



Illinois Department of Revenue  
**2019 Form IL-1040**

**Individual Income Tax Return**

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



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

**Step 1: Personal Information**

**A** Enter personal information and Social Security numbers. You must provide the entire Social Security number for you and your spouse. Do not provide a partial Social Security number.

_____ Your first name and initial	_____ Your last name	_____ Year of birth	_____ Your Social Security number
_____ Spouse's first name and initial	_____ Spouse's last name	_____ Spouse's year of birth	_____ Spouse's Social Security number
_____ Mailing address (See instructions if foreign address)		_____ Apartment number	_____ County (Illinois only)
_____ City	_____ State	_____ ZIP or Postal Code	

Foreign Nation, if not United States (do not abbreviate)

**B** Filing status:  Single  Married filing jointly  Married filing separately  Widowed  Head of household

**C** Check if someone can claim you, or your spouse if filing jointly, as a dependent. See instructions.  You  Spouse

**D** Check the box if this applies to you during 2019:  Nonresident - **Attach** Sch. NR  Part-year resident - **Attach** Sch. NR

**Step 2: Income**

(Whole dollars only)

<b>1</b> Federal adjusted gross income from your federal Form 1040 or 1040-SR, Line 8b.	<b>1</b> _____	.00
<b>2</b> Federally tax-exempt interest and dividend income from your federal Form 1040 or 1040-SR, Line 2a.	<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> _____	.00

**Step 3: Base Income**

<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>6</b> Illinois Income Tax overpayment included in federal Form 1040 or 1040-SR, Schedule 1, Ln. 1.	<b>6</b> _____	.00
<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> _____	.00

**Step 4: Exemptions**

<b>10 a</b> Enter the exemption amount for yourself and your spouse. <b>See instructions.</b>	<b>a</b> _____	.00
<b>b</b> Check if 65 or older: <input type="checkbox"/> You + <input type="checkbox"/> Spouse # of checkboxes X \$1,000 =	<b>b</b> _____	.00
<b>c</b> Check if legally blind: <input type="checkbox"/> You + <input type="checkbox"/> Spouse # of checkboxes X \$1,000 =	<b>c</b> _____	.00
<b>d</b> If you are claiming dependents, enter the amount from Schedule IL-E/EIC, Step 2, Line 1. <b>Attach</b> Schedule IL-E/EIC.	<b>d</b> _____	.00
<b>Exemption allowance.</b> Add Lines a through d.	<b>10</b> _____	.00

**Step 5: Net Income and Tax**

<b>11</b> <b>Residents: Net income.</b> Subtract Line 10 from Line 9. <b>Nonresidents and part-year residents:</b> Enter the <b>Illinois net income</b> from Schedule NR. <b>Attach</b> Schedule NR.	<b>11</b> _____	.00
<b>12</b> <b>Residents:</b> Multiply Line 11 by 4.95% (.0495). Cannot be less than zero. <b>Nonresidents and part-year residents:</b> Enter the tax from Schedule NR.	<b>12</b> _____	.00
<b>13</b> Recapture of investment tax credits. <b>Attach</b> Schedule 4255.	<b>13</b> _____	.00
<b>14</b> <b>Income tax.</b> Add Lines 12 and 13. Cannot be less than zero.	<b>14</b> _____	.00

**Step 6: Tax After Nonrefundable Credits**

<b>15</b> Income tax paid to another state while an Illinois resident. <b>Attach</b> Schedule CR.	<b>15</b> _____	.00
<b>16</b> Property tax and K-12 education expense credit amount from Schedule ICR. <b>Attach</b> Schedule ICR.	<b>16</b> _____	.00
<b>17</b> Credit amount from Schedule 1299-C. <b>Attach</b> Schedule 1299-C.	<b>17</b> _____	.00
<b>18</b> Add Lines 15, 16, and 17. This is the total of your credits. Cannot exceed the tax amount on Line 14.	<b>18</b> _____	.00
<b>19</b> <b>Tax after nonrefundable credits.</b> Subtract Line 18 from Line 14.	<b>19</b> _____	.00

