



Illinois Department of Revenue  
**2020 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 2020:  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 11.	<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.

*You may also contribute to college savings funds here. See instructions!*

Routing number	<input type="text"/>	<input type="checkbox"/> Checking or <input type="checkbox"/> Savings
Account number	<input type="text"/>	

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 2020 IL-1040 Instructions for the address to mail your return.**