



Illinois Department of Revenue
2017 Form IL-1040

Individual Income Tax Return

or for fiscal year ending ___/___/___

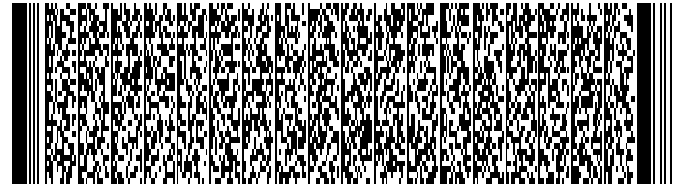
Over 80% of taxpayers file electronically. It is easy and you will get your refund faster. Visit tax.illinois.gov.

Step 1: Personal Information

841-24-2377

RAVI TEJA

KANDRU



2010 HASSELL RD

207

HOFFMAN ESTATES IL

60169

C Filing status (see instructions)

Single or head of household Married filing jointly Married filing separately Widowed

↓ Staple W-2 and 1099 forms here
 ↑
 ↓ Staple your check and IL-1040-V

| | | | | | |
|-------------------|---|--|----------------------|-----------|-----------|
| Step 2: | 1 | Federal adjusted gross income from your federal Form 1040, Line 37; 1040A, Line 21; or 1040EZ, Line 4 | (Whole dollars only) | 1 | 43,700.00 |
| Income | 2 | Federally tax-exempt interest and dividend income from your federal Form 1040 or 1040A, Line 8b; or federal Form 1040EZ | | 2 | .00 |
| | 3 | Other additions. Attach Schedule M. | | 3 | .00 |
| | 4 | Total income. Add Lines 1 through 3. | | 4 | 43,700.00 |
| Step 3: | 5 | Social Security benefits and certain retirement plan income received if included in Line 1. Attach Page 1 of federal return. | | 5 | .00 |
| Base | 6 | Illinois Income Tax overpayment included in federal Form 1040, Line 10 | | 6 | .00 |
| Income | 7 | Other subtractions. Attach Schedule M. Check if Line 7 includes any amount from Schedule 1299-C. <input type="checkbox"/> | | 7 | .00 |
| | 8 | Add Lines 5, 6, and 7. This is the total of your subtractions. | | 8 | .00 |
| | 9 | Illinois base income. Subtract Line 8 from Line 4. | | 9 | 43,700.00 |
| Step 4: | See instructions before completing Step 4. | | | | |
| Exemptions | 10 a | Number of exemptions from your federal return | <u>1</u> X \$2,175 | a | 2,175.00 |
| | b | If someone can claim you as a dependent, see instructions. | <u> </u> X \$2,175 | b | .00 |
| | c | Check if 65 or older: <input type="checkbox"/> You + <input type="checkbox"/> Spouse = | <u> </u> X \$1,000 | c | .00 |
| | d | Check if legally blind: <input type="checkbox"/> You + <input type="checkbox"/> Spouse = | <u> </u> 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. <i>Skip</i> Line 12. | | 11 | 41,525.00 |
| Net | 12 | Nonresidents and part-year residents: Check the box that applies to you during 2017 <input type="checkbox"/> Nonresident <input type="checkbox"/> Part-year resident, and enter the Illinois base income from Schedule NR. Attach Schedule NR. | | 12 | .00 |
| Income | 13 | Residents: Multiply Line 11 by 4.3549% (.043549). Cannot be less than zero. Nonresidents and part-year residents: Enter the tax from Schedule NR. Check if you completed Schedule SA to calculate your income tax. Attach Schedule SA. <input type="checkbox"/> | | 13 | 1,808.00 |
| Tax | 14 | Recapture of investment tax credits. Attach Schedule 4255. | | 14 | .00 |
| | 15 | Income tax. Add Lines 13 and 14. Cannot be less than zero. | | 15 | 1,808.00 |
| Step 7: | 16 | Income tax paid to another state while an Illinois resident. Attach Schedule CR. | | 16 | .00 |
| Tax After | 17 | Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR. | | 17 | .00 |
| Non- | 18 | Credit amount from Schedule 1299-C. Attach Schedule 1299-C. | | 18 | .00 |
| refundable | 19 | Add Lines 16, 17, and 18. This is the total of your credits. Cannot exceed the tax amount on Line 15. | | 19 | 0.00 |
| Credits | 20 | Tax after nonrefundable credits. Subtract Line 19 from Line 15. | | 20 | 1,808.00 |



