MNINST	Filing Instructions	2017
Name(s) as shown on return		SSN or EIN
KARTHIKEYAN	RAJAGOPALAN & NITHYA KANNAN	834-57-5932

**Date to file by:** 04-17-2018

Form to be filed: MN1 and supplemental forms and schedules

Sign and Date: Sign and date your return. On a jointly filed return

both spouses must sign.

**Refund:** \$566.00

Address to file: Minnesota Individual Income Tax

Mail Station 0010

St. Paul, MN 55145-0010

Transaction Method: The refund will be directly deposited into your

checking account at Bank Of America ending in 5040.

Other Instructions: Do not attach your Forms W-2 or 1099.





# 2017 Form M1, Individual Income Tax

Leave unused boxes blank. Do not use staples on anything you submit.

	First Name and Initial	Last Name						Your Socia		•
KA.	RTHIKEYAN	RAJAGOPALAN						83457	5932	
	bint Return, Spouse's First Name and Initia $\Gamma \mathrm{HYA}$	I Spouse's Last Name KANNAN						<b>Spouse's</b> 94392		curity Number
	ent Home Address		Check it	: New A	ddress	Foreig	n Address	Your Date		_
	5 E GRANT ST APT 709							07011		
City MT	NNEAPOLIS		State MN	<b>Zip C</b> o				Spouse's 0 2 0 9 1		irth
	NINEAT OLID		1,117	3310				02091	- 900	
	Federal (4) Single	7 (O) Manufact (II) and a fact	d		7 (0) 14-			. t. t.		
	Status (1) Single	X (2) Married filing join	tiy				iling separa	ately: and Social S	Security n	umber
	e an X e box): (4) Head of household	(5) Qualifying widow	(er)		LIII	iei spo	use name a	and Social C	eculity II	ambei
		(0) 444411,119	(/							
	Elections Campaign Fund	Political party and code num	her:							
	want \$5 to go to help candidates for state pay campaign expenses, enter the code	Republican		galize Can	nabis 14	Legal	Marijuana Nov	v 17	Yo	our code
	er for the party of your choice. This will crease your tax or reduce your refund.	Democratic/Farmer-Labor 12 Independence 13	Green		15	Gene	ral Campaign	99		se code
HOL III	nease your tax or reduce your return.		•		• • • •			"	opou.	
		aries, tips, etc. <b>B</b> IRA, pen 952	sions, and a	nnuities	CU	nemplo	yment	<b>D</b> Federal a		oss income 952
(300								▲ Place an	X in box	if a negative numb
1	Federal taxable income (from line 43	of federal Form 1040,								45100
	line 27 of Form 1040A, or line 6 of Form	n 1040EZ) (if a negative nur	nber, place	an X in	the box	· ·		1■		47102
2	State income tax or sales tax additio					,				
	on federal Form 1040, complete the wor	ksheet in the instructions						2■_		
3	Other additions to income, including disa									
	bond interest, and domestic production	activities deduction (see ins	structions;	enclose	Schedu	le M1N	1)	3 <u>■</u> _		
								4	T	47102
4	Add lines 1 through 3 (if a negative num	nber, place an X in the box)			• • •			· · · • <u>-</u>	ı	
5	State income tax refund from line 10 of f	adoral Form 1040						5=		
6	Other subtractions, such as net interest							•		
Ū	retirement pay, or K-12 education expe							6■_		
	Touroniem pay, or it is caucation expo	need (eed men deneme, enem	300 00770		,					
7	Total subtractions. Add lines 5 and 6 •							7 _		
										47102
8	Minnesota taxable income. Subtract I	ine 7 from line 4. If zero or le	ess, leave	blank ·				8_		<del>1</del> /102
								_		2693
9	Tax from the table in the M1 instruction	s · · · · · · · · · · · ·		• • • •	• • • •			9_		
10	Alternative minimum tax (enclose Sche	dulo M1MT)						10 =		
10	Alternative minimum tax (enclose Sche	uule IVI IIVI I J			• • •					_
11	Add lines 9 and 10							11		2693
12	Full-year residents: Enter the amount from I									
	Part-year residents and nonresidents: From	m Schedule M1NR, enter the am	nount from li	ne 27 on						0.600
	line 12, from line 23 on line 12a, and from line	e 24 on line 12b (enclose Sched	ule M1NR) .					12 _		2693
	-	I								
	a■ b■	(								
13	Tax on lump-sum distribution (enclose	Schedule M1LS) · · · ·						· · 13 ■_		

