Illinois Department of Revenue

2017 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

747-59-3685

VINOD KUMAR

KANDIMALLA

2951 S KING DRIVE

811

Chicago

IL

60616

	С	Filing status (see instructions)									
		Single or head of household	□w	idowed							
Step 2:	1										
Income		1040EZ, Line 4 1 15,072.00									
	2	Federally tax-exempt interest and dividend income from your federal Form 1040 or 1040A,									
		ine 8b; or federal Form 1040EZ									
	3	3 Other additions. Attach Schedule M. 3									
	4	Total income. Add Lines 1 through 3.	4	15,072 _{.00}							
Step 3:	5	Social Security benefits and certain retirement plan income									
Base	_	received if included in Line 1. Attach Page 1 of federal return. 5	0								
Income	6	Illinois Income Tax overpayment included in federal Form 1040, Line 10 6	0								
moomo	7		0								
		Check if Line 7 includes any amount from Schedule 1299-C.	_								
	8	Add Lines 5, 6, and 7. This is the total of your subtractions.	8	.00							
	9	·	9	15,072.00							
Step 4:	See	instructions before completing Step 4.									
•	10	a Number of exemptions from your federal return $\frac{1}{2}$ X \$2,175 a $\frac{2,175}{0}$	00								
Exemptions			00								
			00								
		d Check if legally blind: ☐ You + ☐ Spouse = X \$1,000 d	00								
		Exemption allowance. Add Lines a through d.	10	2,175.00							
Step 5:	11	Residents: Net income. Subtract Line 10 from Line 9. Skip Line 12.	11	12,897 _{.00}							
Net	12	Nonresidents and part-year residents:									
Income		Check the box that applies to you during 2017 ☐ Nonresident ☐ Part-year resident, and									
		enter the Illinois base income from Schedule NR. Attach Schedule NR. 12	0								
Step 6:	13	Residents: Multiply Line 11 by 4.3549% (.043549). Cannot be less than zero.									
Tax		Nonresidents and part-year residents: Enter the tax from Schedule NR.									
IUX		Check if you completed Schedule SA to calculate your income tax. Attach Schedule SA.	13	562 _{.00}							
	14		14	.00							
	15	Income tax. Add Lines 13 and 14. Cannot be less than zero.	15	562.00							
Step 7:	16	Income tax paid to another state while an Illinois resident.									
•		Attach Schedule CR. 16	0								
Tax After Non-	17										
refundable		Schedule ICR. Attach Schedule ICR. 17									
Credits	18		<u>0</u>								
0.00.0	19	Add Lines 16, 17, and 18. This is the total of your credits. Cannot	10	0.00							
	20	exceed the tax amount on Line 15.	19	0.00							
	Z U	Tax after nonrefundable credits. Subtract Line 19 from Line 15.	20	562.00							

	21 Tax after nonrefundable credits from Page 1, Line 20				e 20	21	56	52.00		
Step 8:	22	Household employm	ent tax. See inst	ructions.		22		.00		
Other	23	Use tax on internet,			ate purchases from					
Taxes		UT Worksheet or UT				23		0.00		
		Compassionate Use			gram Act Surcharge	24		.00	5.60	
	25	Total Tax. Add Lines	21, 22, 23, and	24.				25	562 <u>.00</u>	
Step 9:	26	Illinois Income Tax w				26	84	45 <u>.00</u>		
Payments	27	Estimated payments				27		00		
and Refundable	28	including any overpa Pass-through withhol						<u>.00</u> .00		
Credit	29	Earned Income Cred								
	30	Total payments and						30	845.00	
Step 10:	31	If Line 30 is greater th		31	283.00					
Total		If Line 25 is greater th							.00	
		Only complete this				ent				
Step 11:		of estimated tax or				CIII				
Underpaymer of Estimated		Late-payment penalt				33		.00		
Tax Penalty	ı	a Check if at least tw	o-thirds of your	ederal gross	s income is from farr	ming.				
and		b Check if you or you	-	or older and	d permanently					
Donations		living in a nursing h								
		c Check if your incom		-		0				
		•			Attach Form IL-221					
	d Check if you were not required to file an Illinois Individual Income Tax									
return in the previous tax year. \Box 34 Voluntary charitable donations. Attach Schedule G. 34								.00		
	34 Voluntary charitable donations. Attach Schedule G.35 Total penalty and donations. Add Lines 33 and 34.								.00	
Step 12:	36							35		
•	30	Line 35, subtract Line			-			36	283.00	
Refund	37	Amount from Line 36		-		ne 38. Se	e instructi			
		I choose to receive n	-	•						
		a 🗵 direct deposit	- Complete the i	nformation b	elow if you check th	is box.				
		Routing numbe	r 1 1 1 0	0 0 6	1 4 × C	hecking o	r Sav	ings		
	Account number 2 1 6 2 2 3 8 1 5									
							—			
	b 🔲 Illinois Individual Income Tax refund debit card									
	20	c ☐ paper check	al farmer and Ordets		f			20	00	
Step 13:		Amount to be credite				istructions	i.	39	.00	
•	40	If you have an amou				.=				
Amount		If you have an amou						40	00	
You Owe	•	subtract Line 31 fron	T LINE 35. THIS IS	ine amoun	t you owe. See mst	Tuctions.		40	.00	
Step 14: 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.								ect, and complete.		
Sign										
Here	our sigr	ature	Date (mm/dd/yyyy)	Spouse's signature		Date (mm.	/dd/yyyy)	Daytime phone	number	
	APPAN	A RUPA VENKATA	SA			06/12		Check if	P02090332	
Paid	Print/Typ	e paid preparer's name		Paid prepare	Date (mm.	/dd/yyyy)	self-employed	Paid Preparer's PTIN		
Preparer Use Only	irm's na	me • GLOBAL	TAXES LLC			Firm's FEIN		301017196		
	irm's ad	dress > 2530 Pe	bble CreekC	umming	GA 30041	Firm's ph	one >	(678)965-9729		
Third							Check if th	e Department may		
Party							eturn with the third			
	Designee's name (please print) Designee's phone number party designee shown in this s								e snown in this step.	
If no payment enclosed, mail to: ILLINOIS DEPARTMENT OF REVENUE ILLINOIS DEPARTMENT OF REVENUE ILLINOIS DEPARTMENT OF REVENUE										

