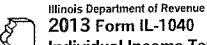
Form $1040$	31, 2013, or other tax year beginning . 2	013, ending	, 20	<b>→</b> .	parate instructions.	
Your first name and initia		Last name		Your social sec	curity number	
JAMES W TRAC						
If a joint return, spouse's	s first name and initial	Last name		Spouse's socia	security number	
JIL W TRACY		· · · · · · · · · · · · · · · · · · ·	A-a-lwest so			
Home address (number a	and street). If you have a P.O. box, see instructions.		Aparlment no.		sure the SSN(s) above on line 6c are correct.	
1628 FIELDS	TONE DRIVE				· · · · · · · · · · · · · · · · · · ·	
City, town or post office,	state, and ZIP code. If you have a foreign address, also co	ompiete spaces below (see instr	uctions).	1	ial Election Campaign  ou, or your spouse if filing	
QUINCY, IL		eign province/state/county	Foreign postal code	jointly, want \$3	to go to this fund? Checking	
Foreign country name	1 011	sign provinces states county	i Breigh postal codo	<del> </del>	I not change your tax or You Spouse	
			Head of household (			
Filing Status	1 Single	4 _	$^{ m J}$ instructions.) If the $ m c$	ualifying pers	son is a child	
	2 X Married filing jointly (even if only one had		but not your dependename here.	ent, enter this	s child's	
Check only	3 Married filing separately, Enter spouse's S	5 II	1 <del></del>	with dependent child		
one box.	name here *			·	Boyes checked	
Exemptions	6a X Yourself. If someone can claim y				on 6a and 6b2	
	b X Spouse	(2) Dependent's	(3) Dependent's	(4) 7	No. of children - on 6c who:	
	c Dependents:	social security	relationship	L child under	• lived with you	
	(1) First name Last na	number	to you	age 17 qualifying for child tax cr	● did not	
	(1) First name Last nai	· · · · · · · · · · · · · · · · · · ·		(see instrs)	live with you - due to divorce	
If more than four				<del></del>	or separation (see instrs)	
dependents, see			<del> </del>		_ Dependents on 6c not	
instructions and check here			1		_ entered above Add numbers	
	d Total number of exemptions claimed			<u> </u>	on lines ≥ 2	
h	7 Wages, salaries, tips, etc. Attach For				415,398.	
Income	8a Taxable interest. Attach Schedule B	if required			2,273.	
	b Tax-exempt interest. Do not include			,871.		
Attach Form(s)	9a Ordinary dividends. Attach Schedule				67,435.	
W-2 here. Also attach Forms	b Qualified dividends		96 47	, 604.		
W-2G and 1099-R	10 Taxable refunds, credits, or offsets of 11 Alimony received					
if tax was withheld.	12 Business income or (loss). Attach So					
If you did not	13 Capital gain or (loss). Att Sch D if reqd. If not			13	91,055.	
get a W-2, see instructions.	14 Other gains or (losses). Attach Form	4797		14		
	15a IRA distributions	ьт	axable amount	15 b		
	16a Pensions and annuaties 16a		Taxable amount			
	17 Rental real estate, royalties, partners					
	<ul><li>18 Farm income or (loss). Attach Sched</li><li>19 Unemployment compensation</li></ul>					
	20 a Social security benefits		Faxable amount			
	21 Other income SEE STATEMENT 1			21	21,944.	
	22 Combine the amounts in the far right column for		our total income	▶ 22	598,105.	
A -1'	23 Educator expenses		23			
Adjusted Gross	24 Certain business expenses of reservists, perfor qovernment officials. Attach Form 2106 or 2106		24			
Income	25 Health savings account deduction. At		<del></del>			
	26 Moving expenses. Attach Form 3903					
	27 Deductible part of self-employment tax. Attach	Deductible part of self-employment tax. Attach Schedule SE		294.		
				, 330.		
