



Illinois Department of Revenue
2010 Form IL-1040

Individual Income Tax Return

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

Step 1: Personal 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

B 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)

C Filing status (see instructions)

- Single or head of household Married filing jointly Married filing separately Widowed

Step 2: Income

- 1 Federal adjusted gross income from your U.S. 1040, Line 37; U.S. 1040A, Line 21; or U.S. 1040EZ, Line 4
2 Federally tax-exempt interest and dividend income from your U.S. 1040 or 1040A, Line 8b; or U.S. 1040EZ
3 Other additions to your income. Attach Schedule M.
4 Total income. Add Lines 1 through 3.

Step 3: Base Income

- 5 Income received from Social Security benefits and certain retirement plans if included in Line 1. Attach federal Page 1.
6 Illinois Income Tax overpayment included in U.S. 1040, Line 10
7 Other subtractions to your income. Attach Schedule M.
8 Add Lines 5, 6, and 7. This is the total of your subtractions.
9 Illinois base income. Subtract Line 8 from Line 4.

Step 4: Exemptions

See instructions before figuring exemptions.

- 10 a Number of exemptions from your federal return
b If someone else claimed or could have claimed you or your spouse as a dependent on their return, see instructions to figure the number to write here.
c Check if 65 or older: You + Spouse =
d Check if legally blind: You + Spouse =
Exemption allowance. Add Lines a through d.

Step 5: Net Income

- 11 Residents Only: Net income. Subtract Line 10 from Line 9. Skip Line 12.
12 Nonresidents and part-year residents Only: Check the box that applies to you during 2010 Nonresident Part-year resident, and write the Illinois base income from Schedule NR. Attach Schedule NR.

Step 6: Tax

- 13 Residents: Multiply Line 11 by 3% (.03). Write the result here. Nonresidents and part-year residents: Write the tax before recapture of investment credits from Schedule NR.
14 Recapture of investment tax credits. Attach Schedule 4255.
15 Total tax. Add Lines 13 and 14. This amount may not be less than zero.



Staple W-2 and 1099 forms here



Staple your check



16 Total tax amount from Page 1, Line 15 16 \_\_\_\_\_ .00

**Step 7: Tax After Nonrefundable Credits and Use Tax**

17 Income tax paid to another state while an Illinois resident. 17 \_\_\_\_\_ .00  
Attach Schedule CR.  
18 Property tax and K-12 education expense credit amount from 18 \_\_\_\_\_ .00  
Schedule ICR. Attach Schedule ICR.  
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 20 \_\_\_\_\_ .00  
may not exceed the tax amount on Line 16.  
21 Tax after nonrefundable credits. Subtract Line 20 from Line 16. 21 \_\_\_\_\_ .00  
22 Use tax on internet, mail order, or other out-of-state purchases from 22 \_\_\_\_\_ .00  
UT Worksheet or UT Table in the instructions. Do not leave blank.  
23 Tax after nonrefundable credits and use tax. Add Lines 21 and 22. 23 \_\_\_\_\_ .00

Complete  
Schedule ICR

- New -  
Pay IL  
Use Tax  
here.

**Step 8: Payments and Refundable Credit**

24 Illinois Income Tax withheld. Attach W-2 and 1099 forms. 24 \_\_\_\_\_ .00  
25 Estimated payments from Forms IL-505-I and IL-1040-ES, 25 \_\_\_\_\_ .00  
including overpayment applied from 2009 return  
26 Pass-through entity tax payments. Attach Schedule K-1-P or K-1-T. 26 \_\_\_\_\_ .00  
27 Earned Income Credit from Schedule ICR. Attach Schedule ICR. 27 \_\_\_\_\_ .00  
28 Total payments and refundable credit. Add Lines 24 through 27. 28 \_\_\_\_\_ .00

See Instructions

Complete  
Schedule ICR

**Step 9: Overpayment or Underpayment**

29 Overpayment. If Line 28 is greater than Line 23, subtract Line 23 from Line 28. 29 \_\_\_\_\_ .00  
30 Underpayment. If Line 23 is greater than Line 28, subtract Line 28 from Line 23. 30 \_\_\_\_\_ .00

**Step 10: Underpayment of Estimated Tax Penalty and Donations**

31 Late payment penalty for underpayment of estimated tax. 31 \_\_\_\_\_ .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, otherwise we  
will figure this penalty for you. Attach Form IL-2210.  
32 Voluntary charitable donations. Attach Schedule G. 32 \_\_\_\_\_ .00  
33 Total penalty and donations. Add Lines 31 and 32. 33 \_\_\_\_\_ .00

**Step 11: Refund or Amount You Owe**

34 If you have an overpayment on Line 29 and this amount is greater than 34 \_\_\_\_\_ .00  
Line 33, subtract Line 33 from Line 29. This is your remaining overpayment.  
35 Amount from Line 34 you want refunded to you 35 \_\_\_\_\_ .00



36 Complete to direct deposit your refund  
Routing number                  
 Checking or  Savings  
Account number

37 Subtract Line 35 from Line 34. This amount will be applied to your 2011 estimated tax. 37 \_\_\_\_\_ .00  
38 If you have an underpayment on Line 30, add Lines 30 and 33. OR 38 \_\_\_\_\_ .00  
If you have an overpayment on Line 29 and this amount is less than Line 33,  
subtract Line 29 from Line 33. This is the amount you owe.

See  
instructions  
for payment  
options.

**Step 12: Sign and Date**

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  
here

\_\_\_\_\_  
Your signature Date Daytime phone number Your spouse's signature Date  
\_\_\_\_\_  
Paid preparer's signature Date Preparer's phone number Preparer's FEIN, SSN, or PTIN



If no payment enclosed, mail to:  
ILLINOIS DEPARTMENT OF REVENUE  
PO BOX 1040  
GALESBURG IL 61402-1040



If payment enclosed, mail to:  
ILLINOIS DEPARTMENT OF REVENUE  
SPRINGFIELD IL 62726-0001

