



# **Illinois Department of Revenue**

## **IL-1371, 2-D Barcode**

### **Test Package**

**Tax Year 2025**

# Test Case 1

**Contents: Form IL-1040  
Schedule IL-WIT**

## **Taxpayer Identification Information:**

Primary Name and SSN:	<b>Lawrence TTTTBTB 400-01-3501</b>
Primary Date of Birth:	<b>08/01/1967</b>
Spouse Name and SSN:	<b>None</b>
Foreign Address:	<b>101 West Jefferson Springfield, IL 62702</b>
Email Address:	<b>Lawrence.TTTTBTB@testing.com</b>
Filing Status:	<b>Single</b>
Line C "You" Box (Claimed as Dependent):	<b>X</b>

## **IL-1040 Information:**

Line 1 (AGI):	<b>\$870</b>
Line 10a (You/Spouse Exemption Amount):	<b>\$2,850</b>
Line 14 (Total Income Tax):	<b>\$0</b>
Line 25 (IL Tax Withheld):	<b>\$30</b>
Line 38 (Refund):	<b>\$30</b>
Line 39a (Illinois Individual Income Tax Refund Direct Deposit):	<b>X</b>
Routing Transit Number - RTN:	<b>271188081</b>
Deposit Refund to Savings Account:	<b>X</b>
Depositor's Account Number - DAN:	<b>2222TEST333344445</b>
Third Party Designee Box:	<b>X</b>
Third Party Designee Name:	<b>Debbie Monkman</b>
Third Party Designee Telephone:	<b>(217) 524-4767</b>

## **Schedule IL-WIT Information:**

### **Primary 1**

Primary Form Type:	<b>W</b>
Primary Employer/Payer Identification Number:	<b>37-1029403</b>
Primary Federal Wages, Winnings, etc.:	<b>\$870</b>
Primary Illinois Wages, Winnings, etc.:	<b>\$870</b>
Primary Illinois Income Tax Withheld:	<b>\$30</b>

## Test Case 2

**Contents:**     **Form IL-1040**  
                  **Schedule M**  
                  **Schedule CR**  
                  **Schedule IL-E/EITC**

### **Taxpayer Identification Information:**

Primary Name and SSN:	<b>Juanita TTTTTC 400-01-3502</b>
Primary Date of Birth:	<b>03/03/1987</b>
Spouse Name and SSN:	<b>None</b>
Address:	<b>2713 Holiday Place Taylorville, IL 62568-1843 Christian County</b>
Email Address:	<b>Juanita.TTTTTC@testing.gov</b>
Filing Status:	<b>Head of household</b>

### **IL-1040 Information:**

Line 1 (AGI):	<b>\$32,484</b>
Line 6 (IL Tax Refund):	<b>\$32</b>
Line 7 (Other Subtractions):	<b>\$21,769</b>
Line 10a (You/Spouse Exemption Amount):	<b>\$2,850</b>
Line 10d (Dependents Exemption Amount):	<b>\$5,700</b>
Line 14 (Total Income Tax):	<b>\$106</b>
Line 15 (Credit Schedule-CR):	<b>\$65</b>
Line 20 (Household Employment Tax):	<b>\$29</b>
Line 21 (Use Tax):	<b>\$25</b>
Line 29 (IL Earned Income Tax Credit):	<b>\$1,221</b>
Line 30 (Child Tax Credit)	<b>\$488</b>
Line 38 (Refund):	<b>\$1,614</b>
Line 39b (Illinois Individual Income Tax Refund Paper Check):	<b>X</b>

### **IL Schedule M Information:**

Line 21 (Military Pay):	<b>\$21,769</b>
Line 42 (Total Other Subtractions):	<b>\$21,769</b>

### **IL Schedule CR Information:**

Line 1a (Wages):	<b>\$28,337</b>
Line 1b (Non-IL Wages):	<b>\$6,568</b>
Line 4a (Taxable Refunds):	<b>\$32</b>
Line 7 (Capital Gain):	<b>\$4,115</b>
Line 38a (IL Income Tax Overpayment):	<b>\$32</b>
Line 39a (Other Subtractions):	<b>\$21,769</b>
Line 43 (Schedule CR Decimal):	<b>0.615</b>
Line 51 (Total Tax Paid to Other State):	<b>\$192</b>
Line 52 (IL Tax Due):	<b>\$106</b>
Line 54 (IL Tax Eligible for Credit):	<b>\$65</b>