	29 Self-employed health insurance deduction					
	30 Penalty on early withdrawal of savings				1	
	32 IRA deduction 32					
	33 Student loan interest deduction					
	34 Tuition and fees. Attach Form 8917.	,	34			
	35 Domestic production activities deduction. Attac	h Form 8903	35			
	36 Add lines 23 through 35.				4,624.	
	27 Subtract line 36 from line 22. This is	your adjusted arose inv	COMP	► 37	1 593.481	

Fori 1040 (2013)	JAMES W AND JIL W TRACY		Page 2		
Tax and	38 Amount from line 37 (adjusted gross income)	38	593,481.		
Credits	39a Check				
Standard	b If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39 b				
Deduction	40 Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	<u>170,877.</u>		
for	41 Subtract line 40 from line 38	41	422,604.		
<ul> <li>People who check any box</li> </ul>	42 Exemptions. If line 38 is \$150,000 or less, multiply \$3,900 by the number on line 6d. Otherwise, see instrs	42	0.		
on line 39a or	check any box 1 45 = 11 + 50 to 15 to 15 to 15				
39b or who can be claimed as a		43	422,604.		
dependent, see	44 Tax (see instrs). Check if any from:  a   Form(s) 8814 c   b   Form 4972	44	90,814.		
instructions.	45 Alternative minimum tax (see instructions). Attach Form 6251.	45	47,643.		
All others:	46 Add lines 44 and 45	46	138,457.		
Single or Married filing	47 Foreign tax credit. Attach Form 1116 if required	3-7-7-17 11-72-7-17			
separately,	48 Credit for child and dependent care expenses, Attach Form 2441				
\$6,100	49 Education credits from Form 8863, line 19.				
Married filing	50 Retirement savings contributions credit. Attach Form 8880	<ul><li>(1) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4</li></ul>			
jointly or Qualifying	51 Child tax credit. Attach Schedule 8812, if required 51				
widow(er),	52 Residential energy credits. Attach Form 5695.				
\$12,200			<u> </u>		
Head of household,	TO COLOR OF HOLD THE COLOR OF T	54	630.		
\$8,950	54 Add fines 47 through 53. These are your total credits		137,827.		
	55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55 56	588.		
Other	56 Self-employment tax. Attach Schedule SE.	57	300.		
Taxes	57 Unreported social security and Medicare tax from Form: a 4137 b 8919	58			
	58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	F-1			
	59a Household employment taxes from Schedule H.	59 a	·+ <del> ·-</del>		
	b First-time homebuyer credit repayment. Attach Form 5405 if required	60	6,540.		
			· <del> </del>		
	61 Add lines 55-60. This is your total tax.	61	144,955.		
Payments	62 Federal income tax withheld from Forms W-2 and 1099 62 82,177.				
If you have a	63 2013 estimated tax payments and amount applied from 2012 return. 63 40,000.	1	1		
i qualifying  child, attach   i	64a Earned income credit (EIC) 64a				
Schedule EIC.	D Horitaxable combat pay election				
	65 Additional child tax credit. Attach Schedule 8812		1		
	66 American opportunity credit from Form 8863, line 8				
	67 Reserved 67				
	68 Amount paid with request for extension to file				
		-			
		-			
	——————————————————————————————————————	1000			
	72 Add Ins 62, 63, 64a, & 65-71. These are your total prints.	72	122,177.		
Refund	73 If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid.	73			
	74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here.	74a			
Direct deposit?	► b Routing number Checking Savings				
See instructions.	► d Account number				
A .		_00000	22 003		
Amount		76	22,981.		
You Owe	77 Estimated tax penalty (see instructions)	94,95%			
Third Party	Do you want to allow another person to discuss this return with the IRS (see instructions)?	piete t	below. No		
Designee	Designee's ►LOWELL A. YATES, C.P.A. Phone ►217-222-0304	ersonal	identification > 85001		
C:	name LOWELL A. YATES, C.P.A. no. 217-222-0304 in Under penalbes of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best				
Sign Here	belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				
Joint return?	Your signature Date Your occupation	Day	time phone number		
See instructions.	CORP EXECUTIVE	21	.7-773-4411		
Кеер а сору	Spouse's signature, If a joint return, both must sign,  Date Spouse's occupation	If the	e IRS sent you an Identity Pro- ion PIN, enter		
for your records.	STATE REPRESENTAT	I it he	ere (see instrs)		
	PrinI/Type preparer's name Preparer's signature Date Check	ıf	PTIN		
Paid	LOWELL A. YATES, C.P.A. LORDAN DEEL CONT. 2/10/14   self-employ	ed	P00320878		
Preparer	Frim's name GRAY HUNTER STEWN LLP				
Use Only	Fum's address ► 500 MAINE STREET Firm's Ell	N ► 3	36-3077757		
•	OUINCY, IL 62301 Phone no		217) 222-0304		

Form 1040 (2013)



## Individual Income Tax Return

or for fiscal year ending

Over 80% of taxpayers file electronically. It is easy and you will get your refund faster. Visit tax.illinois.gov.

