

16 Tax amount from Page 1, Step 6, Line 15

16 _____

Step 7: **Payments and Credits**

17 Illinois Income Tax withheld. **Attach** W-2 and 1099 forms. 17 _____

18 Estimated payments from Forms IL-505-I and IL-1040-ES, including overpayment applied from 2003 return 18 _____

Nonresidents may not claim a credit on Lines 19, 20, or 21.

19 Income tax paid to another state while an Illinois resident. **Attach** Schedule CR and other states' returns. 19 _____

The total of Lines 19, 20b, and 21b may not exceed the tax amount on Line 16.

20 Illinois Property Tax credit. **You must complete PT Worksheet in instructions.**
PT Worksheet Line 3 amount 20a _____
PT Worksheet Line 8 amount 20b _____

21 Education expense credit. **You must complete ED Worksheet in instructions or Schedule ED. Attach** receipt or Schedule ED.
ED Worksheet or Schedule ED Line 1 amount 21a _____
ED Worksheet or Schedule ED Line 10 amount 21b _____

22 Earned Income Credit. **You must complete EIC Worksheet in instructions.**
EIC Worksheet Line 1 amount 22a _____
EIC credit amount from the EIC Worksheet 22b _____
Check if you have a qualifying child (living with you) born after 12/31/86.

23 Income tax credit amount from Schedule 1299-C. **Attach** Schedule 1299-C. 23 _____

24 Add Lines 17, 18, 19, 20b, 21b, 22b, and 23. This is the total of your payments and credits. 24 _____

Step 8: **Overpayment or Tax Due**


25 If Line 24 is greater than Line 16, subtract Line 16 from Line 24. This is your **overpayment**. 25 _____

26 If Line 16 is greater than Line 24, subtract Line 24 from Line 16. This is your **tax due**. 26 _____

Step 9: **Penalty**

27 Late-payment penalty for underpayment of estimated tax 27 _____

a Check if you annualized your income on Form IL-2210, Step 6, or if you are 65 or older and permanently living in a nursing home. **Attach** Form IL-2210.

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

Step 10: **Donations** Any donation will reduce your refund or increase the amount you owe

28 Amount you wish to donate to one or more of the following voluntary contribution funds

- Wildlife Preservation a _____ Multiple Sclerosis f _____
- Child Abuse Prevention b _____ Military Family Relief g _____
- Alzheimer's Research c _____ Lou Gehrig's Disease h _____
- Homeless Assistance d _____ Illinois Veterans' Home i _____
- Breast Cancer Research e _____

Add Lines a through i. This is your donations total. 28 _____

29 Add Line 27 and Line 28. This is your total penalty and donations. 29 _____

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

30 If you have an overpayment on Line 25 and this amount is greater than Line 29, subtract Line 29 from Line 25. 30 _____

31 **Amount from Line 30 that you want applied to 2005 estimated tax** 31 _____

32 Subtract Line 31 from Line 30. This is your **refund**. 32 _____

33 Complete to direct deposit your refund

Routing number Checking or Savings

Account number



See instructions for payment options.

34 If you have tax due on Line 26, add Lines 26 and 29. **OR** If you have an overpayment on Line 25 and this amount is less than Line 29, subtract Line 25 from Line 29. This is the **amount you owe**. 34 _____

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.

X _____
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 SPRINGFIELD IL 62719-0001** If payment enclosed, mail to: **ILLINOIS DEPARTMENT OF REVENUE SPRINGFIELD IL 62726-0001**