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.

Sign Here					( )
	Your signature	Date (mm/dd/yyyy)	Spouse's signature	Date (mm/dd/yyyy)	Daytime phone number
Paid Preparer Use Only					☐ Check if self-employed / Paid Preparer's PTIN
	Print/Type paid preparer's name		Paid preparer's signature	Date (mm/dd/yyyy)	
	Firm's name ▸			Firm's FEIN ▸	
	Firm's address ▸			Firm's phone ▸	( )
Third Party Designee			( )		☐ 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.