Page 1 of 2

A Social Security number in the order fixey appear on your federal return   Spouse's Social Security number   Spouse's Spouse's Social Security number   Spouse's Spouse's Social Security number   Spouse's Spouse's Spouse's Spouse's Spouse Spouse's Spouse Spouse's Sp		Step 1: Perso	onal Information	Do not write above ti	ns me.
Personal Information   TRACY   Your last name and initial   TRACY   Your last name and initial   TRACY   Your last name   Your last name   TRACY   Your last name   Your last n	Α	Social Security no	umbers in the order they appear on your federal return		
Personal Information   TRACY   Your last name and initial   TRACY   Your last name and initial   TRACY   Your last name   Your last name   TRACY   Your last name   Your last n					
TRACY   Your first name and in filed   TRACY   Your first name and in filed   TRACY   Your first name and in filed   TRACY   Spoose's final name and mitted   TRACY   TRACY		Your Social Secui	rity number Spouse's	Social Security number	
Total Process   Transformance   Transformanc	В				
TTL No.   TTL		JAMES W	TRACY		
Spouse's final name and initial   Spouse's final name and initial   Spouse's final name   Spouse's final nam			and initial Your last	name	
Spouse's final name and intel   16.28 FTEIDSTONE DRIVE   Mailing address (See Instructions if foreign address)		JTI. W	TRACY		
Monitory   State			me and initial Spouse's	last name	
Foreign Nation, if not United States (do not abbreviate)   C   Filing status (see instructions)   Single or head of household   Ximariand filing jointly   Married filing separately   Wildowed		1628 FIELDS	STONE DRIVE		
Foreign Nation, if not United States (do not abbreviate)		Mailing address (			
Foreign Nation, if not Umited States (do not abbreviate)   C   Filing status (see instructions)   Single or head of household   X   Married filing jointly   Married filing separately   Wildowed					-1.0-3-
C   Filing status (see instructions)   Single or head of household   Married filing jointly   Married filing separately     Widowed		City	State	Zip or Posi	iai Code
C   Filing status (see instructions)   Single or head of household   Married filing jointly   Married filing separately   Widowed		Foreign Notion of	Fact Horizod States (do not abbreviate)		
Single or head of household   Married filing jointly   Married filing separately   Widowed		roreign Nation, ii			
Step 2:     Federal adjusted gross income from your U.S. 1040, Line 37; U.S. 1040A, Line 21; or U.S. 1040EZ, Line 4   1   593,481, 00   2   24,871, 00   3   3   3   0   0   4   618,352, 00   3   0   618,352, 00   3   0   618,352, 00   3   0   618,352, 00   4   618,352, 00   618,3				filing separately	
Step 2:   1				a	
Technic and part   Peter and part   September   Sept	, .			Atthole dellars	only
Pederally tax-exempt interest and dividend income from your U.S. 1040 or 1040A, Line &b. or U.S. 1040EZ   24,871.00   3 0ther additions. Attach Schedule M.   3 000   4 0ther additions. Attach Schedule M.   4 0ther additions. Attach Schedule M.   5 000		Step 2:		EIIC 21, 01	•
Line 8b; or U.S. 1040EZ   2 24,871, 00   3   0   0   0   0   0   0   0   0	į	Income		r 1040A.	
