



Illinois Department of Revenue  
**2017 Form IL-1040**

Individual Income Tax Return

or for fiscal year ending \_\_\_/\_\_\_/\_\_\_

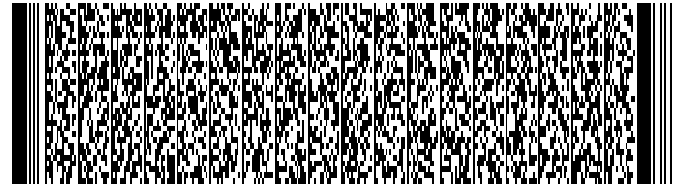
Over 80% of taxpayers file electronically. It is easy and you will get your refund faster. Visit [tax.illinois.gov](http://tax.illinois.gov).

**Step 1: Personal Information**

862-33-4202

GOUTHAM

PATANGE



1234 VALLEY LAKE DR

242

Schaumburg

IL

60195

**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  
 ↓

<b>Step 2:</b>	<b>1</b>	Federal adjusted gross income from your federal Form 1040, Line 37; 1040A, Line 21; or 1040EZ, Line 4	(Whole dollars only)	<b>1</b>	27,000.00
<b>Income</b>	<b>2</b>	Federally tax-exempt interest and dividend income from your federal Form 1040 or 1040A, Line 8b; or federal Form 1040EZ		<b>2</b>	.00
	<b>3</b>	Other additions. <b>Attach</b> Schedule M.		<b>3</b>	.00
	<b>4</b>	<b>Total income.</b> Add Lines 1 through 3.		<b>4</b>	27,000.00
<b>Step 3:</b>	<b>5</b>	Social Security benefits and certain retirement plan income received if included in Line 1. <b>Attach</b> Page 1 of federal return.		<b>5</b>	.00
<b>Base</b>	<b>6</b>	Illinois Income Tax overpayment included in federal Form 1040, Line 10		<b>6</b>	.00
<b>Income</b>	<b>7</b>	Other subtractions. <b>Attach</b> Schedule M. Check if Line 7 includes any amount from Schedule 1299-C. <input type="checkbox"/>		<b>7</b>	.00
	<b>8</b>	Add Lines 5, 6, and 7. This is the total of your subtractions.		<b>8</b>	.00
	<b>9</b>	<b>Illinois base income.</b> Subtract Line 8 from Line 4.		<b>9</b>	27,000.00
<b>Step 4:</b>	<b>See instructions before completing Step 4.</b>				
<b>Exemptions</b>	<b>10 a</b>	Number of exemptions from your federal return	<u>1</u> X \$2,175	<b>a</b>	2,175.00
	<b>b</b>	If someone can claim you as a dependent, see instructions.	<u>   </u> X \$2,175	<b>b</b>	.00
	<b>c</b>	Check if 65 or older: <input type="checkbox"/> You + <input type="checkbox"/> Spouse =	<u>   </u> X \$1,000	<b>c</b>	.00
	<b>d</b>	Check if legally blind: <input type="checkbox"/> You + <input type="checkbox"/> Spouse =	<u>   </u> X \$1,000	<b>d</b>	.00
		<b>Exemption allowance.</b> Add Lines a through d.		<b>10</b>	2,175.00
<b>Step 5:</b>	<b>11</b>	<b>Residents: Net income.</b> Subtract Line 10 from Line 9. <i>Skip</i> Line 12.		<b>11</b>	24,825.00
<b>Net</b>	<b>12</b>	<b>Nonresidents and part-year residents:</b> Check the box that applies to you during 2017 <input type="checkbox"/> Nonresident <input type="checkbox"/> Part-year resident, and enter the <b>Illinois base income</b> from Schedule NR. <b>Attach</b> Schedule NR.		<b>12</b>	.00
<b>Income</b>	<b>13</b>	<b>Residents:</b> Multiply Line 11 by 4.3549% (.043549). Cannot be less than zero. <b>Nonresidents and part-year residents:</b> Enter the tax from Schedule NR. Check if you completed Schedule SA to calculate your income tax. <b>Attach</b> Schedule SA. <input type="checkbox"/>		<b>13</b>	1,081.00
<b>Tax</b>	<b>14</b>	Recapture of investment tax credits. <b>Attach</b> Schedule 4255.		<b>14</b>	.00
	<b>15</b>	<b>Income tax.</b> Add Lines 13 and 14. Cannot be less than zero.		<b>15</b>	1,081.00
<b>Step 7:</b>	<b>16</b>	Income tax paid to another state while an Illinois resident. <b>Attach</b> Schedule CR.		<b>16</b>	.00
<b>Tax After</b>	<b>17</b>	Property tax and K-12 education expense credit amount from Schedule ICR. <b>Attach</b> Schedule ICR.		<b>17</b>	.00
<b>Non-</b>	<b>18</b>	Credit amount from Schedule 1299-C. <b>Attach</b> Schedule 1299-C.		<b>18</b>	.00
<b>refundable</b>	<b>19</b>	Add Lines 16, 17, and 18. This is the total of your credits. Cannot exceed the tax amount on Line 15.		<b>19</b>	0.00
<b>Credits</b>	<b>20</b>	<b>Tax after nonrefundable credits.</b> Subtract Line 19 from Line 15.		<b>20</b>	1,081.00