### **IL Schedule IL-E/EITC Information:**

**Illinois Dependent Exemption Allowance**

**Dependent 1**

Dependent's First Name:	<b>Zoey</b>
Dependent's Last Name:	<b>TTTTTC</b>
Social Security Number:	<b>400-01-3522</b>
Dependent's Relationship to You:	<b>Daughter</b>
Dependent's Date of Birth:	<b>06/17/2017</b>
Number of Months Living with You:	<b>12</b>
Eligible for Earned Income Credit Box:	<b>X</b>

**Dependent 2**

Dependent's First Name:	<b>Penelope</b>
Dependent's Last Name:	<b>TTTTTC</b>
Social Security Number:	<b>400-01-3523</b>
Dependent's Relationship to You:	<b>Daughter</b>
Dependent's Date of Birth:	<b>10/04/2019</b>
Number of Months Living with You:	<b>12</b>
Eligible for Earned Income Credit Box:	<b>X</b>

**Illinois Earned Income Tax Credit**

Step 3, Line 1 (Wages):	<b>\$28,337</b>
Step 3, Line 4 (Statutory Employee Box):	<b>No</b>
Step 4, Line 6 (Federal EITC Amount):	<b>\$6,104</b>
Step 4, Line 9 (IL Earned Income Tax Credit):	<b>\$1,221</b>
Step 5, Line 10 (Dependent under the age of 12)	<b>X</b>
Step 5, Line 12 (Child Tax Credit)	<b>\$488</b>

## Test Case 3

**Contents:     Form IL-1040  
                  Schedule M  
                  Schedule ICR  
                  Schedule G  
                  Schedule IL-WIT**

### **Taxpayer Identification Information:**

Primary Name and SSN:	<b>Sam TTTTDD 400-01-3503</b>
Primary Date of Birth:	<b>03/03/1947</b>
Spouse Name and SSN:	<b>None</b>
Address:	<b>3305 Gissing Lane Clay City, IL 62824 Clay County</b>
Email Address:	<b>Sam.TTTTDD@testing.gov</b>
Filing Status:	<b>Single</b>

### **IL-1040 Information:**

Line 1 (AGI):	<b>\$11,750</b>
Line 5 (Federally Taxable Retirement and Social Security):	<b>\$498</b>
Line 7 (Other Subtractions):	<b>\$1,550</b>
Line 10a (You/Spouse Exemption Amount):	<b>\$2,850</b>
Line 10b (65 or Older "You" Box):	<b>X</b>
Line 10b (65 or Older Exemption Amount):	<b>\$1,000</b>
Line 10c (Blind "You" Box):	<b>X</b>
Line 10c (Blind Exemption Amount):	<b>\$1,000</b>
Line 14 (Total Income Tax):	<b>\$240</b>
Line 16 (Credit Schedule ICR-Nonrefundable):	<b>\$18</b>
Line 20 (Household Employment Tax):	<b>\$30</b>
Line 25 (IL Tax Withheld):	<b>\$302</b>
Line 35 (Total Donations):	<b>\$98</b>
Line 41 (Amount You Owe):	<b>\$48</b>

### **IL Schedule M Information:**

Line 22 (U.S. Obligations):	<b>\$1,550</b>
Line 42 (Total Other Subtractions):	<b>\$1,550</b>

### **IL Schedule ICR Information:**

Line 1 (IL-1040 Tax Amount):	<b>\$240</b>
Line 4a (Property Tax):	<b>\$350</b>
Line 4b (County 1):	<b>Clay</b>
Line 4b (Property Tax Index Number 1):	<b>132378901270-125</b>
Line 4c (County 2):	<b>Clay</b>
Line 4c (Property Tax Index Number 2):	<b>00-12-8432</b>
Line 4d (County 3):	<b>Clay</b>
Line 4d (Property Tax Index Number 3):	<b>67-428710</b>
Line 4f (Eligible Property Tax Amount):	<b>\$350</b>
Line 5 (IL Property Tax Credit):	<b>\$18</b>
Line 13 (Total Nonrefundable Credit):	<b>\$18</b>

**IL Schedule G Information:**

Line 1b (Donation b):	\$20
Line 1d (Donation d):	\$30
Line 1f (Donation f):	\$48

**Schedule IL-WIT Information:****Primary 1**

Primary Form Type:	W
Primary Employer/Payer Identification Number:	37-0246288
Primary Federal Wages, Winnings, etc.:	\$8,170
Primary Illinois Wages, Winnings, etc.:	\$8,170
Primary Illinois Income Tax Withheld:	\$234

