



Taxpayer's Full Name: _____ **Spouse's Full Name:** _____

Form ID: IL

Illinois General Information

Use Tax

General merchandise purchases _____ [1]
Qualifying food, non-prescription drugs and medical appliances purchases _____ [2]
Sales tax already paid to another state _____ [3]

Contributions

Amount of contributions you wish to make to:

Wildlife Preservation _____ [4]
Alzheimer's Disease Research _____ [5]
Assistance to the Homeless _____ [6]
Diabetes Research Fund _____ [7]
Hunger Relief Fund _____ [8]

Credits

Qualified Education Expenses

Child's Name	Grade	School Name	School City	School Type	Total Tuition, Books, Lab fees
_____ [9]	_____ [10]	_____ [11]	_____ [12]	_____ [13]	_____ [14]
_____ [15]	_____ [16]	_____ [17]	_____ [18]	_____ [19]	_____ [20]
_____ [21]	_____ [22]	_____ [23]	_____ [24]	_____ [25]	_____ [26]
_____ [27]	_____ [28]	_____ [29]	_____ [30]	_____ [31]	_____ [32]
_____ [33]	_____ [34]	_____ [35]	_____ [36]	_____ [37]	_____ [38]
_____ [39]	_____ [40]	_____ [41]	_____ [42]	_____ [43]	_____ [44]
_____ [45]	_____ [46]	_____ [47]	_____ [48]	_____ [49]	_____ [50]
_____ [51]	_____ [52]	_____ [53]	_____ [54]	_____ [55]	_____ [56]

Property Taxes

Description

Property Index Number

_____	_____ [57]
_____	_____
_____	_____

Part-year Resident and Nonresident Information

If you were a part-year resident during the tax year, enter the dates you lived in Illinois

Part-year residency dates:	Taxpayer	Spouse
From _____	_____ [58]	_____ [60]
To _____	_____ [59]	_____ [61]

Mark if you were a resident of any of the following states during the tax year: IA _____ [62] KY _____ [63] MI _____ [64] WI _____ [65]

In what states other than above did you reside and/or file a tax return during the tax year? [66]

State postal code	State postal code	State postal code
State postal code	State postal code	State postal code
State postal code	State postal code	State postal code
State postal code	State postal code	State postal code