ID: 3WM SPRINGFIELD IL 62719-0001 IL-1040 Back (R-12/17) REV 01/23/18 PRO DR_

DR_

SPRINGFIELD IL 62726-0001

RR DC IR





Illinois Department of Revenue

						-								_							
Submission ID																					

2017 IL-8453 Illinois Individual Income Tax Electronic Filing Declaration

	(Do not mail Form IL-8453 to the	· · · · · ·	rtment of Revenue un	less it is requested for review.)	_
			IMALLA ent) Last name		5
Print or	2951 S KING DRIVE 811 Mailing address			Spouse's Social Security number	
type	Chicago	IL	60616	Spouse's Social Security Humber	
	City	State	ZIP		_
Stei	o 2: Complete information fro	m tax return			_
	Net income from Form IL-1040, Line 11, o		p 5. Line 51	112,897 00	<u>) </u>
	Tax from Form IL-1040, Line 13		p 0, =0 0 .	2 562 00	<u> </u>
	llinois Income Tax withheld from Form IL-	3845 I_00	<u>) </u>		
4 (Overpayment from Form IL-1040, Line 36	•	,	4 283 _0 0	<u>) </u>
5 7	Total amount due from Form IL-1040, Line	40		5I <u>.00</u>	<u>)</u>
6 F	Filing status: X Single/head of househo	ld Married filin	g jointly Married filing	separately Widowed	
7 F 8 / 9 T 10 E 11 E	Account no. (AN): 1 1 1 0 0 0 0 Account no. (AN): 2 1 6 2 2 2 Type of account: X Checking Solution S	6 1 4 3 8 1 5 avings thdrawn://		ot be accepted and refunds will be via paper chec	ж.
Step	o 4: Taxpayer declaration and	signature (Sig	n only after complet	ing Step 2 and, if applicable, Step 3.)	
×			-	are the information on Lines 7 through 9 is ouse as an agent to receive the refund.	
		nic portion of my 20 nic overpayment of	017 Illinois Individual Incor	gent to initiate an ACH electronic funds ne Tax return. I authorize the financial institution ial information necessary to answer inquiries	S
	I do not want direct deposit of my refun	d, or an electronic f	unds withdrawal (direct de	ebit) of my balance due.	
origin and a	ator (ERO) are identical. To the best of my accompanying information may be sent to li accepted or rejected. If rejected, I authoriz	knowledge, my retu DOR by my ERO. I	ırn is true, correct, and cor authorize IDOR to inform n	ormation I provided to my electronic return nplete. I consent that my return, this declaration, ny ERO and/or the transmitter when my return ha may be corrected and retransmitted if possible.	.S
here	Your signature	Date	Spouse's signature	(if joint return, both must sign) Date	_
I deci have		lectronic Form IL-1 and declare, under	040, the information on th	laration and signature is Form IL-8453, and accompanying information to the best of my knowledge the taxpayer's return Check if paid preparer: (See instructions.)	1
	ERO's signature		Date	Oce monucions.	
EDO	GLOBAL TAXES LLC			P 0 2 0 9 0 3 3 2	!
ERO use	Firm's name or your name if self-employed			Your PTIN	
only	2530 Pebble Creek Ln			3 0 - 1 0 1 7 1 9 6	
,	Mailing address	-		Federal employer identification number (FEIN)	
	Cumming	GA	30041	(678)965-9729	
	City	State	ZIP	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.