Step 3:   Social Security benefits and certain retirement plan income received if included in Line 1. Attach page 1 of 5   0.0	,			2 24,8	71.00
Step 3: 5   Social Security benefits and certain retirement plan income received if included in Line 1. Attach page 1 of 5   0.0	:		3 Other additions. Attach Schedule M.	3	00
Base	٧		4 Total income. Add Lines 1 through 3.	4 618,3	52.00
Base	٠.	Cton 2	F. Social Security benefits and certain retirement plan income		
Illinois Income Tax overpayment included in U.S. 1040, Line 10	a.	•	received if included in Line 1. Attach ipage 1 of	ÓΩ	
U.S. 1040, Line 10	•		lederat return.	<u>00</u>	
7 Other subtractions. Attach Schedule M. Check if Line 7 includes any amount from Schedule 1299-C   8 Add Lines 5, 6, and 7. This is the total of your subtractions.   8   00	Į.	income		00	
Check if Line 7 includes any amount from Schedule 1299-C	-				
Step 4:				<del>.</del>	
Step 4:   10 a Number of exemptions from your federal return   2 x \$2,100   a   4,200.00	2			8	00
Exemptions    b   f   someone can claim you as a dependent, see instructions.   x   \$2,100   b   00	Ņ		9 Illinois base income, Subtract Line 8 from Line 4.	9 618,3	52.00
Exemptions    b   f   someone can claim you as a dependent, see instructions.   x   \$2,100   b   00		Stan 1:	10 a Number of exemptions from your federal return 2 X \$2 100 a	4 200 00	
Click if 65 or older:   You +   Spouse   X \$1,000 c   00	•			4,200.00	
Step 5:   11   Residents: Net income. Subtract Line 10 from Line 9. Skip Line 12.   11   614,152.00	È	Exemptions	dependent, see instructions. X \$2,100 b	00	
Exemption allowance. Add Lines a through d.   10   4,200.00	L.		c Check if 65 or older: $Y_{0u} + S_{0u} = x $1,000 c$	00	
Exemption allowance. Add Lines a through d.   10   4,200.00			d Check if legally blind: $Y_{0u} + $ Spouse = $\times$ \$1,000 d	00	
Step 5:				10 4,20	00.00
Net   Income   12   Nonresidents and part-year residents:   Check the box that applies to you during 2013   Nonresident   Part-year resident, and enter the Illinois   base income from Schedule NR. Attach Schedule NR.   12   00      Step 6: Tax   13   Residents: Multiply Line 11 by 5% (.05). Cannot be less than zero.   Nonresidents and part-year residents: Enter the tax from Schedule NR.   13   30,708.00     14   Recapture of investment tax credits. Attach Schedule 4255.   14   00     15   Income tax. Add Lines 13 and 14. Cannot be less than zero.   15   30,708.00     Step 7: Tax After   Non-refundable Credits   16   Non-refundable Credits   17   Aftach Schedule CR.   18   00     18   Credit amount from Schedule 1299-C. Attach Schedule 1299-C.   18   00     19   Add Lines 16, 17, and 18. This is the total of your credits.   Cannot exceed the tax amount on Line 15.   19   475.00	•	Step 5:	11 Residents: Net Income. Subtract Line 10 from Line 9. Skip Line 12.		