**Primary 2**

Primary Form Type:	WG
Primary Employer/Payer Identification Number:	37-0012567
Primary Federal Wages, Winnings, etc.:	\$332
Primary Illinois Wages, Winnings, etc.:	\$332
Primary Illinois Income Tax Withheld:	\$23

**Primary 3**

Primary Form Type:	R
Primary Employer/Payer Identification Number:	36-0012379
Primary Federal Wages, Winnings, etc.:	\$48
Primary Illinois Wages, Winnings, etc.:	\$48
Primary Illinois Income Tax Withheld:	\$9

**Primary 4**

Primary Form Type:	R
Primary Employer/Payer Identification Number:	36-0012377
Primary Federal Wages, Winnings, etc.:	\$450
Primary Illinois Wages, Winnings, etc.:	\$450
Primary Illinois Income Tax Withheld:	\$1

**Primary 5**

Primary Form Type:	G
Primary Employer/Payer Identification Number:	36-3042127
Primary Federal Wages, Winnings, etc.:	\$1,200
Primary Illinois Wages, Winnings, etc.:	\$1,200
Primary Illinois Income Tax Withheld:	\$35

## Test Case 4

**Contents:**     **Form IL-1040**  
                  **Schedule ICR**  
                  **Schedule G**  
                  **Schedule 1299-C**  
                  **Schedule IL-WIT**

### Taxpayer Identification Information:

Primary Name and SSN:	<b>John TTTTTH 400-01-3504</b>
Primary Date of Birth:	<b>06/02/1967</b>
Spouse Name and SSN:	<b>Betty TTT-TTH 400-01-3514</b>
Spouse Date of Birth:	<b>09/20/1969</b>
Address:	<b>2104 Waterway Drive Oak Park, IL 60303 Cook County John.TTTTTH@testing.gov</b>
Email Address:	<b>Married filing jointly</b>
Filing Status:	

### IL-1040 Information:

Line 1 (AGI):	<b>\$96,540</b>
Line 6 (IL Tax Refund):	<b>\$946</b>
Line 10a (You/Spouse Exemption Amount):	<b>\$5,700</b>
Line 14 (Total Income Tax):	<b>\$4,450</b>
Line 16 (Credit Schedule ICR):	<b>\$61</b>
Line 17 (Schedule 1299-C Credit):	<b>\$710</b>
Line 25 (IL Tax Withheld):	<b>\$266</b>
Line 26 (Estimated Payments):	<b>\$3,049</b>
Line 33 (Total Donations):	<b>\$57</b>
Line 41 (Amount You Owe):	<b>\$421</b>

### IL Schedule ICR Information:

Line 1 (IL1040 Tax Amount):	<b>\$4,450</b>
Line 4a (Property Tax):	<b>\$1,214</b>
Line 4b (County 1):	<b>Cook dlb122757</b>
Line 4b (Property Tax Index Number 1):	<b>\$1,214</b>
Line 4f (Eligible Property Tax Amount):	
Line 5 (IL Property Tax Credit):	<b>\$61</b>
Line 13 (Total Nonrefundable Credit):	<b>\$61</b>

### Schedule G Information:

Line 1a (Donation a):	<b>\$3</b>
Line 1b (Donation b):	<b>\$4</b>
Line 1c (Donation c):	<b>\$5</b>
Line 1d (Donation d):	<b>\$7</b>
Line 1e (Donation e):	<b>\$11</b>
Line 1f (Donation f):	<b>\$27</b>

### Schedule 1299-C Information:

Step 2, Line 11a (Primary SSN):	<b>400-01-3504</b>
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Step 2, Line 11b (Primary School Name):	<b>Irving Elem. School</b>
Step 2, Line 11c (Primary Qualified Expenses):	<b>\$500</b>
Step 3, Line 17 (IL1040 Tax Amount):	<b>\$4,450</b>
Step 3, Line 18 (IL1040 Sch CR and ICR Amounts):	<b>\$61</b>
Step 3, Line 21a (Yrs. Left to Carry):	<b>2</b>
Step 3, Line 21b (Credit Code):	<b>2200</b>
Step 3, Line 21c (IL Tax Year):	<b>2025/12</b>
Step 3, Line 21e (Credit Earned):	<b>\$60</b>
Step 3, Line 22a (Yrs. Left to Carry):	<b>5</b>
Step 3, Line 22b (Credit Code):	<b>5420</b>
Step 3, Line 22c (IL Tax Year):	<b>2025/12</b>
Step 3, Line 22e (Credit Earned):	<b>\$150</b>
Step 3, Line 23a (Yrs. Left to Carry):	<b>5</b>
Step 3, Line 23b (Credit Code):	<b>5740</b>
Step 3, Line 23c (IL Tax Year):	<b>2025/12</b>
Step 3, Line 23e (Credit Earned):	<b>\$500</b>
Step 3, Line 42 (Col I Total):	<b>\$710</b>
Step 3, Line 42 (Total Credit This Year):	<b>\$710</b>

