

Illinois Department of Revenue 2009 Form IL-1040

Individual Income Tax Return

or for fiscal year ending ____/____

_	 	 ahaya	41-:-	Ii.a.

	Step 1: Pers	sor	nal Information ————————————————————————————————————		Do not write above this line.		
		A	Social Security numbers in the order they appear on your federal return				
			Your Social Security number	Spouse's Social Security number			
		В	Personal information				
			Your first name and initial	Your last name			
			Spouse's first name and initial Spouse's last name - only if different				
			Mailing address (See instructions if foreign address)	Apartment number			
			City	State	ZIP or Postal Code		
			Foreign Nation, if not United States (do not abbreviate)				
T		С	Filing status (see instructions) Single or head of household Married filing jointly	☐ Married filing separate	y D Widowed		
	Step 2: Inco	ome					
Staple W-2 and 1099 forms here	отор	1	Federal adjusted gross income from your U.S. 1040, Line 3' U.S. 1040EZ, Line 4	7; U.S. 1040A, Line 21; or	(Whole dollars only) 1 .00		
		2	Federally tax-exempt interest and dividend income from you	ur U.S. 1040 or 1040A, Line 8b	;		
fori		3	or U.S. 1040EZ Other additions to your income. Attach Schedule M.		2		
66		4	Total income. Add Lines 1 through 3.		4 .00		
10	Step 3: Bas	-					
-2 and	Step 3. Das	5	Income received from Social Security benefits and certain r	etirement			
		Ü	plans if included in Line 1. Attach federal Page 1.	5	.00		
e W		6	Illinois Income Tax overpayment included in U.S. 1040, Line		.00		
apl		7	Other subtractions to your income. Attach Schedule M.	7	.00		
St		0	Check if Line 7 includes any amount from Schedule 129	9-C 📙	0 00		
•		8	Add Lines 5, 6, and 7. This is the total of your subtractions. Illinois base income . Subtract Line 8 from Line 4.		8 <u>.00</u> 9 00		
T	Step 4: Exe	-			9		
-	•			X \$2,000 a	.00		
	See instructions before figuring		b If someone else claimed or could have claimed you or your spouse as a dependent on their return, see	X \$2,000 b	.00		
	exemptions.			X \$1,000 c	.00		
				X \$1,000 d	.00		
			Exemption allowance. Add Lines a through d.		10		
	Step 5: Net						
A			Residents Only: Net income. Subtract Line 10 from Line 9	. Skip Line 12.	11		
eck	-	12	Nonresidents and part-year residents Only:	🗆			
Staple your check			Check the box that applies to you during 2009 Nonresiwrite the Illinois base income from Schedule NR. Attach Sch				
no	Step 6: Tax		white the limitors base income from ochedule Nrt. Attach och	ledule IVI I. IZ	.00		
le y	-		Residents: Multiply Line 11 by 3% (.03). Write the result he	ere.			
tap			Nonresidents and part-year residents: Write the tax befo				
S			credits from Schedule NR.		13		
			Recapture of investment tax credits. Attach Schedule 4255		14		
	-	15	Total tax. Add Lines 13 and 14. This amount may not be les	s than zero.	15		

		Total tax amount from Page 1, Line 15		16	.00
Step 7: No		fundable Credits —————————————————————			
	17	Income tax paid to another state while an Illinois resident.			
		Attach Schedule CR.	17	.00	
Complete	- 18	Property tax and K-12 education expense credit amount from	40		
Schedule ICR	40	Schedule ICR. Attach Schedule ICR.		.00	
	19	Credit amount from Schedule 1299-C. Attach Schedule 1299-C.	19	.00	
	20	Add Lines 17, 18, and 19. This is the total of your credits. This amount may not exceed the tax amount on Line 16.		20	.00
	21	Tax after nonrefundable credits. Subtract Line 20 from Line 16.		21	.00
Step 8: Pa	vme	ents and Refundable Credit ————————————————————————————————————			
	22	Illinois Income Tax withheld. Attach W-2 and 1099 forms.	.00		
	23	Estimated payments from Forms IL-505-I and IL-1040-ES,			
		including overpayment applied from 2008 return	.00		
	24		23 24	.00	
See Instructions	- 25	Earned Income Credit from Schedule ICR. Attach Schedule ICR.		.00	
Complete Schedule ICR	26	Total payments and refundable credit. Add Lines 22 through 25.		26	.00
Sten 9: Ov		ayment or Underpayment			
Otop o. O	27			27	.00
	28			28	
Sten 10· I		erpayment of Estimated Tax Penalty and Donations——			.00
Step 10. C		Late payment penalty for underpayment of estimated tax.	29	.00	
	_0	a Check if at least two-thirds of your federal gross income is from farm		<u>.00</u>	
			iiig.		
		b Check if you or your spouse are 65 or older and permanently living in a nursing home.			
		c Check if your income was not received evenly during the year and			
		you annualized your income on Form IL-2210, otherwise we			
		will figure this penalty for you. Attach Form IL-2210.			
JE "GILA	E "GIVING.	You can make voluntary charitable donations to many worthy causes			
MARCO		using this form. It's easy - just complete Schedule G and enter			
EASY!		the donation amount here. Attach Schedule G.	30	.00	
	31	Total penalty and donations . Add Lines 29 and 30.		31	.00
Step 11: F		nd or Amount You Owe			
	32	,		00	0.0
	00	Line 31, subtract Line 31 from Line 27. This is your remaining overpa	/ment.	32	
	33	Amount from Line 32 you want refunded to you		33	.00
	34	Complete to direct deposit your refund			
Direct Dep	<u>osit</u>	Routing number Checki	ng or Savings		
		Account number			
	35	Subtract Line 33 from Line 32. This amount will be applied to your 20	010 estimated tax	35	.00
See instructions	-36	If you have an underpayment on Line 28, add Lines 28 and 31. Or			
for payment		If you have an overpayment on Line 27 and this amount is less than L			
options.		subtract Line 27 from Line 31. This is the amount you owe .		36	.00
Step 12: 5	ian	and Date—			
0.00	_	nder 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	You	ur signature Date Daytime phone number	Your spouse's signature		Date
11010	_				
	Pa	id preparer's signature Date Preparer's phone number	Preparer's FEIN, SSN, c	or PTIN	
	F		closed, mail to: ARTMENT OF REVENUI	.	
			IL 62726-0001		

IL-1040 back (R-12/09)

DR_____

AP_____ EV RR DC