

2018 Form 1

MA18001011555

Massachusetts Resident Income Tax Return

FOR FULL YEAR RESIDENTS ONLY

For the year January 1–December 31, 2018 or other taxable

Year beginning

Ending

PRASHANTH

SANKEPALLI

827399026

SHILPA

DEEKSHITH

199930695

297 TURNPIKE ROAD

WESTBOROUGH

MA 01581

Fill in if: Original return Amended return Amended return due to federal change

Apt. no. 603

State Election Campaign Fund:

\$1 You \$1 Spouse TOTAL 0

Fill in if veteran of U.S. armed forces who served in Operations Enduring Freedom, Iraqi Freedom, Noble Eagle or Sinai Peninsula

You Spouse

Taxpayer deceased

You Spouse

Fill in if under age 18

You Spouse

a. Total federal income 112030

b. Federal adjusted gross income 112030

Name/address changed since 2017

Fill in if noncustodial parent

Fill in if filing Schedule TDS

1. Filing status (select one only):

Single

Married filing jointly

Married filing separate return

Head of household

You are a custodial parent who has released claim to exemption for child(ren)

2. Exemptions

a. Personal exemptions

2a 8800

b. Number of dependents. (Do not include yourself or your spouse.) Enter number 1

× \$1,000 = 2b 1000

c. Age 65 or over before 2019 You + Spouse =

× \$700 = 2c 0

d. Blindness You + Spouse =

× \$2,200 = 2d 0

e. Medical/dental

2e 0

f. Adoption

2f 0

g. Total exemptions. Add lines 2a through 2f. Enter here and on line 18

2g 9800

SIGN HERE. Under penalties of perjury, I declare that to the best of my knowledge and belief this return and enclosures are true, correct and complete.

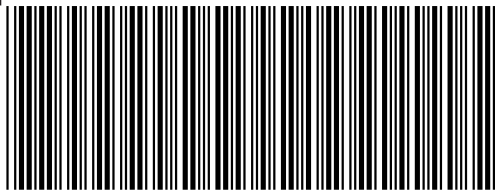
Your signature

Date

Spouse's signature

Date

PRIVACY ACT NOTICE AVAILABLE UPON REQUEST



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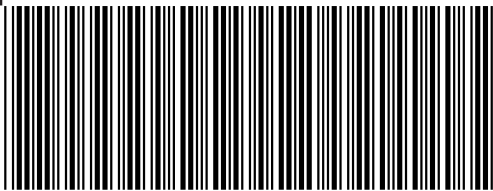
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3.	Wages, salaries, tips		3	121028
4.	Taxable pensions and annuities		4	0
5.	Mass. bank interest: a.	0 - b. exemption 0	= 5	0
6a.	Business/profession income/loss		6a	0
6b.	Farming income/loss		6b	0
7.	Rental, royalty and REMIC, partnership, S corp., trust income/loss		7	-9000
8a.	Unemployment		8a	0
8b.	Mass. lottery winnings		8b	0
9.	Other income from Schedule X, line 5		9	0
10.	TOTAL 5.1% INCOME		10	112028
11a.	Amount paid to Soc. Sec. Medicare, R.R., U.S. or Mass. Retirement		11a	2000
11b.	Amount your spouse paid to Soc. Sec., Medicare, R.R., U.S. or Mass. Retirement		11b	0
12.	Child under age 13, or disabled dependent/spouse care expenses		12	0
13.	Number of dependent member(s) of household under age 12, or dependents age 65 or over (not you or your spouse) as of 12/31/18, or disabled dependent(s)			
	Not more than two. a.	1	× \$3,600 = 13	3600
14.	Rental deduction. a.	0	+ 2 = 14	0
15.	Other deductions from Schedule Y, line 19		15	0
16.	Total deductions. Add lines 11 through 15		16	5600
17.	5.1% INCOME AFTER DEDUCTIONS. Subtract line 16 from line 10. Not less than "0"		17	106428
18.	Exemption amount		18	9800
19.	5.1% INCOME AFTER EXEMPTIONS. Subtract line 18 from line 17. Not less than "0"		19	96628
20.	INTEREST AND DIVIDEND INCOME		20	0
21.	TOTAL TAXABLE 5.1% INCOME. Add lines 19 and 20		21	96628

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22. TAX ON 5.1% INCOME. Note: If choosing the optional 5.85% tax rate, fill in and multiply line 21 and the amount in Schedule D, line 21 by .0585	22	4928
23. 12% INCOME. Not less than "0." a. 2	23	0
	$\times .12 =$	24
24. TAX ON LONG-TERM CAPITAL GAINS. Not less than "0." Fill in if filing Schedule D-IS Fill in if any excess exemptions were used in calculating lines 20, 23 or 24	24	0
25. Credit recapture amount (from Credit Recapture Schedule)	25	0
26. Additional tax on installment sale	26	0
27. If you qualify for No Tax Status, fill in and enter "0" on line 28		
28. TOTAL INCOME TAX. Add lines 22 through 26	28	4928
29. Limited Income Credit	29	0
30. Income tax due to another state or jurisdiction	30	0
31. Other credits from Credit Manager Schedule	31	0
32. INCOME TAX AFTER CREDITS. Subtract the total of lines 29 through 31 from line 28. Not less than "0"	32	4928
33. Voluntary Contributions		
a. Endangered Wildlife Conservation	33a	0
b. Organ Transplant Fund	33b	0
c. Massachusetts AIDS Fund	33c	0
d. Massachusetts U.S. Olympic Fund	33d	0
e. Massachusetts Military Family Relief Fund	33e	0
f. Homeless Animal Prevention and Care	33f	0
Total. Add lines 33a through 33f	33	0
34. Use tax due on Internet, mail order and other out-of-state purchases	34	0
35. Health care penalty a. You 0 + b. Spouse 0 - c. Fed. health care penalty 0	35	0
36. Amended return only. Overpayment from original return	36	0
37. INCOME TAX AFTER CREDITS PLUS CONTRIBUTIONS AND USE TAX. Add lines 32 through 36	37	4928