**Schedule IL-WIT Information:**

**Primary 1**

Primary Form Type:	<b>W</b>
Primary Employer/Payer Identification Number:	<b>37-0246288</b>
Primary Federal Wages, Winnings, etc.:	<b>\$8,137</b>
Primary Illinois Wages, Winnings, etc.:	<b>\$8,137</b>
Primary Illinois Income Tax Withheld:	<b>\$234</b>

**Primary 2**

Primary Form Type:	<b>WG</b>
Primary Employer/Payer Identification Number:	<b>37-0012567</b>
Primary Federal Wages, Winnings, etc.:	<b>\$382</b>
Primary Illinois Wages, Winnings, etc.:	<b>\$382</b>
Primary Illinois Income Tax Withheld:	<b>\$23</b>

## Test Case 5

**Contents:**     **Form IL-1040**  
                  **Schedule M**  
                  **Schedule IL-E/EITC**  
                  **Schedule IL-WIT**

### Taxpayer Identification Information:

Primary Name and SSN:	<b>Stan T. TTT-TTE 400-01-3505</b>
Primary Date of Birth:	<b>06/02/1976</b>
Spouse Name and SSN:	<b>Ernie P. TTTTTE 400-01-3515</b>
Spouse Date of Birth:	<b>11/07/1975</b>
Address:	<b>1401 Otter Road</b> <b>Ottawa, IL 61350</b> <b>LaSalle County</b>
Email Address:	<b>Stan.TTTTTE@testing.gov</b>
Filing Status:	<b>Married filing jointly</b>

### IL-1040 Information:

Line 1 (AGI):	<b>\$72,050</b>
Line 2 (Federally Tax-Exempt Interest):	<b>\$225</b>
Line 5 (Federally Taxable Retirement and Social Security):	<b>\$16,042</b>
Line 7 (Other Subtractions):	<b>\$10,000</b>
Line 10a (You/Spouse Exemption Amount):	<b>\$5,700</b>
Line 10d (Dependents Exemption Amount):	<b>\$5,700</b>
Line 14 (Total Income Tax):	<b>\$1,724</b>
Line 21 (Use Tax):	<b>\$500</b>
Line 25 (IL Tax Withheld):	<b>\$1,622</b>
Line 41 (Amount You Owe):	<b>\$602</b>
Filer's Daytime Telephone Number:	<b>(217) 524-4767</b>

### Schedule M Information:

Line 13 Table Col A (College Savings and Tuition Acct #):	<b>A11111111111111111111111111111111</b>
Line 13 Table Col B (College Savings and Tuition Contr. Amt):	<b>\$10,000</b>
Line 13a (College Savings and Tuition 13a total):	<b>\$10,000</b>
Line 13 (College Savings and Tuition Amt):	<b>\$10,000</b>

### Schedule IL-E/EITC Information:

#### **Illinois Dependent Exemption Allowance** **Dependent 1**

Dependent's First Name:	<b>Anthony</b>
Dependent's Last Name:	<b>TTTTTE</b>
Social Security Number:	<b>400-01-3525</b>
Dependent's Relationship to You:	<b>Son</b>
Dependent's Date of Birth:	<b>12/01/2012</b>
Number of Months Living with You:	<b>12</b>
Eligible for Earned Income Tax Credit Box:	<b>X</b>

#### **Dependent 2**

Dependent's First Name:	<b>Stephanie</b>
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Dependent's Last Name:	TTTTTE
Social Security Number:	400-01-3535
Dependent's Relationship to You:	Daughter
Dependent's Date of Birth:	05/27/2013
Number of Months Living with You:	12
Eligible for Earned Income Tax Credit Box:	X

**Schedule II-WIT Information:**

**Primary 1**

Primary Form Type:	W
Primary Employer/Payer Identification Number:	37-5268431
Primary Federal Wages, Winnings, etc.:	\$44,733
Primary Illinois Wages, Winnings, etc.:	\$44,733
Primary Illinois Income Tax Withheld:	\$1,298

