

Illinois Department of Revenue 2011 Form IL-1040 Individual Income Tax Return

or for fiscal year ending ____/____

Step 1: Pe		nal Information	Do not write above this li			
		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)				
	С	Filing status (see instructions)				
	Ü	Single or head of household Married filing jointl	y Married filing separately Widowed			
	D	Check if same-sex civil union return (see instructions)				
Step 2:	1	Federal adjusted gross income from your U.S. 1040, Line 3 U.S. 1040EZ, Line 4	37; U.S. 1040A, Line 21; or (Whole dollars only) 1 .00			
Income	2	Federally tax-exempt interest and dividend income from your U.S. 1040EZ				
	3	Other additions. Attach Schedule M.	3			
	4	Total income. Add Lines 1 through 3.	4			
Step 3:	5	,				
Base	6	received if included in Line 1. Attach Page 1 of federal return. 5				
Income	7	Other subtractions. Attach Schedule M.	7 .00			
	•	Check if Line 7 includes any amount from Schedule 129				
	8	Add Lines 5, 6, and 7. This is the total of your subtractions				
	9	Illinois base income. Subtract Line 8 from Line 4.	9			
Step 4:	10	a Number of exemptions from your federal return				
Exemptions		b If someone can claim you as a dependent, see instructions				
		c Check if 65 or older: ☐ You + ☐ Spouse = d Check if legally blind: ☐ You + ☐ Spouse =				
		Exemption allowance. Add Lines a through d.	10			
Step 5:	11	Residents: Net income. Subtract Line 10 from Line 9. Sk				
Net	12	Nonresidents and part-year residents:				
Income		Check the box that applies to you during 2011 Nonres				
		write the Illinois base income from Schedule NR. Attach Schedule NR.	chedule NR. 12			
Step 6:	13	, , , ,	on Only adult ND			
Tax	14	Nonresidents and part-year residents: Write the tax from Recapture of investment tax credits. Attach Schedule 425				
	15	Income tax. Add Lines 13 and 14. Cannot be less than ze				
Step 7:	16	Income tax paid to another state while an Illinois resident.				
Tax After	47	Attach Schedule CR.	16			
Non-	17	Property tax and K-12 education expense credit amount fr Schedule ICR. Attach Schedule ICR.	om 17 00			
refundable Credits	18					
Oreuita	19					
		exceed the tax amount on Line 15.	19 00			
	20	Tax after nonrefundable credits. Subtract Line 19 from L	ine 15. 20			



	21	Tax after nonrefundable credits from Page 1, Line 20	21 _		.00					
Step 8:	22	Household employment tax. See instructions.	22 _		.00					
Other	23	Use tax on internet, mail order, or other out-of-state purchases from								
Taxes		UT Worksheet or UT Table in the instructions. Do not leave blank.	23 _		.00					
	24	Total Tax. Add Lines 21, 22, and 23.			24	.00				
Step 9:	25	Illinois Income Tax withheld. Attach W-2 and 1099 forms.	25 _		.00					
Payments	26	Estimated payments from Forms IL-1040-ES and IL-505-I,								
and Refundable Credit		including overpayment applied from 2010 return			.00					
	27	Pass-through entity tax payments. Attach Schedule K-1-P or K-1-T.			.00					
	28	Earned Income Credit from Schedule ICR. Attach Schedule ICR.	28 _		.00					
	29	Total payments and refundable credit. Add Lines 25 through 28.			29	.00				
Step 10:	30	30 Overpayment. If Line 29 is greater than Line 24, subtract Line 24 from Line 29.				.00				
Result	31 Underpayment. If Line 24 is greater than Line 29, subtract Line 29 from Line 24.				31	.00				
Step 11:	32	Late-payment penalty for underpayment of estimated tax.	32 _		.00					
Underpayment	t	a Check if at least two-thirds of your federal gross income is from farm	ming.							
of Estimated T		b Check if you or your spouse are 65 or older and permanently								
Penalty and		living in a nursing home.								
Donations		c Check if your income was not received evenly during the year and	_							
		you annualized your income on Form IL-2210. Attach Form IL-221								
		Voluntary charitable donations. Attach Schedule G.	33 _		.00					
	34	Total penalty and donations. Add Lines 32 and 33.			34	.00				
Step 12:	35	If you have an overpayment on Line 30 and this amount is greater that								
Refund or Amount You Owe		Line 34, subtract Line 34 from Line 30. This is your remaining overpayment .			35	.00				
	36	Amount from Line 35 you want refunded to you			36	.00				
	37	Complete to direct deposit your refund								
		Routing number Checking or Savings								
		Account number	ŤП							
	00				20	.00				
	38	Subtract Line 36 from Line 35. This amount will be applied to your 2	2012 es	stimated tax.	ed tax. 38					
	39	If you have an underpayment on Line 31, add Lines 31 and 34. Or If you have an overpayment on Line 30 and this amount is less than								
		subtract Line 30 from Line 34. This is the amount you owe .				.00				
Ot 10-	116		the b	eet of my knowl	ledge it is true	a correct and				
Step 13:		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 and Date	_									
Suite	Yo	Your signature Date Daytime phone number		spouse's signature		Date				
	_									
	Pa	id preparer's signature Date Preparer's phone number	or PTIN							
Third Party Designee		☐ Check, and complete below, if you want to allow another person to discuss this return with the Illinois Department of Revenue.								
		Designee's Name (please print) Phone number								
	Na	Name (please print) — Phone number —								
Form 1099-G Information		Next year (in January 2013), we will no longer automatically mail 1099-G forms. Instead, we ask that you get this information from our website. Check the box if you still want us to mail you a paper Form 1099-G next year.								
		If no payment enclosed mail to:	121/ma	nt anclosed a	nail to:					
	K	If no payment enclosed, mail to:	payme	nt enclosed, n	iali lo:					

IL-1040 back (R-12/11)

ILLINOIS DEPARTMENT OF REVENUE **SPRINGFIELD IL 62719-0001**



ILLINOIS DEPARTMENT OF REVENUE **SPRINGFIELD IL 62726-0001**

RR DC DR_____ AP____