| | | | | |
|---------------------------------------|----|--|----|----------|
| | 21 | Tax after nonrefundable credits from Page 1, Line 20 | 21 | 1,808.00 |
| Step 8: | 22 | Household employment tax. See instructions. | 22 | .00 |
| Other Taxes | 23 | 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. | 23 | 0.00 |
| | 24 | Compassionate Use of Medical Cannabis Pilot Program Act Surcharge | 24 | .00 |
| | 25 | Total Tax. Add Lines 21, 22, 23, and 24. | 25 | 1,808.00 |
| Step 9: | 26 | Illinois Income Tax withheld. Attach all W-2 and 1099 forms. | 26 | 2,125.00 |
| Payments and Refundable Credit | 27 | Estimated payments from Forms IL-1040-ES and IL-505-I, including any overpayment applied from a prior year return | 27 | .00 |
| | 28 | Pass-through withholding payments. Attach Schedule K-1-P or K-1-T. | 28 | .00 |
| | 29 | Earned Income Credit from Schedule IL-EIC. Attach Schedule IL-EIC. | 29 | .00 |
| | 30 | Total payments and refundable credit. Add Lines 26 through 29. | 30 | 2,125.00 |
| Step 10: | 31 | If Line 30 is greater than Line 25, subtract Line 25 from Line 30. | 31 | 317.00 |
| Total | 32 | If Line 25 is greater than Line 30, subtract Line 30 from Line 25. | 32 | .00 |

Step 11: Underpayment of Estimated Tax Penalty and Donations

Only complete this step for late-payment penalty for underpayment of estimated tax or to make a voluntary charitable donation.

| | | | |
|----|--|--------------------------|-----|
| 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. | <input type="checkbox"/> | |
| | b Check if you or your spouse are 65 or older and permanently living in a nursing home. | <input type="checkbox"/> | |
| | 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. | <input type="checkbox"/> | |
| | d Check if you were not required to file an Illinois Individual Income Tax return in the previous tax year. | <input type="checkbox"/> | |
| 34 | Voluntary charitable donations. Attach Schedule G. | 34 | .00 |
| 35 | Total penalty and donations. Add Lines 33 and 34. | 35 | .00 |

Step 12: Refund

| | | | |
|----|--|-------------------------|--|
| 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 | 317.00 |
| 37 | Amount from Line 36 you want refunded to you . Check one box on Line 38. See instructions. | 37 | 317.00 |
| 38 | I choose to receive my refund by | | |
| | a <input checked="" type="checkbox"/> direct deposit - Complete the information below if you check this box. | | |
| | Routing number | 0 8 1 0 0 0 0 3 2 | <input checked="" type="checkbox"/> Checking or <input type="checkbox"/> Savings |
| | Account number | 3 5 5 0 0 4 4 7 1 8 7 2 | |
| | b <input type="checkbox"/> Illinois Individual Income Tax refund debit card | | |
| | c <input type="checkbox"/> paper check | | |
| 39 | Amount to be credited forward . Subtract Line 37 from Line 36. See instructions. | 39 | .00 |

Step 13: Amount You Owe

| | | | |
|----|--|----|-----|
| 40 | If you have an amount on Line 32, add Lines 32 and 35. - or - If you have an amount on Line 31 and this amount is less than Line 35, subtract Line 31 from Line 35. This is the amount you owe . See instructions. | 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.

| | | | | | |
|-------------------------------|---------------------------------|-----------------------------------|--|---|----------------------|
| Sign Here | Your signature | Date (mm/dd/yyyy) | Spouse's signature | Date (mm/dd/yyyy) | Daytime phone number |
| | APPANA RUPA VENKATA SA | 06/12/2018 | | | |
| Paid Preparer Use Only | Print/Type paid preparer's name | Paid preparer's signature | Date (mm/dd/yyyy) | <input type="checkbox"/> Check if self-employed | Paid Preparer's PTIN |
| | Firm's name | GLOBAL TAXES LLC | Firm's FEIN | 301017196 | |
| | Firm's address | 2530 Pebble CreekCumming GA 30041 | Firm's phone | (678) 965-9729 | |
| Third Party Designee | 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. | | |
| | | | | | |