**Primary 2**

Primary Form Type:	R
Primary Employer/Payer Identification Number:	36-0012377
Primary Federal Wages, Winnings, etc.:	\$16,342
Primary Illinois Wages, Winnings, etc.:	\$16,342
Primary Illinois Income Tax Withheld:	\$1

**Spouse 1**

Spouse Form Type:	W
Spouse Employer/Payer Identification Number:	37-8634141
Spouse Federal Wages, Winnings, etc.:	\$10,750
Spouse Illinois Wages, Winnings, etc.:	\$10,750
Spouse Illinois Income Tax Withheld:	\$323

## Test Case 6

**Contents:**     **Form IL-1040**  
                  **Schedule M**  
                  **Schedule IL-E/EITC**

### Taxpayer Identification Information:

Primary Name and SSN:	<b>Ronald TTTTTF 400-01-3506</b>
Primary Date of Birth:	<b>06/02/1943</b>
Spouse Name and SSN:	<b>Judy TTTTTF 400-01-3516</b>
Spouse Date of Birth:	<b>06/02/1947</b>
Address:	<b>RR 6</b> <b>Enos, IL 62626</b> <b>Macoupin County</b>
Email Address:	<b>Ronald.TTTTTF@testing.gov</b>
Filing Status:	<b>Married filing jointly</b>

### IL-1040 Information:

Line 1 (AGI):	<b>(\$11,555)</b>
Line 3 (Other Additions):	<b>\$2,110</b>
Line 10a (You/Spouse Exemption Amount):	<b>\$5,700</b>
Line 10b (65 or Older "You" Box):	<b>X</b>
Line 10b (65 or Older "Spouse" Box):	<b>X</b>
Line 10b (65 or Older Exemption Amount):	<b>\$2,000</b>
Line 10d (Dependents Exemption Amount):	<b>\$2,850</b>
Line 14 (Total Income Tax):	<b>\$0</b>
Line 26 (Estimated Payments):	<b>\$1,000</b>
Line 34a (Farmer Box):	<b>X</b>
Line 40 (Carry Forward):	<b>\$1,000</b>

### Schedule M Information:

Line 1 (Child Tax Exempt Interest Income):	<b>\$1,900</b>
Line 4 (College Savings and Tuition):	<b>\$210</b>
Line 12 (Total Other Additions):	<b>\$2,110</b>

### Schedule IL-E/EITC Information:

#### **Illinois Dependent Exemption Allowance Dependent 1**

Dependent's First Name:	<b>Kerry</b>
Dependent's Last Name:	<b>TTTTTF</b>
Social Security Number:	<b>400-01-3566</b>
Dependent's Relationship to You:	<b>Daughter</b>
Dependent's Date of Birth:	<b>09/01/2012</b>
Number of Months Living with You:	<b>12</b>
Eligible for Earned Income Tax Credit Box:	<b>X</b>

## Test Case 7

**Contents:     Form IL-1040  
                  Schedule M  
                  Schedule ICR  
                  Schedule IL-WIT**

**Taxpayer Identification Information:**

Primary Name and SSN:	<b>Jerome TTTTTG 400-01-3507</b>
Primary Date of Birth:	<b>07/08/1978</b>
Spouse Name and SSN:	<b>Jennifer TTTTTG 400-01-3517</b>
Spouse Date of Birth:	<b>07/24/1974</b>
Address:	<b>1636 Spruce Kewanee, IL 61443 Henry County</b>
Email Address:	<b>Jerome.TTTTTG@testing.gov</b>
Filing Status:	<b>Married filing separately</b>

**IL-1040 Information:**

Line 1 (AGI):	<b>\$125,225</b>
Line 3 (Other Additions):	<b>\$1,600</b>
Line 5 (Federally Taxable Retirement and Social Security):	<b>\$35,000</b>
Line 7 (Other Subtractions):	<b>\$356</b>
Line 10a (You/Spouse Exemption Amount):	<b>\$2,850</b>
Line 14 (Total Income Tax):	<b>\$4,387</b>
Line 16 (Credit Schedule ICR):	<b>\$1,000</b>
Line 25 (IL Tax Withheld):	<b>\$1,050</b>
Line 41 (Amount You Owe):	<b>\$2,337</b>
Line 42 (Insurance checkbox):	<b>X</b>
Line 42 (Self checkbox):	<b>X</b>
Line 42 (Spouse checkbox):	<b>X</b>
Line 42 (Dependents checkbox):	<b>X</b>

