (federal Form 1040, Schedule 1, Line 25)	_		
Income		Moving expenses for members of the Armed Forces (fed. Form 1040, Sch. 1, Line 26)25	.00	
8	26	Deductible part of self-employment tax (federal Form 1040, Schedule 1, Line 27)	26 .	.00	.00
_	27	Self-employed SEP, SIMPLE, and qualified plans (fed. Form 1040, Sch. 1, Line 28)	27 .	.00	
유	28	Self-employed health insurance deduction (federal Form 1040, Schedule 1, Line 29) 28 _	.00	.00
ts	29	Penalty on early withdrawal of savings (federal Form 1040, Schedule 1, Line 30)	29	.00	.00
Adjustments	30	Alimony paid (federal Form 1040, Schedule 1, Line 31a)			.00
15	31	IRA deduction (federal Form 1040, Schedule 1, Line 32)	31	.00	.00
IS I	32	Student loan interest deduction (federal Form 1040, Schedule 1, Line 33)	32	.00	.00
Ϊ́̈́	33	RESERVED	33		
<	34	RESERVED	34		
	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	.00
	37	Enter your adjusted gross income as reported on your Form IL-1040, Line 1.	37 .	59,416 _{.00}	
	38	Subtract Line 36 from Line 21. This is the Illinois portion of your federal adjusted gro	ss in	come. 38	13,395.00
Adjustments	1	Federally tax-exempt interest and dividend income (Form IL-1040, Line 2) Other additions (Form IL-1040, Line 3)		Form IL-1040 Total .00 .00	Illinois Portion
ustm	41	Add Column B, Lines 38, 39, and 40. This is the Illinois portion of your total income.		41	13,395.00
_	42 43	Federally taxed Social Security and retirement income (Form IL-1040, Line 5) Illinois Income Tax overpayment included on your fed. Form 1040, Sch. 1, Line 10.	42	.00	
ois		(Form IL-1040, Line 6)	43	.00	
 ≣		Other subtractions (Form IL-1040, Line 7)	44	.00	
匡	45	Add Column B, Lines 42 through 44. This is the total of your Illinois subtractions.		45	.00
St	ер				
Г	46	5: Figure your Illinois income and tax			
		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			
				46	13,395.00
l S	I 4 →	Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is			
15	47	Subtract Line 45 from Line 41. If Line 45 is larger than Line 41, enter zero. This is your Illinois base income.	47		
Iı≚		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		59,416.00	
latic	48	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.	48	59,416 _{.00}	
culation	48 49	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.		59,416.00	
alculation	48 49	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	48	59,416 _{.00} 0 • 225 2,225 _{.00}	13,395.00
κ Calculations	48 49 50	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.	48	59,416 _{.00}	
	48 49 50	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.	48	59,416.00 0 • 225 2,225.00 50	13,395 _{.00}
Tax Calculation	48 49 50 51	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.	48 49	59,416 _{.00} 0 • 225 2,225 _{.00}	13,395.00
	48 49 50 51	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 2	48 49	59,416.00 0 • 225 2,225.00 50	13,395 _{.00}
	48 49 50 51	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.	48 49	59,416.00 0 • 225 2,225.00 50	13,395 _{.00}

IL-1040 Schedule NR Back (R-12/18)





