

Massachusetts Department of Revenue Form M-2210

Underpayment of Massachusetts Estimated Income Tax

2018

	ne(s) as shown	on page 1 of return O`CHARA		Social S	Security or Federal Identification	
_		C CITTAIN			UTO O ACT	
Ex	ceptions t	o the underpayment penalty	,			
-	-	lified farmer or fisherman filing and pay		e on or before March 1, 20	019.	
O,	You were a re	sident of Massachusetts for 12 months	and not liable for taxes	during 2017.		
O	Your estimated	d payments and withholding equal or e	xceed your 2017 tax (w	here taxable year was 12	months and a return wa	s filed).
n	ald Bassa					
		ired annual payment	20. Fame 214 line 0:	Farm MANDOD Bas 00)		30000
1	2018 tax (irc	om Form 1, line 28; Form 1-NR/PY, line	32; Form 3M, line 9; or	Form MAINRCH, line 23)	' · · · · · · · · · · · · · · · · · · ·	
2	Total credits	(from Form 1, lines 29 through 31 and	42 through 44; Form 1-1	NR/PY, lines 33 through 35	and 46 through 48) 2	10000
3	Balance, Su	btract line 2 from line 1. Not less than "	0"			20000
4	Enter 80% o	of line 3 or 66.67% of line 3 if you are a	qualified farmer or fishe	erman		16000
5	Enter 2017 t	ax liability after credits (from 2017 retu	rn) (see instructions)			6000
6	Enter the sm	naller of line 4 or line 5		120		6000
				C	0	
Pai	rt 2. Figuri	ing your underpayment				
	_	mount in line 6 by the number of		Installment		
		required for the year. Enter the	a. April 18, 2018		c. September 17, 2018	
	result in the	appropriate columns	1.500	1500	1500	1500
8	Estimated ta	xes paid and taxes withheld for	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	S O		
		nent 8 [118	«/» 118	118	118
9	Overpaymer	nt of previous installment	9			
	Total. Add lir	one 9 and 0	Y 11 0%	118	118	/18
10			(() () () () () () () () () (710	// /	
11	Overpaymer	nt. Subtract line 7 from line 10 11				
12	Underpayme	nt. Subtract line 10 from line 712	× 1382	1382	1382	1382
		9 0				
		M.	<i>"</i> .			
		V.				



Name(s) as shown on page 1 of return OCHARA ZEE

Social Security or Federal Identification number 401082010

Part 3. Figuring your underpayment penalty

		- ,			
13	Enter the date you paid the amount in line 12				
	or the 15th day of the fourth month after the close of the taxable year, whichever is earlier 13	04152019	104152019	04152019	04152019
14	Number of days from the due date of installment to the date shown in line 1314	362	304	210	90
15	Number of days in line 14 after 4/18/18 and				
	before 7/1/18	74	16		
	Number of days in line 14 after 6/30/18 and before 10/1/18	93	93	14	
17	Number of days in line 14 after 9/30/18 and before 1/1/19	93	23	93	14
18	Number of days in line 14 after 12/31/18 and before 4/15/19	105	105	105	90
19	Underpayment in line 12 × (number of days in line 15 ÷ 365) × 6%	17	4		
20	Underpayment in line 12 × (number of days in	• /			
	line 16 ÷ 365) × 6%	21	21	3	
21	Underpayment in line 12 × (number of days in			<u></u>	
	line 17 ÷ 365) × 6%	a/	<u>a</u> /. ∘	ai	3
22	Underpayment in line 12 × (number of days in line 18 ÷ 365) × *	24	ân	24	20
23	Penalty. Add all amounts shown in lines 19 through 2		n Form 1, line 50; Form 1	NR/PY, line 54;	53.7
	or Form 3M, line 19a		· · · · · · · · · · · · · · · · · · ·	23 L	वे वे प



Name(s) as shown on page 1 of return

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Social Security or Federal Identification number 4010 82 010

Pal	rt 4. Annualized income installment ก	nethod Jan. 1 – March 31	Jan. 1-May 31	Jan. 1-August 31	Jan. 1-December 31
1	Taxable 5.1% income each period (including long-term capital gain income taxed at 5.1%)1	147059	147059	147 <i>05</i> 9	147059
2	Annualization amount2	4	2.4	1.5	1
3	Multiply line 1 by line 23	588236	352942	220589	147059
4	Tax on amount in line 3. Multiply line 3 by .051 4	30000	18000	11250	7500
5	Taxable 12% income each period				
6	Annualization amount6	4	2.4	1.5	1
7	Multiply line 5 by line 6				
8	Tax on amount in line 7. Multiply line 7 by .12 8				
9	Total tax. Add lines 4 and 8 9	30000	18000	11250	7500
10	Total credits				
		0.0			
•	line 911	30000	18000	11250	7500
12	Applicable percentage12	20%	40% //	60%	80%
13	Multiply line 11 by line 12 13	6000	7200	6750	6 000
14	Enter the combined amounts of line 20 from	lo o as			
	all preceding periods	14	1500	3000	4500
15	Subtract line 14 from line 13. If less than "0" enter "0"	6000	12×5700	3750	1500
46	Divide line 6 of Form M-2210 by 4 and enter	7 5		3700	
10	result in each column	1500	1500	1500	15,00
17	Enter the amount from line 19 of this worksheet for	r the preceding			
	column.	17			
18	Add lines 16 and 17.	(1500)	1500	1500	1500
10	If line 18 is more than line 15, subtract line 15 from line 18. Otherwise enter "0"				
19	Trom line to, Otherwise enter U				
20	Enter the smaller of line 15 or line 18 here	1500	1500		