**Schedule M Information:**

Line 4 (College Savings and Tuition):	<b>\$1,600</b>
Line 12 (Total Other Additions):	<b>\$1,600</b>
Line 22 (U.S. Obligations):	<b>\$356</b>
Line 42 (Total Other Subtractions):	<b>\$356</b>

**IL Schedule ICR Information:**

Line 10a (Primary Certificate Number):	<b>2024054625</b>
Line 10b (Spouse Certificate Number):	<b>2024054626</b>
Line 10c (Maximum Credit):	<b>\$1,000</b>
Line 11 (Lesser of Credit Amount and Tax amount):	<b>\$1,000</b>
Line 13 (Total Nonrefundable Credit):	<b>\$1,000</b>

**Schedule IL-WIT Information:**

**Primary 1**

Primary Form Type:	<b>R</b>
Primary Employer/Payer Identification Number:	<b>37-0055577</b>
Primary Federal Wages, Winnings, etc.:	<b>\$35,000</b>
Primary Illinois Wages, Winnings, etc.:	<b>\$35,000</b>
Primary Illinois Income Tax Withheld:	<b>\$1,050</b>

## Test Case 8

**Contents:     Form IL-1040  
                  Schedule NR, Nonresident  
                  Schedule IL-WIT**

### Taxpayer Identification Information:

Primary Name and SSN:	<b>John TTTTTH     400-01-3508</b>
Primary Date of Birth:	<b>10/15/1983</b>
Spouse Name and SSN:	<b>None</b>
Address:	<b>306 West Main Wentzville, MO 63385</b>
Email Address:	<b>John. TTTTTH@testing.gov</b>
Filing Status:	<b>Single</b>
Line D (Nonresident Box):	<b>X</b>

### IL-1040 Information:

Line 1 (AGI):	<b>\$21,500</b>
Line 10a (You/Spouse Exemption Amount):	<b>\$2,850</b>
Line 11 (NR IL Net Income):	<b>\$2,329</b>
Line 14 (Total Income Tax):	<b>\$113</b>
Line 25 (IL Tax Withheld):	<b>\$50</b>
Line 41 (Amount You Owe):	<b>\$63</b>
Filer's Daytime Telephone Number:	<b>217-524-4767</b>

### IL Schedule NR Information:

Residence:	<b>Nonresident</b>
Line 4 (Other State 1):	<b>MO</b>
Line 9 (Column A):	<b>\$18,870</b>
Line 19 (Column A):	<b>\$2,630</b>
Line 19 (Column B):	<b>\$2,630</b>
Line 46 (IL Portion of Base Income):	<b>\$2,630</b>
Line 48 (Line 46 Divided by IL Base Income Line 47):	<b>0.122</b>
Line 51 (IL Net Income):	<b>\$2,282</b>
Line 52 (Tax - Line 51 x 4.95% (.0495)):	<b>\$113</b>

### Schedule IL-WIT information:

#### **Primary 1**

Primary Form Type:	<b>WG</b>
Primary Employer/Payer Identification Number:	<b>37-0062543</b>
Primary Federal Wages, Winnings, etc.:	<b>\$2,630</b>
Primary Illinois Wages, Winnings, etc.:	<b>\$2,630</b>
Primary Illinois Income Tax Withheld:	<b>\$50</b>

## Test Case 9

**Contents: Form IL-1040**

**Schedule NR, Part-Year Resident  
Schedule ICR  
Schedule IL-E/EITC  
Schedule IL-WIT**

### **Taxpayer Identification Information:**

Primary Name and SSN:	<b>Barbara TTTTII 400-01-3509</b>
Primary Date of Birth:	<b>03/15/1965</b>
Spouse Name and SSN:	<b>Donald TTTTII 400-01-3519</b>
Spouse Date of Birth:	<b>10/01/1963</b>
Address:	<b>1015 W Springfield Champaign, IL 61820 Champaign County</b>
Email Address:	<b>Barbara.TTTTII@testing.gov</b>
Filing Status:	<b>Married filing jointly</b>