	21	Tax after nonrefundable credits from Page 1, Line 20	21	1,081.00
<b>Step 8:</b>	22	Household employment tax. See instructions.	22	.00
<b>Other Taxes</b>	23	Use tax on internet, mail order, or other out-of-state purchases from UT Worksheet or UT Table in the instructions. <b>Do not</b> leave blank.	23	0.00
	24	Compassionate Use of Medical Cannabis Pilot Program Act Surcharge	24	.00
	25	<b>Total Tax.</b> Add Lines 21, 22, 23, and 24.	25	1,081.00
<b>Step 9:</b>	26	Illinois Income Tax withheld. <b>Attach</b> all W-2 and 1099 forms.	26	1,313.00
<b>Payments and Refundable Credit</b>	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. <b>Attach</b> Schedule K-1-P or K-1-T.	28	.00
	29	Earned Income Credit from Schedule IL-EIC. <b>Attach</b> Schedule IL-EIC.	29	.00
	30	<b>Total payments and refundable credit.</b> Add Lines 26 through 29.	30	1,313.00
<b>Step 10:</b>	31	If Line 30 is greater than Line 25, subtract Line 25 from Line 30.	31	232.00
<b>Total</b>	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. <b>Attach</b> 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. <b>Attach</b> Schedule G.	34	.00
35	<b>Total penalty and donations.</b> 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 <b>overpayment</b> .	36	232.00
37	Amount from Line 36 you want <b>refunded to you</b> . Check <b>one</b> box on Line 38. See instructions.	37	232.00
38	I choose to receive my refund by		
	a <input checked="" type="checkbox"/> <b>direct deposit</b> - Complete the information below if you check this box.		
	Routing number	1 1 1 0 0 0 0 2 5	<input checked="" type="checkbox"/> Checking or <input type="checkbox"/> Savings
	Account number	4 8 8 0 5 0 6 1 4 1 4 9	
	b <input type="checkbox"/> <b>Illinois Individual Income Tax refund debit card</b>		
	c <input type="checkbox"/> <b>paper check</b>		
39	Amount to be <b>credited forward</b> . 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 <b>amount you owe</b> . See instructions.	40	.00
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**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.

<b>Sign Here</b>	Your signature	Date (mm/dd/yyyy)	Spouse's signature	Date (mm/dd/yyyy)	Daytime phone number
	APPANA RUPA VENKATA SA	06/11/2018			
<b>Paid Preparer Use Only</b>	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	
<b>Third Party Designee</b>	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.		



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

Form fields for Step 1: GOUTHAM PATANGE, Social Security number 862-33-4202, Mailing address 1234 VALLEY LAKE DR 242 Schaumburg IL 60195

Step 2: Complete information from tax return

Form fields for Step 2: 1 Net income from Form IL-1040, Line 11, or Schedule NR, Step 5, Line 51 24,825.00; 2 Tax from Form IL-1040, Line 13 1,081.00; 3 Illinois Income Tax withheld from Form IL-1040, Line 26 only 1,313.00; 4 Overpayment from Form IL-1040, Line 36 232.00; 5 Total amount due from Form IL-1040, Line 40 1.00

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.

Form fields for Step 3: 7 Routing no. (RN): 111000025; 8 Account no. (AN): 488050614149; 9 Type of account: X Checking; 10 Date the payment is to be electronically withdrawn: / / ; 11 Electronic funds withdrawal amount: 1.00; 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 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.

Form fields for Step 5: ERO's signature GLOBAL TAXES LLC, Date 06/11/2018, Mailing address 2530 Pebble Creek Ln Cumming GA 30041, Check if paid preparer: X, Your PTIN P02090332, Federal employer identification number (FEIN) 30-1017196, (678)965-9729

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 . . . . . GOUTHAM
Middle Initial . . . . .
Last Name . . . . . PATANGE
Suffix . . . . .
Social Security No. . 862-33-4202
Date of Birth . . . . . 06/07/1992
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 . . . . . 1234 VALLEY LAKE DR Apartment Number . 242
City . . . . . Schaumburg State . IL ZIP Code . . 60195

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

[X] 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. Contains 3 empty rows.

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
[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) . . . . . BANK OF AMERICA
Name on account . . . . .
Check the appropriate box:
Checking . . . . . [X] Routing number . . . . . 111000025
Savings . . . . . [ ] Account number . . . . . 488050614149
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
[ ] [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 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
[ ] [X] 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 GOUTHAM PATANGE	Social Security Number 862-33-4202
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## Tax Payments for the Current Year

		State	
		Date	Payment
1	First Payment . . . . .		
2	Second Payment . . . . .		
3	Third Payment . . . . .		
4	Fourth Payment . . . . .		
<b>Additional Payments</b>			
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	<b>Total tax payments</b> . . . . .	8	

## Income Taxes Withheld for the Current Year

9	State withholding on Forms W-2 . . . . .	9	1,313.
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	<b>Total income tax withheld</b> . . . . .	14	1,313.
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.**