Check the box that applies to you during 2013 Nonresident base income from Schedule NR. Attach Schedule NR. 12 00  Step 6: Tax		•			
Step 6: 13 Residents: Multiply Line 11 by 5% (.05). Cannot be less than zero. Nonresidents and part-year residents: Enter the tax from Schedule NR. 13 30,708.00  14 Recapture of investment tax credits. Attach Schedule 4255. 14 00  15 Income tax. Add Lines 13 and 14. Cannot be less than zero. 15 30,708.00  Step 7: Tax After Non-refundable Credits Attach Schedule ICR. Attach Schedule ICR. 17 475.00  18 Credit amount from Schedule ICR. Attach Schedule ICR. 17 475.00  Add Lines 16, 17, and 18. This is the total of your credits. Cannot exceed the tax amount on Line 15. 19 475.00	•			t-year resident, and enter the Illino	is
Step 6: Tax    13   Residents: Multiply Line 11 by 5% (.05). Cannot be less than zero.   Nonresidents and part-year residents: Enter the tax from Schedule NR.   13   30,708.00     14   Recapture of investment tax credits. Attach Schedule 4255.   14   00     15   Income tax. Add Lines 13 and 14. Cannot be less than zero.   15   30,708.00     Step 7: Tax After Non-refundable Credits   16   00     17   Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR.   17   475.00     18   Credit amount from Schedule 1299-C. Attach Schedule 1299-C.   18   00     19   Add Lines 16, 17, and 18. This is the total of your credits.   Cannot exceed the tax amount on Line 15.   19   475.00	•	meome		•	
Nonresidents and part-year residents: Enter the tax from Schedule NR.		<b>C</b> 1 C		<del></del>	
14 Recapture of investment tax credits. Attach Schedule 4255. 15 Income tax. Add Lines 13 and 14. Cannot be less than zero.  16 Income tax paid to another state while an Illinois resident. Attach Schedule CR.  17 Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR.  18 Credit amount from Schedule ICR. Attach Schedule ICR.  19 Add Lines 16, 17, and 18. This is the total of your credits. Cannot exceed the tax amount on Line 15.	•	•		13 30 70	na an
Step 7: Tax After Non-refundable Credits  15 Income tax. Add Lines 13 and 14. Cannot be less than zero.  16 Income tax paid to another state while an Illinois resident. Attach Schedule CR.  16 Income tax paid to another state while an Illinois resident. Attach Schedule CR.  17 Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR.  18 Credit amount from Schedule I299-C. Attach Schedule I299-C.  18 Oo  19 Add Lines 16, 17, and 18. This is the total of your credits. Cannot exceed the tax amount on Line 15.  19 475.00	7	Tax	- · ·		
Step 7: Tax After Non- refundable Credits  16 Income tax paid to another state while an Illinois resident. Attach Schedule CR. Attach Schedule CR. Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR. 17 475.00 Credit amount from Schedule 1299-C. Attach Schedule 1299-C. 18 Credit amount from Schedule 1299-C. Attach Schedule 1299-C. 19 475.00	ŧ		·		<del></del>
Tax After Non- refundable Credits  Attach Schedule CR.  Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR.  17 Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR.  18 Credit amount from Schedule I299-C. Attach Schedule 1299-C.  18 00  Add Lines 16, 17, and 18. This is the total of your credits. Cannot exceed the tax amount on Line 15.				10	00.00
Non-refundable Credits  17 Property tax and K-12 education expense credit amount from Schedule ICR. Attach Schedule ICR. 17 475.00  18 Credit amount from Schedule I299-C. Attach Schedule I299-C. 18 00  19 Add Lines 16, 17, and 18. This is the total of your credits. Cannot exceed the tax amount on Line 15.		•		nn	
refundable Credits  from Schedule ICR. Attach Schedule ICR.  17 475.00  18 Credit amount from Schedule 1299-C. Attach Schedule 1299-C.  18 O0  Add Lines 16, 17, and 18. This is the total of your credits.  Cannot exceed the tax amount on Line 15.  19 475.00				00_	
Tertundable Credits  18 Credit amount from Schedule 1299-C. Attach Schedule 1299-C.  18 00  Add Lines 16, 17, and 18. This is the total of your credits.  Cannot exceed the tax amount on Line 15.  19 475.00				475.00	
Credits  19 Add Lines 16, 17, and 18. This is the total of your credits.  Cannot exceed the tax amount on Line 15.  19 475.00				<del></del>	
Cannot exceed the tax amount on Line 15. 19 475.00		Credits		······································	
20 Tax after nonrefundable credits. Subtract Line 19 from Line 15. 20 30, 233. 00	l I			· · · · · · · · · · · · · · · · · · ·	
	,		20 Tax after nonrefundable credits. Subtract Line 19 from Line 15.	20 30,2	33.00

ILIA0112L 12/19/13

This form is authorized as outlined under the Illinois Income Tax Act. Disclosure of this information is required. Failure to provide information could result in a penalty.



