



**Read this information first**

Complete this schedule only if you are claiming dependents or are eligible for the Illinois Earned Income Credit. If you fraudulently claim the Earned Income Credit, you may not be allowed to claim the credit for up to ten years. You also may have to pay penalties.

You must have claimed the federal Earned Income Credit in order to claim the Illinois Earned Income Credit. The total amount of Illinois Earned Income Credit may exceed the amount of tax.

**Note** If claiming the Illinois Earned Income Credit, you must attach a copy of pages 1 and 2 of your federal Form 1040 to this schedule.

**Step 1: Provide the following information**

Your name as shown on your Form IL-1040 \_\_\_\_\_

Your Social Security number \_\_\_\_\_

**Illinois Dependent Exemption Allowance**

**Step 2: Dependent information**

Complete the table for each person you are claiming as a dependent. Report any additional dependents in Table A on the back of this schedule.

Dependent's first name	Dependent's last name	Social Security number	Dependent's relationship to you	Dependent's date of birth (mm/dd/yyyy)	Full time student	Person with disability	Number of months living with you	Eligible for Earned Income Credit
					<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

**1** Multiply the total number of dependents being claimed here and on Table A by \$2,225. \_\_\_\_\_ X \$ 2,225

Enter the result here and on Form IL-1040, Line 10d.

**1** \_\_\_\_\_ .00

**Illinois Earned Income Credit**

Complete this section **only** if you qualify for the Illinois Earned Income Credit. Attach a copy of federal Form 1040, Pages 1 and 2.

**Note** If you are not claiming a qualifying child, do not complete the table below.

**Step 3: Qualifying Child Information**

Complete the table for qualifying children that are **not** included in Step 2. Report any additional qualifying children in Table B on the back of this schedule.

Child's first name	Child's last name	Social Security number	Child's relationship to you	Child's date of birth (mm/dd/yyyy)	Full time student	Person with disability	Number of months living with you
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	

**1** Enter your wages, salaries and tips from your federal Form 1040, Line 1.

**1** \_\_\_\_\_ .00

**2** Enter your business income or (loss) from your federal Form 1040, Schedule 1, Line 12. **If you report an amount on Line 2, you must answer the question in Line 2a below.**

**2** \_\_\_\_\_ .00

**2a** Does your occupation require a city, state, or county issued professional license, registration, or certification?

**2a** Yes  No

**2b** If you answered "Yes" to Line 2a, you must enter the name of the issuing agency and your license, registration, or certification number. Report additional licenses, registrations, or certifications in Table C on the back of this schedule.

**2b** \_\_\_\_\_  
 (Name of issuing agency)

\_\_\_\_\_  
 (License, registration, or certification number)



**3** If you are filing your 2018 federal return as married filing jointly but are filing your 2018 Illinois return as married filing separately, enter your federal adjusted gross income (AGI) from your married filing jointly federal Form 1040, Line 7.

**3** \_\_\_\_\_ .00

**3a** If you entered an amount on Line 3, enter your spouse's Social Security number from your married filing jointly federal return.

**3a** - - - - -

**4** Is the statutory employee box marked on your W-2, Wage and Tax Statement, Box 13?

**4** Yes  No

**Step 4: Figure your Illinois Earned Income Credit**

**5** Enter the amount of federal Earned Income Credit from your federal Form 1040, Line 17a.

**5** \_\_\_\_\_ .00

**6** Multiply the amount on Line 5 by 18% (.18).

**6** \_\_\_\_\_ .00

**7 Illinois residents:** Enter 1.0.

**Nonresidents and part-year residents:** Enter the decimal from Schedule NR, Line 48.

**7** \_\_\_\_\_ ● \_\_\_\_\_

**8** Multiply Line 6 by the decimal on Line 7. This is your Illinois Earned Income Credit.

Enter this amount here and on your Form IL-1040, Line 28.

**8** \_\_\_\_\_ .00

**Remember: Intentionally submitting false information is a crime under Section 1301 of the Illinois Income Tax Act**

**Schedule IL-E/EIC Table A - Additional Dependent Information**

Complete this table to report additional dependents from Step 2.

Dependent's first name	Dependent's last name	Social Security number	Dependent's relationship to you	Dependent's date of birth (mm/dd/yyyy)	Full time student	Person with disability	Number of months living with you	Eligible for Earned Income Credit
					<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

**Schedule IL-E/EIC Table B - Additional Qualifying Children Information**

Complete this table to report additional qualifying children from Step 3.

Child's first name	Child's last name	Social Security number	Child's relationship to you	Child's date of birth (mm/dd/yyyy)	Full time student	Person with disability	Number of months living with you
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	

**Schedule IL-E/EIC Table C - Additional Licenses, Registrations, or Certifications**

Complete this table to report additional information from Step 3, Line 2b.

Issuing Agency	License, Registration, or Certification Number