Illinois Department of Revenue

Submission ID

2017 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

RAVI TEJA KANDRU 8 4 1 - 2 4 - 2 3 7 7
First name and middle initial Spouse's first name (and last name if different) Last name Social Security number
2010 HASSELL RD 207
Mailing address
HOFFMAN ESTATES IL 60169
City State ZIP Daytime phone number

Step 2: Complete information from tax return

1 Net income from Form IL-1040, Line 11, or Schedule NR, Step 5, Line 51 1 41,525 | 00
2 Tax from Form IL-1040, Line 13 2 1,808 | 00
3 Illinois Income Tax withheld from Form IL-1040, Line 26 only (enter "0" if none) 3 2,125 | 00
4 Overpayment from Form IL-1040, Line 36 4 317 | 00
5 Total amount due from Form IL-1040, Line 40 5 | 00
6 Filing status: X Single/head of household Married filing jointly Married filing separately Widowed

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. Illinois does not support international ACH transactions. IDOR will only perform direct transactions (e.g., debit, deposit) with financial institutions located within the United States or those not funded by international funds. Electronic payments will not be accepted and refunds will be via paper check.

7 Routing no. (RN): 0 8 1 0 0 0 0 3 2
8 Account no. (AN): 3 5 5 0 0 4 4 7 1 8 7 2
9 Type of account: X Checking Savings
10 Date the payment is to be electronically withdrawn: / /
11 Electronic funds withdrawal amount: | 00
12 Name on account:

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

- I consent that my refund may be directly deposited as designated in Step 3 and declare the information on Lines 7 through 9 is correct. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.
I authorize the Illinois Department of Revenue (IDOR) and its designated financial agent to initiate an ACH electronic funds withdrawal as designated in the electronic portion of my 2017 Illinois Individual Income Tax return. I authorize the financial institutions involved in the processing of an electronic overpayment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
I do not want direct deposit of my refund, or an electronic funds withdrawal (direct debit) of my balance due.

Under penalties of perjury, I declare the information on my electronic Form IL-1040 and the information I provided to my electronic return originator (ERO) are identical. To the best of my knowledge, my return is true, correct, and complete. I consent that my return, this declaration, and accompanying information may be sent to IDOR by my ERO. I authorize IDOR to inform my ERO and/or the transmitter when my return has been accepted or rejected. If rejected, I authorize IDOR to identify the reason(s) so the return may be corrected and retransmitted if possible.

Sign here Your signature Date Spouse's signature (if joint return, both must sign) 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, the information on this Form IL-8453, and accompanying information. I have followed all requirements of this program and declare, under penalties of perjury, that to the best of my knowledge the taxpayer's return and accompanying information are true, correct, and complete.

ERO's signature Date 06/12/2018 Check if paid preparer: X (See instructions.)
GLOBAL TAXES LLC Date
2530 Pebble Creek Ln
Mailing address
Cumming GA 30041
City State ZIP
P 0 2 0 9 0 3 3 2
Your PTIN
3 0 - 1 0 1 7 1 9 6
Federal employer identification number (FEIN)
(678) 965-9729
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 Information Worksheet

2017

Keep for your own records

Part I - Personal Information

Taxpayer:

First Name RAVI TEJA
Middle Initial
Last Name KANDRU
Suffix
Social Security No. . 841-24-2377
Date of Birth 12/18/1992
Age 65 or Over
Legally Blind
Date of Death
Daytime phone
Home phone

Spouse:

First Name
Middle Initial
Last Name
Suffix
Social Security No. .
Date of Birth
Age 65 or Over
Legally Blind
Date of Death
Daytime phone

* Check one of these boxes to print the daytime phone number on the Illinois forms.

Street Address 2010 HASSELL RD Apartment Number . 207
City HOFFMAN ESTATES State . IL ZIP Code . . 60169

For foreign address, Illinois Department of Revenue requires 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

Part III - Filing Status

[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)

Enter credits from last year's Form IL-1040, lines 16, 17, 18 and 28 (for IL-2210, line 2)

First Time Filer:

Yes No
[] [] Has client ever filed a tax return in Illinois?