## 2017 M1, page 2



14	Tax on non-qualified first-time homebuyer withdra	wals (enclose Schedule N	И1НОМЕ)	14	
45	Tarchafan and the Add the a 40,40 and 44			15	2693
15 16	Tax before credits. Add lines 12, 13, and 14  Marriage Credit for joint return when both spouses			13	
10	or taxable retirement income (enclose Schedule N			16 ■	
17	Credit for taxes paid to another state (enclose Sch	nedule(s) M1CR and M1R	CR)	17 🔳	
				_	
18	Other nonrefundable credits (enclose Schedule M	11C)	• • • • • • • • • • • • • • • • • • • •	18 ■	
19	Total nonrefundable credits. Add lines 16, 17, and	18		19	
	Total Horizontalists of Califo. Nati lines 10, 17, and				
20	Subtract line 19 from line 15 (if result is zero or les	ss, leave blank)		20	2693
21	Nongame Wildlife Fund contribution (see instruction				
	This will reduce your refund or increase the amoun	t you owe		21 💻	
					2693
22	Add lines 20 and 21 · · · · · · · · · · · · · · · · · ·			22	
23	Minnesota income tax withheld. Complete and e			23 ■	3259
	Minnesota withholding from W-2, 1099, and W-2G	forms (ao not sena) •		23 \blacksquare	
24	Minnesota estimated tax and extension payments m	nade for 2017 · · · ·		24 ■	
25	Refundable credits (enclose Schedule M1REF): C		Credit, Working Family Credit,		
	K-12 Education Credit, Credit for Parents of Stillbor	rn Children, and Credit for	Tax Paid to Wisconsin	25 🔳	
26	Business and investment credits (enclose Schede	ule M1B)		26 ■	
27	Total payments. Add lines 23 through 26			27	3259
28	<b>REFUND.</b> If line 27 is more than line 22, subtract				
	For direct deposit, complete line 29			28 ■	566
29	Direct deposit of your refund (you must use an ac	count not associated with	a foreign bank):		
	Account Type Routing Numb	er	Account Number		
	X Checking Savings 0212003	<del>39</del> -	381035165040		
30	<b>AMOUNT YOU OWE.</b> If line 22 is more than line line 27 from line 22 (see instructions)	·		30 ■	
31	Penalty amount from Schedule M15 (see instruction				
•	this amount from line 28 or add it to line 30 <i>(enclo</i>	,		31 🔳	
IF YC	U PAY ESTIMATED TAXand want part of your refund cre	dited to estimated tax, comple	ete lines 32 and 33.		
32	Amount from line 28 you want sent to you			32 🔳	
	A			22 —	
33	Amount from line 28 you want applied to your 2018	estimated tax		33 🔳	
l decla	re that this return is correct and complete to the best of m	v knowledge and belief.	Paid preparer: You must sign below.		
	ignature	Date	Paid preparer's signature	Date	2 05 0010
		02-05-2018			2-05-2018
Spous	e's signature (if filing jointly)	Taxpayer's daytime phone 2019200240	Preparer's daytime phone 703)5845533		or VITA/TCE <b># (required)</b>
Your (	mail address	2017200210	Preparer's email address		
	ARTHYKN1784@GMAIL.COM		i roparor o oman address		
Inclu	le a copy of your 2017 federal return and schedu	ıles.			
Mail t		X	I authorize the Minnesota Department of Reve	nue to	I do not want my paid
	St. Paul, MN 55145-0010		discuss this return with my paid preparer or th	ı	preparer to file my
To ch	eck on the status of your refund, visit www.revenu	ue.state.mn.us	third-party designee indicated on my federal r	eturn.	return electronically.





### 2017 Schedule M1W, Minnesota IncomeTax Withheld

Complete this schedule to report Minnesota income tax withheld. Include this schedule when you file your return.

Your First Name and Initial		Last Name		Your Social S	Your Social Security Number			
KARTHIKEYAN		RAJAGOPA	LAN	8345759	834575932			
If a Joint Return, Spouse's	First Name and Initial	Spouse's Last Nan			Spouse's Social Security Number			
NITHYA		KANNAN		943927	943927597			
If you received a W-2, 1099, W-2G, Schedule KR determine line 23 of Form M1. List only the forms dollar. You must include this schedule when you records. All instructions are included on this sche 1 Minnesota wages and tax withheld from W-2s A B-Box 13  If the W-2 is for: If Retirement Plan box is checked  • you, enter 1 box is checked  • spouse, enter 2 mark an X below.		KPI, KS, or KF that slas that report Minnes ou file your return. Intedule. 2s, other than from W. C-Box 15 Employer's 7-digit W. state tax ID number	ota income tax with DO NOT send in your send in your send in you have relinnesota	thheld. Round dollar amount our W-2, 1099, or W-2G for	blete this schedule s to the nearest who ms; keep them with e line 5 on the back E-Box 17 Minnesota to	nis schedule to e nearest whole eep them with your tax 5 on the back.		
	al W-2s (from line 5 of	MN MN or the back)						
Total Minnesota tax	withheld from all W	-2 forms (add amou	unts in line 1, colu	mn E)	1■	3259		
<ul> <li>Minnesota tax withhele</li> <li>A</li> <li>If the 1099 or W-2G is feegure.</li> <li>you, enter 1</li> <li>spouse, enter 2</li> </ul>		G forms. If you have  B  Payer's 7-digit Minn- number (if unknown	esota state tax ID	ms, complete line 6 on the back for amounts to include	<b>D</b> on Minnesot	a tax withheld nearest whole dollar)		
— — —		MN MN MN						
				n line 2, column D) · · · ·	2■			
3 Total Minnesota tax  (from line 7 on the ba				s 	. 3■			
4 Total. Add the Minne	esota tax withheld on l	ines 1, 2 and 3.				3259		

Include this schedule with your Form M1. If required, include Schedules KPI, KS, and/or KF.

#### MNEF ACK

#### Acknowledgement and General Information for Taxpayers Who File Returns Electronically

2017

Name(s) as shown on return

KARTHIKEYAN RAJAGOPALAN & NITHYA KANNAN

Identification Number

\*\*\*-\*\*-5932

Address

515 E GRANT ST APT 709 MINNEAPOLIS, MN 55404

Thank you for participating in IRS e-file.

- 1. X Your 2017 state income tax return for MN1 was filed electronically.

  The electronic filing services were provided by ADVANTAGE ONE TAX CONSULTING INC
- 2. X Your return was accepted on 01-30-2018 using a Personal Identification Number (PIN) as your electronic signature. You entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN for you.

The submission ID assigned to this return is 54089320180305 dvexma

PLEASE DO NOT SEND A PAPER COPY OF THE TAX RETURN TO THE STATE. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.