### **IL-1040 Information:**

Line D (Part-Year Resident Box):	<b>X</b>
Line 1 (AGI):	<b>\$370,297</b>
Line 2 (Federally Tax-Exempt Interest):	<b>\$1,672</b>
Line 10a (You/Spouse Exemption Amount):	<b>\$5,700</b>
Line 10d (Dependents Exemption Amount):	<b>\$5,700</b>
Line 11 (NR IL Net Income):	<b>\$61,982</b>
Line 14 (Total Income Tax):	<b>\$3,066</b>
Line 16 (Credit Schedule ICR):	<b>\$750</b>
Line 25 (IL Tax Withheld):	<b>\$3,555</b>
Line 38 (Refund):	<b>\$1,239</b>
Line 39b (Illinois Individual Income Tax Refund Paper Check):	<b>X</b>

### **IL Schedule NR Information:**

Residence:	<b>Part-Year</b>
Primary Taxpayer IL Residency from Date:	<b>06/01/2025</b>
Primary Taxpayer IL Residency to Date:	<b>12/31/2025</b>
Primary Taxpayer Other State:	<b>FL</b>
Primary Taxpayer Other State from Date:	<b>03/01/2025</b>
Primary Taxpayer Other State to Date:	<b>05/31/2025</b>
Spouse IL Residency from Date:	<b>06/01/2025</b>
Spouse IL Residency to Date:	<b>12/31/2025</b>
Spouse Other State:	<b>FL</b>
Spouse Other State from Date:	<b>03/01/2025</b>
Spouse Other State to Date:	<b>05/31/2025</b>
Line 4a (Other State 1):	<b>NY</b>
Line 5 (Column A):	<b>\$165,715</b>
Line 5 (Column B):	<b>\$143,284</b>
Line 6 (Column A):	<b>\$3,636</b>
Line 6 (Column B):	<b>\$1,518</b>

Line 7 (Column A):	\$543
Line 7 (Column B):	\$271
Line 15 (Column A):	\$199,803
Line 15 (Column B):	(\$81,782)
Line 19 (Column A):	\$600
Line 19 (Column B):	\$600
Line 39 (Column A):	\$1,672
Line 46 (IL Portion of Base Income):	\$63,891
Line 48 (Line 46 divided by IL Base Income Line 47):	0.172
Line 51 (IL Net Income):	\$61,930
Line 52 (Tax – Line 51 x 4.95% (.0495)):	\$3,066

**IL Schedule ICR Information:**

Line 1 (IL1040 Tax Amount):	\$3,066
Line 7a (Total Education Expenses):	\$4,150
Line 8 (IL Education Expense Credit):	\$750
Line 13 (Total Nonrefundable Credit):	\$750

**Student 1**

Line 10a (Student Last Name):	TTTTTI
Line 10a (Student First Name):	Jennifer
Line 10a (Student Social Security Number):	400-01-3559
Line 10a (Student Grade):	2
Line 10a (School Name):	Little Flower
Line 10a (School City):	Champaign
Line 10a (School Type):	Public
Line 10a (Student Total):	\$4,150

Line 11 (Total Qualified Expenses):	\$4,150
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**Schedule IL-E/EITC Information:**

**Illinois Dependent Exemption Allowance**

**Dependent 1**

Dependent's First Name:	Jennifer
Dependent's Last Name:	TTTTTI
Social Security Number:	400-01-3559
Dependent's Relationship to You:	Daughter
Dependent's Date of Birth:	07/10/2015
Number of Months Living with You:	12
Eligible for Earned Income Tax Credit Box:	X

**Dependent 2**

Dependent's First Name:	Robert
Dependent's Last Name:	TTTTTI
Social Security Number:	400-01-3560
Dependent's Relationship to You:	Son
Dependent's Date of Birth:	12/08/2012
Number of Months Living with You:	12
Eligible for Earned Income Tax Credit Box:	X

**Schedule IL-WIT Information:**

**Primary 1**

Primary Form Type:	<b>W</b>
Primary Employer/Payer Identification Number:	<b>36-1404993</b>
Primary Federal Wages, Winnings, etc.:	<b>\$165,715</b>
Primary Illinois Wages, Winnings, etc.:	<b>\$143,284</b>
Primary Illinois Income Tax Withheld:	<b>\$3,523</b>

**Primary 3**

Primary Form Type:	<b>M</b>
Primary Employer/Payer Identification Number:	<b>36-1029406</b>
Primary Federal Wages, Winnings, etc.:	<b>\$600</b>
Primary Illinois Wages, Winnings, etc.:	<b>\$600</b>
Primary Illinois Income Tax Withheld:	<b>\$30</b>