Illinois Department of Revenue

2018 IL-8453 Illinois Individual Income Tax Electronic Filing Declaration

		· · · · · ·	iment of Revenue u	nless it is requested for review.)
Step	o 1: Provide taxpayer informa	A tion Basa	מתח	0 6 0 0 0 5 0 3 5
	SAHANA First name and middle initial Spouse's first nam	e (and last name if differe		
Print or	2901 SOUTH KING DRIVE		•	
	Mailing address			Spouse's Social Security number
	Chicago	IL	60616	(312) 459-9406
	City	State	ZIP	Daytime phone number
Ste	2: Complete information from	om tax return		
1 i	Net income from Form IL-1040, Line 11			1 12,894 _00_
2 T	ax from Form IL-1040, Line 12			2 638 00
	llinois Income Tax withheld from Form IL-	•	(enter "0" if none)	3886 00
	Overpayment from Form IL-1040, Line 35			4 248 00
	otal amount due from Form IL-1040, Line			5l <u>00</u> _
6 F	Filing status: X Single/head of househo	old Married filin	g jointly Married filin	ng separately Widowed
7 F 8 A 9 T 10 E	The United States or those not funded by Routing no. (RN): _0 _ 7 _ 1 _ 0 _ 0 _ 0 Account no. (AN): _1 _2 _8 _7 _5 _ Type of account: _X Checking S Date the payment is to be electronically we selectronic funds withdrawal amount:	0 0 1 3 3 1 9 8 Savings		not be accepted and refunds will be via paper check.
		signature (Sig	n only after comple	ting Step 2 and, if applicable, Step 3.)
×	I consent that my refund may be direct	ly deposited as desi	gnated in Step 3 and dec	clare the information on Lines 7 through 9 is pouse as an agent to receive the refund.
	withdrawal as designated in the electro	onic portion of my 20 onic overpayment of	018 Illinois Individual Inco	agent to initiate an ACH electronic funds ome Tax return. I authorize the financial institutions ntial information necessary to answer inquiries
	I do not want direct deposit of my refur		•	· · · · ·
origin and a	ator (ERO) are identical. To the best of my ccompanying information may be sent to accepted or rejected. If rejected, I authorize	knowledge, my retu IDOR by my ERO. I	ırn is true, correct, and co authorize IDOR to inform	Information I provided to my electronic return emplete. I consent that my return, this declaration, my ERO and/or the transmitter when my return has a may be corrected and retransmitted if possible.
here	Your signature	Date	Spouse's signatur	re (if joint return, both must sign) Date
I decī have		electronic Form IL-1 and declare, under	040, the information on t	claration and signature his Form IL-8453, and accompanying information. I to the best of my knowledge the taxpayer's return Check if paid preparer: (See instructions.)
	ERO's signature		Date	(000
ERO	GLOBAL TAXES LLC			<u>P 0 2 0 9 0 3 3 2</u>
use	Firm's name or your name if self-employed			Your PTIN
only	2530 Pebble Creek Ln			$\frac{3}{5} + \frac{0}{1} + \frac{1}{1} + \frac{0}{1} + \frac{1}{1} + \frac{9}{1} + \frac{6}{1} + \frac{9}{1} + \frac{1}{1} + \frac{9}{1} + \frac{6}{1} + \frac{9}{1} + \frac{1}{1} + \frac{9}{1} + \frac{6}{1} + \frac{9}{1} + \frac{1}{1} + \frac{9}{1} + \frac{9}$
•	Mailing address		20041	Federal employer identification number (FEIN)
	<u>Cumming</u> City	GA State	30041 ZIP	Daytima phone number
	Oity	Siale	∠ 1Γ	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.



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		

Step 1: Provide your withholding records (includes all W-2 and 1099 forms)

	NA BASAPPA			86	5 0		0 8		5 9	3	5
Your name as shown on Form IL-1040			Your Soc	Your Social Security number							
_	olumn 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.			s II	Column E Illinois Income Tax Withheld	
1 _	W	36-1115800 000 1	_ \$	17,895 _{•00}	0	\$	17,8	95 •00	\$	8	886 <u>•00</u>
2			_ \$	•00	<u>0</u>	\$		<u>•00</u>	\$		<u>•00</u>
3			_ \$	•00	<u>0</u>	\$		<u>•00</u>	\$		•00
4			_ \$	•00	<u>0</u>	\$		<u>•00</u>	\$		<u>•00</u>
5			_ \$	•00	<u>0</u>	\$		<u>•00</u>	\$		<u>•00</u>

Step 2: Provide spouse's withholding records (includes all W-2 and 1099 forms)

Your spouse's name	as shown on Form IL-1040	Your spouse's Social Security number						
Column A Form type	Column B Employer/Payer Identification Number	Column C Column D Federal Wages, Winnings, Gross Distributions, Compensation, etc. Column D Illinois Wages, Winnings, Gross Distributions, Compensation, etc.						
6		_ \$	•00	\$	•00	\$	•00	
7		\$	•00	\$	•00	\$	•00	
8		_ \$	•00	\$	•00	\$	•00	
9		_ \$	•00	\$	•00	\$	•00	
10		\$	•00	\$	•00	\$	<u>•00</u>	

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.

886**.00** 11 \$_

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

IL-1040 Schedule IL-WIT Front (N-12/18) Printed by authority of the State of Illinois - web only, 1.