Part V – Electronic Filing Information

File state return electronically

Electronic PDF Attachments

PDF's that you have selected to attach to your state e-file return are listed below.

Table with 2 columns: Description, Filename

Date return was EFiled
Date return was accepted by the state
Enter the date Form IL-1040-V was given to client
QuickZoom to Form IL-8453: Additional Information Smart Worksheet

Part VI – Direct Deposit Information or Electronic Funds Withdrawal Information

Yes No
 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) BANK OF AMERICA
Name on account
Check the appropriate box:
Checking Routing number 081000032
Savings Account number 355004471872
Enter the payment date to withdraw from the account above
State balance-due amount from this return
Enter an amount to withdraw from the account above
If partial payment is made, enter remaining balance due

International ACH Transactions

Yes No
 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 card

Part VIII – Paid Preparer Information and Third Party Designee Information

Enter the preparer's assigned code from Preparer's Information Worksheet 1
Check if this tax return is self-prepared, or prepared by a non-paid preparer
Yes No
 Client allows a personal representative to discuss return with the Illinois Department of Revenue
If yes, complete information below:
Designee's name
Designee's phone number

Part IX – Extension Status

Yes No
 Tax return due date extended? If yes, extended due date
QuickZoom to Form IL-505-I: Automatic Extension Payment

Tax Payments Worksheet

2017

▶ Keep for your records

| | |
|--------------------------|---------------------------------------|
| Name RAVI TEJA KANDRU | Social Security Number 841-24-2377 |
|--------------------------|---------------------------------------|

Tax Payments for the Current Year

| | | State | |
|----------------------------|--|-------|---------|
| | | Date | Payment |
| 1 | First Payment | | |
| 2 | Second Payment | | |
| 3 | Third Payment | | |
| 4 | Fourth Payment | | |
| Additional Payments | | | |
| 5 | Payment | | |
| | Payment | | |
| | Payment | | |
| | Payment | | |
| | Payment | | |
| 6 | Overpayment from previous year applied to current year | 6 | |
| 7 | Amount paid with current year extension | 7 | |
| 8 | Total tax payments | 8 | |

Income Taxes Withheld for the Current Year

| | | | |
|------|--|------|--------|
| 9 | State withholding on Forms W-2 | 9 | 2,125. |
| 10 | State withholding on Forms W-2G | 10 | |
| 11 | State withholding on Forms 1099-R | 11 | |
| 12 a | State withholding on Forms 1099-MISC | 12 a | |
| b | State withholding on Forms 1099-G | b | |
| c | State withholding on Forms 1099-K | c | |
| d | State withholding on Forms 1099-INT, 1099-DIV and 1099-OID | d | |
| 13 | Other state tax withholding | 13 | |
| 14 | Total income tax withheld | 14 | 2,125. |
| 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 your annual use tax liability is 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 **1a** _____ 0.
- 1b** Multiply Line 1a by 6.25% (.0625). Round the result to whole dollars **1b** _____ 0.
- 2a** Enter the total cost of qualifying food, non-prescription drugs and medical appliances you purchased to use in Illinois on which you did not pay the required amount of Illinois Use Tax **2a** _____
- 2b** Multiply Line 2a by 1% (.01). Round the result to whole dollars **2b** _____ 0.
- 3** Add Lines 1b and 2b. **This is your Use Tax on purchases.** **3** _____ 0.
- 4** Enter the amount of sales tax you paid in another state (not in another country) on the items included on Lines 1a and 2a **4** _____
- 5** Subtract Line 4 from Line 3. **Enter the result here and on Form IL-1040, Line 23** (if the result is less than zero, enter zero) **5** _____

Method 2: UT Table

If there are no major purchases and do not have receipts to figure purchases, use the table to estimate annual Illinois Use Tax liability.

| <u>AGI (from IL-1040, Line 1)</u> | <u>Use Tax</u> |
|-----------------------------------|--------------------------------|
| \$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

Use tax amount based on table above _____

Keep a copy of this smart worksheet with your records.