**Spouse 1**

Spouse Form Type:	<b>D</b>
Spouse Employer/Payer Identification Number:	<b>36-3703799</b>
Spouse Federal Wages, Winnings, etc.:	<b>\$34</b>
Spouse Illinois Wages, Winnings, etc.:	<b>\$34</b>
Spouse Illinois Income Tax Withheld:	<b>\$2</b>

## Test Case 10

**Contents:**     **Form IL-1040**  
                  **Schedule ICR**  
                  **Schedule IL-E/EITC**  
                  **Schedule IL-WIT**

### Taxpayer Identification Information:

Primary Name and SSN:	<b>Randall TTTTTJ 900-01-3510</b>
Primary Date of Birth:	<b>07/04/1976</b>
Spouse Name and SSN:	<b>Rhonda TTTTTJ 900-01-3511</b>
Secondary Date of Birth:	<b>04/12/1978</b>
Address:	<b>2104 Rochester Court Springfield, IL 62712 Sangamon County</b>
Email Address:	<b>Randall.TTTTTJ@testing.gov</b>
Filing Status:	<b>Married filing jointly</b>

### IL-1040 Information:

Line 1 (AGI):	<b>\$23,700</b>
Line 10a (You/Spouse Exemption Amount):	<b>\$5,700</b>
Line 10d (Dependents Exemption Amount):	<b>\$5,700</b>
Line 14 (Total Income Tax):	<b>\$609</b>
Line 25 (IL Tax Withheld):	<b>\$1,410</b>
Line 29 (Earned Income Tax Credit)	<b>\$1,430</b>
Line 30 (Child Tax Credit)	<b>\$572</b>
Line 36 (Refund):	<b>\$2,803</b>
Line 37b (Illinois Individual Income Tax Refund Paper Check):	<b>X</b>

### Schedule IL-E/EITC Information:

#### **Illinois Dependent Exemption Allowance**

##### **Dependent 1**

Dependent's First Name:	<b>Bradley</b>
Dependent's Last Name:	<b>TTTTTJ</b>
Social Security Number:	<b>400-01-3531</b>
Dependent's Relationship to You:	<b>Son</b>
Dependent's Date of Birth:	<b>07/10/2015</b>
Number of Months Living with You:	<b>12</b>
Eligible for Earned Income Tax Credit Box:	<b>X</b>

##### **Dependent 2**

Dependent's First Name:	<b>Mark</b>
Dependent's Last Name:	<b>TTTTTJ</b>
Social Security Number:	<b>400-01-3541</b>
Dependent's Relationship to You:	<b>Son</b>
Dependent's Date of Birth:	<b>12/08/2012</b>
Number of Months Living with You:	<b>12</b>
Eligible for Earned Income Tax Credit Box:	<b>X</b>

**Illinois Earned Income Tax Credit**

Step 3, Line 1 (Wages):	<b>\$23,700</b>
Step 3, Line 4 (Statutory Employee Box):	<b>No</b>
Step 4, Line 5a (Did Not Qualify for Federal EITC – ITIN)	<b>X</b>
Step 4, Line 6 (Federal EITC Amount):	<b>\$7,152</b>
Step 4, Line 9 (IL Earned Income Tax Credit):	<b>\$1,430</b>
Step 5, Line 10 (Dependent under the age of 12)	<b>X</b>
Step 5, Line 12 (Child Tax Credit)	<b>\$572</b>

**EITC Worksheet**

Part 1, Line 1 (federal Form 1040, Line 1z)	<b>\$23,700</b>
Part 1, Line 5 (Total Non-SE Earned Income)	<b>\$23,700</b>
Part 4, Line 15 (Total Earned Income)	<b>\$23,700</b>
Part 4, Line 16 (Income under Federal Limit Yes Checkbox)	<b>X</b>
Part 4, Line 17 (Total Earned Income from Part 1, Line15)	<b>\$23,700</b>
Part 4, Line 18 (EITC Table – Earned Income)	<b>\$7,152</b>
Part 4, Line 19 (AGI)	<b>\$23,700</b>
Part 4, Line 20 (Lines 17 and 19 Match Yes Checkbox)	<b>X</b>
Part 4, Line 23 (federal EITC calculation)	<b>\$7,152</b>

**Schedule II-WIT Information:****Primary 1**

Primary Form Type:	<b>W</b>
Primary Employer/Payer Identification Number:	<b>36-3225993</b>
Primary Federal Wages, Winnings, etc.:	<b>\$23,700</b>
Primary Illinois Wages, Winnings, etc.:	<b>\$23,700</b>
Primary Illinois Income Tax Withheld:	<b>\$1,410</b>