JAMES W TRACY	Page 2 of 2
21 Tax after nonrefundable credits from page 1, Line 20 21 30,233.00	
Step 8: 22 Household employment tax. See instructions. 22 00	
Other 23 Use tax on internet, mail order, or other out-of-state purchases from UT  Taxes Use tax on internet, mail order, or other out-of-state purchases from UT  Worksheet or UT Table in the instructions. Do not leave blank. 23 0.00	
Taxes Worksheet or UT Table in the instructions. Do not leave blank. 23 0.00  24 Total Tax. Add Lines 21, 22, and 23. 24	30,233.00
Step 9: 25 Illinois Income Tax withheld. Attach W-2 and 1099 forms. 25 19,414.00	
Payments and 26 Estimated payments from Forms IL-1040-ES and IL-505-I.	
Refundable including overpayment applied from 2012 return 26 3,000.00	
28 Earned Income Credit from Schedule ICR. Attach Schedule ICR. 28 00	
29 Total payments and refundable credit. Add Lines 25 through 28.	24,414.00
Step 10: 30 Overpayment. If Line 29 is greater than Line 24, subtract Line 24 from Line 29. 30	00
Result 31 Underpayment. If Line 24 is greater than Line 29, subtract Line 29 from Line 24. 31	5,819.00
Step 11: 32 Late payment penalty for underpayment of estimated tax. 32 655.00	
underpayment a Check if at least two-thirds of your federal gross income is from farming.  h Check if you or your spouse are 65 or older and permanently living in a	
Tax Penalty  b Check if you or your spouse are 65 or older and permanently living in a nursing home.	
and Donations 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.	
<ul> <li>33 Voluntary charitable donations. Attach Schedule G.</li> <li>33 00</li> <li>34 Total penalty and donations. Add Lines 32 and 33.</li> <li>34</li> </ul>	655.00
Step 12: 35 If you have an overpayment on Line 30 and this amount is greater than Line 34, subtract	
Refund or Line 34 from Line 30. This is your remaining overpayment.	00
Amount You  36 Amount from Line 35 you want refunded to you. Check one box on Line 37. See instructions.  36	00
Owe 37 I choose to receive my refund by	
direct deposit - Complete the information below if you checked this box.	
Routing number Checking or Savings	
Account number	
Illinois Individual Income Tax refund debit card	
paper check	
38 Subtract Line 36 from Line 35. This amount will be applied to your 2014 estimated tax. 38	00
39 If you have an underpayment on Line 31, add Lines 31 and 34, or If you have an overpayment on Line 30 and this amount is less than Line 34, subtract Line 30 from	
Line 34. This is the <b>amount you owe</b> . See instructions.	6,474.00
Step 13: 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 and a state of the penalties of perjury, I state that I have examined this return, and, to the best of my knowledge, it is true, correct, and complete and a state of penalties of penjury, I state that I have examined this return, and, to the best of my knowledge, it is true, correct, and complete and a state of penjury.	lete.
Sign and Date  Dat	Date
CONFIDE A MARCS OC LOTON 4 (217) 222-0304 36-3077757	
Pad proparer's signature Date Preparer's phone number Preparer's FEIN, SSN, or PTIN  GRAY HUNTER STENN LLP 500 MAINE STREET QUINCY, IL 62301	
Third Party X Check, and complete below, to allow another person to discuss this return with the Illinois Department of F	Dovonus
Designee   [A] Check, and complete below, to allow another person to discuss this return with the filmois Department of P	revenue.
LOWELL A. YATES, C.P.A. 217-222-0304	
Designee's Name (please print)  Designee's Phone number	
Form 1099-G Information  We are no longer automatically mailing 1099-G forms. Instead, we ask that you get this information from confidence in the criteria requiring us to issue a Figure 1099-G next year, if you meet the criteria requiring us to issue a Figure 1099-G next year, if you meet the criteria requiring us to issue a Figure 1099-G next year.	
ILLINOIS DEPARTMENT OF REVENUE  ILLINOIS DEPARTMENT OF REVENUE  ILLINOIS DEPARTMENT OF REVENUE	VENIE
PO BOX 1040 SPRINGFIELD IL 62726-0001	T SEPT VIN
TO THE PERSON OF	