

Illinois Department of Revenue 3 6 4 2 7 9 - Submission ID - 2024 IL-8453 Illinois Individual Income Tax Electronic Filing Declaration

•	1: Provide taxpayer information						
Print							
Or	First name and middle initial Spouse's first name (and I	Social Security number					
type 1	Mailing address			Spouse's Social Security number			
-	City	State	ZIP	Daytime phone number			
Step 2	2: Complete information from tax retur	n	Choose one: IL-	-1040 IL-1040-X			
-	et income from Form IL-1040 or IL-1040-X, Lir		لحسنا	1			
	ax from Form IL-1040 or IL-1040-X, Line 14			2			
3 IIIi	inois Income Tax withheld from Form IL-1040	or IL-1040-X, Line 25	only (enter "0" if none	e) 3 <u> 00</u>			
	verpayment from Form IL-1040, Line 37 or IL-			4			
	otal amount due from Form IL-1040, Line 41 or			51_00_			
	ling status: Single Married filing join 3: Complete direct deposit of refund or	6:20.1					
within t 7 Ro 8 Ac 9 Ty 10 Da 11 Ele	the United States or those not funded by internouting no. (RN): ccount no. (AN): pe of account: Checking Saving ate the payment is to be electronically withdraw ectronic funds withdrawal amount: ame on account:	ational funds. Electron	nic payments will not be	debit, deposit) with financial institutions located e accepted and refunds will be via paper check. 			
		St		if applicable Stop 2			
	4: Taxpayer declaration and signature (\$ I consent that my refund may be directly dep correct. If I have filed a joint return, this is an I authorize the Illinois Department of Revenu	osited as designated irrevocable appointm	in Step 3 and declare nent of the other spous	the information on Lines 7 through 9 is e as an agent to receive the refund.			
	withdrawal as designated in the electronic por financial institutions involved in the processir necessary to answer inquiries and resolve is:	tion of my 2024 Illinoing of an electronic over	s Original or Amended l erpayment of taxes to	Individual Income Tax return. I authorize the			
П	I do not want direct deposit of my refund, or a	an electronic funds w	ithdrawal (direct debjt)	of my balance due.			
return o	penalties of perjury, I declare the information on originator (ERO) are identical. To the best of my companying information may be sent to IDOR by ccepted or rejected. If rejected, I authorize IDOR	knowledge, my return y my ERO. I authorize	is true, correct, and con IDOR to inform my ERO	nelete. I consent that my return, this declaration, D'and/or the transmitter when my return has			
Sign			0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	Your signature	Date		int return, both must sign) Date			
l decla informa	5: Electronic return originator (ERO) ar re that I have examined this taxpayer's electro ation. I have followed all requirements of this p er's return and accompanying information are	onic Form IL-1040 or program and declare,	IL-1040-X, the informa under penalties of per	tion on this Form IL-8453, and accompanying			
]_	Daniel C Prince			Check if paid preparer: (See instructions.)			
	ERO's signature DC PRINCE INC		Date	P 0 0 1 0 5 9 1 7			
	Firm's name or your name if self-employed			Your PTIN Tour PTIN			
anly	1595 WELD ROAD # 4			36 - 44 3 3 9 3 9			
- 14	Mailing address ELGIN	IL	60123	Federal employer identification number (FEIN) (847) 841-1100			
C	City	State	ZIP	Daytime phone number			

Step 6: Attach required documents (e.g., W-2 forms, 1099 forms, IL-1310).

Do not mail Form IL-8453 and these documents unless requested for review.