**Step 7: Other Taxes**

<b>20</b> Household employment tax. See instructions.	<b>20</b> _____	.00
<b>21</b> 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.	<b>21</b> _____	.00
<b>22</b> Compassionate Use of Medical Cannabis Program Act and sale of assets by gaming licensee surcharges.	<b>22</b> _____	.00
<b>23</b> <b>Total Tax.</b> Add Lines 19, 20, 21, and 22.	<b>23</b> _____	.00

Staple W-2 and 1099 forms here

Staple your check and IL-1040-V



24 Total tax from Page 1, Line 23. 24 \_\_\_\_\_ .00

**Step 8: Payments and Refundable Credit**

25 Illinois Income Tax withheld. **Attach** Schedule IL-WIT. 25 \_\_\_\_\_ .00

26 Estimated payments from Forms IL-1040-ES and IL-505-I, including any overpayment applied from a prior year return. 26 \_\_\_\_\_ .00

27 Pass-through withholding. **Attach** Schedule K-1-P or K-1-T. 27 \_\_\_\_\_ .00

28 Earned Income Credit from Schedule IL-E/EIC, Step 4, Line 8. **Attach** Schedule IL-E/EIC. 28 \_\_\_\_\_ .00

29 **Total payments and refundable credit.** Add Lines 25 through 28. 29 \_\_\_\_\_ .00

**Step 9: Total**

30 If Line 29 is greater than Line 24, subtract Line 24 from Line 29. 30 \_\_\_\_\_ .00

31 If Line 24 is greater than Line 29, subtract Line 29 from Line 24. 31 \_\_\_\_\_ .00

**Step 10: Underpayment of Estimated Tax Penalty and Donations - Only complete Step 10 for late-payment penalty for underpayment of estimated tax or to make a voluntary charitable donation.**

32 Late-payment penalty for underpayment of estimated tax. 32 \_\_\_\_\_ .00

a  Check if at least two-thirds of your federal gross income is from farming.

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. **Attach** Form IL-2210.

d  Check if you were not required to file an Illinois Individual Income Tax return in the previous tax year.

33 Voluntary charitable donations. **Attach** Schedule G. 33 \_\_\_\_\_ .00

34 **Total penalty and donations.** Add Lines 32 and 33. 34 \_\_\_\_\_ .00

**Step 11: Refund**

35 If you have an amount on Line 30 and this amount is greater than Line 34, subtract Line 34 from Line 30. This is your **overpayment**. 35 \_\_\_\_\_ .00

36 Amount from Line 35 you want **refunded to you**. Check **one** box on Line 37. See instructions. 36 \_\_\_\_\_ .00

37 I choose to receive my refund by

a  **direct deposit** - Complete the information below if you check this box.

Routing number   Checking or  Savings

Account number

b  **Illinois Individual Income Tax refund debit card.** I acknowledge I have reviewed the card information found at <http://tax.illinois.gov/DebitCard> prior to making this election.

c  **paper check.**

38 Amount to be **credited forward**. Subtract Line 36 from Line 35. See instructions. 38 \_\_\_\_\_ .00

**Step 12: Amount You Owe**

39 If you have an amount on Line 31, add Lines 31 and 34. - **or** -  
If you have an amount on Line 30 and this amount is less than Line 34, subtract Line 30 from Line 34. This is the **amount you owe**. See instructions. 39 \_\_\_\_\_ .00

**Step 13:** 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
<b>Paid Preparer Use Only</b>	Print/Type paid preparer's name		Paid preparer's signature		<input type="checkbox"/> Check if self-employed
	Firm's name		Firm's FEIN		Paid Preparer's PTIN
	Firm's address		Firm's phone		( )
<b>Third Party Designee</b>				( )	<input type="checkbox"/> Check if the Department may discuss this return with the third party designee shown in this step.
	Designee's name (please print)		Designee's phone number		

**Refer to the 2019 IL-1040 Instructions for the address to mail your return.**