► Keep for your own records

Part I — Personal Information								
Taxpayer:	Spouse:							
First Name VINOD KUMAR	First Name							
Middle Initial	Middle Initial							
Last Name KANDIMALLA	Last Name							
Suffix	Suffix							
Social Security No 747-59-3685	Social Security No							
Date of Birth 02/19/1994 Date of Birth								
Age 65 or Over	Age 65 or Over							
Legally Blind	Legally Blind L							
Date of Death	Date of Death							
Daytime phone *	Daytime phone *							
Home phone *								
* Check one of these boxes to print the daytime phone num	nber on the Illinois forms.							
Street Address 2951 S KING DRIVE								
	State . IL ZIP Code 60616							
For foreign address, Illinois Department of Revenue require	es the following information:							
Foreign City	Foreign Province or State							
Foreign Country	Foreign Postal Code							
Part II — Resident Status								
X Full-Year Resident Nonresident Part-Year Resident lived in Illinois from to also lived in from to QuickZoom here to Form IL-1040								
X Single or head of household Married filing jointly Married filing separately Widowed								
Part IV — Other Information								
Form IL-2210 Information: Check if at least two-thirds of total federal gross income came from farming Check if 65 or older and permanently living in a nursing home Check if you were not required to file an Illinois income tax return in 2016 X Check if you do not want to file Illinois Form IL-2210 (see on-line help) Enter total tax from last year's Form IL-1040, line 15 (for IL-2210, line 1)								
First Time Filer: Yes No								
Has client ever filed a tax return in Illinois?								

Part V — Electronic Filing Information					
X File state return electronically					
Electronic PDF Attachments PDF's that you have selected to attach to your state e-file Description Date return was EFiled	Filename				
Part VI — Direct Deposit Information or Electroni	c Funds Withdrawal Information				
Yes No X Use direct deposit for state tax refund Use electronic funds withdrawal for state tax payment (EF only) Elect to receive a state issued debit card for state refund (if you check No then your client will receive a paper check) If you selected direct deposit or electronic funds withdrawal, fill out the information below: Name of Financial Institution (optional)					
International ACH Transactions Yes No	a ta (au agrae frans) an agasumt autaida tha LLC 2				
X Will the funds for this refund (or payment) go to (or come from) an account outside the U.S.?					
Part VII — Payment by Credit Card					
Check if the balance due will be paid by credit care	d				
Part VIII — Paid Preparer Information and Third I	Party Designee Information				
Enter the preparer's assigned code from Preparer's Inform Check if this tax return is self-preparer's No Client allows a personal representative to dis If yes, complete information below: Designee's name Designee's phone number	ed, or prepared by a non-paid preparer cuss return with the Illinois Department of Revenue				
Part IX — Extension Status					
Yes No X Tax return due date extended? If yes, extend QuickZoom to Form II -505-I: Automatic Extension Paym					

Name VINC	D KUMAR KANDIMALLA		Social Security Number 747-59-3685				
Тах	Payments for the Current Year	1					
			s	tate			
		Da	ite	Payment			
1 2 3 4	First Payment						
5	Additional Payments Payment		-				
6 7	Overpayment from previous year applied to current year		6 7				
8	Total tax payments		8 _				
Inco	me Taxes Withheld for the Current Year						
9 10 11 12 a b c d	State withholding on Forms 1099-G		9	845.			
14	Total income tax withheld		14 _	845.			
15	Date return will be filed and balance paid		15				

Smart Worksheets from your 2017 Illinois Tax Return

SMART WORKSHEET FOR: Form IL-1040: Illinois Individual Income Tax Return

Use Tax Smart Worksheet								
Method 1: Use Tax (UT) Worksheet Complete this worksheet to report and pay your use tax on Form IL-1040. If you annual use tax liability if over \$600, you must file and pay your use tax with Form ST-44. Note: Do not include any - items for which you paid sales tax in another state (but not in another country) of - 6.25% or more on Line 1a and - 1% or more on Line 2a - sales tax you paid in another state, on line 4, for items not included in Lines 1a or 2a								
1a Enter the total cost of general merchandise you purchased to use in Illinois on which you did not pay the required amount of Illinois Use Tax								
1b Multiply Line 1a by 6.25% (.0625). Round the result to whole dollars 1b								
to estimate annual Illinois Use Tax liability.	nave receipts to figure purchases, use the table							
AGI (from IL-1040, Line 1) Use Tax \$0 - \$10,000 \$3 \$10,001 - \$20,000 \$9 \$20,001 - \$30,000 \$15 \$30,001 - \$40,000 \$21 \$40,001 - \$50,000 \$27 \$50,001 - \$75,000 \$38 \$75,001 - \$100,000 \$52 Above \$100,000 Multiply AGI by 0.06% (0.0006)								
To use UT table calculate Use Tax, check here								
Keep a copy of this smart worksheet with your records.								