

Department of the Treasury-Internal Revenue Service

Amended U.S. Individual Income Tax Return

			uine		1.		
		2017 2016					
		rear (month and year e	endec	l):	T		
Your fire	st name and middle initial	Last name			Your social security number		
	HIL KUMAR REDDY	MARAM			663-5		
lf joint r	eturn, spouse's first name and middle initial	Last name			Spouse's s	ocial see	curity number
				1			
	home address (number and street). If you have a P.O. box, see instru-	uctions.		Apt. no.	Your phone		
	8 MAYFAIR ST,UNIT B				(913)	636-2	2012
	wn or post office, state, and ZIP code. If you have a foreign address,	also complete spaces belo	w. See	instructions.			
	LEWOOD CO 80112						
Foreign	country name	Foreign province/stat	e/coun	ty	Fore	ign posta	ll code
	ded return filing status. You must check one box ev			Full-year health			
	ing your filing status. Caution: In general, you can't c			18 returns only			nending a 2019
	from a joint return to separate returns after the due d			urn, leave blank.			
	gle 🗌 Married filing jointly 🗌 Married filing separ						
	checked the MFS box, enter the name of spouse. If	you checked the HO	H or	QW box, enter	the child's	name	if the qualifying
perso	n is a child but not your dependent.			1	1		
	Use Part III on the back to explain any	changes		A. Original amount reported or as	B. Net cha amount of in		C. Correct
		0		previously adjusted	or (decrea	ise)-	amount
	ne and Deductions			(see instructions)	explain in	Part III	
1	Adjusted gross income. If a net operating loss						
-	included, check here		1	83,843.	11,	800.	95,643.
2	Itemized deductions or standard deduction		2	12,400.		0.	12,400.
3	Subtract line 2 from line 1		3	71,443.	11,	800.	83,243.
4a	Exemptions (amended 2017 or earlier returns of						
	complete Part I on page 2 and enter the amount from		4a				
b	Qualified business income deduction (amended 2018	• /	4b	0.		0.	0.
5	Taxable income. Subtract line 4a or 4b from line 3.		_				
	or less, enter -0		5	71,443.	11,	800.	83,243.
	iability				-		
6	Tax. Enter method(s) used to figure tax (see instruction	ions):					
_	Table		6	11,504.	2,	596.	14,100.
7	Credits. If a general business credit carryback is includ		7	0.		0.	0.
8	Subtract line 7 from line 6. If the result is zero or less		8	11,504.	2,	596.	14,100.
9	Health care: individual responsibility (amended 201						
10	only). See instructions		9	0.		0.	
10			10	0.		0.	0.
11	Total tax. Add lines 8, 9, and 10		11	11,504.	2,	596.	14,100.
Paym							
12	Federal income tax withheld and excess social secu		10	12.000	1	110	1 5 400
10	tax withheld. (If changing, see instructions.)		12	13,968.	⊥,·	440.	15,408.
13	Estimated tax payments, including amount applied fro		13	0.		0.	0.
14 15	Earned income credit (EIC)		14	0.		0.	0.
15	Refundable credits from: Schedule 8812 Form(s)		45			1.60	1.60
10	□ 8863 □ 8885 □ 8962 or □ other (specify):		15	0.		168.	168.
16	Total amount paid with request for extension of tim					16	0
17	tax paid after return was filed					16	0.
17 Dofu	Total payments. Add lines 12 through 15, column C, nd or Amount You Owe					17	15,576.
		aa arayiayahy adiyata				10	2 200
18 19	Overpayment, if any, as shown on original return or a					18 19	3,380.
19 20	Subtract line 18 from line 17. (If less than zero, see in Amount you owe. If line 11, column C, is more than	-					12,196.
20 21	If line 11, column C, is less than line 19, enter the dif					20 21	1,904.
21	Amount of line 21 you want refunded to you					21	
22 23	Amount of line 21 you want refunded to you Amount of line 21 you want applied to your (enter ye			1 1		22	0.
23	Amount of the 21 you want applied to your tenter ye	estin	aled	ιαλ 20			

Part I **Exemptions and Dependents**

Complete this part only if any information relating to exemptions (to dependents if amending your 2018 or later return) has changed from what you reported on the return you are amending. This would include a change in the number of exemptions (of dependents if amending your 2018 or later return).

CAUTION	For amended 2018 or later returns only, leave lines 24, 28, and 29 blank. Fill in all other applicable lines. Note: See the Forms 1040 and 1040-SR, or Form 1040A, instructions for the tax year being amended. See also the Form 1040-X instructions.		A. Original number of exemptions or amount reported or as previously adjusted	B. Net change	C. Correct number or amount
24	Yourself and spouse. Caution: If someone can claim you as a dependent, you can't claim an exemption for yourself. If amending your 2018 or later return, leave line blank	24			
25	Your dependent children who lived with you	25			
26	Your dependent children who didn't live with you due to divorce or separation	26			
27	Other dependents	27			
28	Total number of exemptions. Add lines 24 through 27. If amending your 2018 or later return, leave line blank	28			
29	Multiply the number of exemptions claimed on line 28 by the exemption amount shown in the instructions for line 29 for the year you are amending. Enter the result here and on line 4a on page 1 of this form. If amending your 2018 or later return, leave line blank	29			

List ALL dependents (children and others) claimed on this amended return. If more than 4 dependents, see inst. and 🗸 here 🕨 🗌 30

Dependents (see	instructions):	
-----------------	----------------	--

Dependents (see instructi	ons):			(d) ✓ if qualifies for (see instructions):					
(a) First name	Last name	(b) Social security number	(c) Relationship to you	Child tax credit	Credit for other dependents (amended 2018 or later returns onl				
Part II Presidential Election Compaign Fund									

Presidential Election Campaign Fund Part II

Checking below won't increase your tax or reduce your refund.

Check here if you didn't previously want \$3 to go to the fund, but now do.

Check here if this is a joint return and your spouse did not previously want \$3 to go to the fund, but now does.

Part III Explanation of Changes. In the space provided below, tell us why you are filing Form 1040-X.

Attach any supporting documents and new or changed forms and schedules.

LETTER OF EXPLANATION ATTACHED

Remember to keep a copy of this form for your records.

Under penalties of perjury, I declare that I have filed an original return and that I have examined this amended return, including accompanying schedules and statements, and to the best of my knowledge and belief, this amended return is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information about which the preparer has any knowledge.

Sign Here

		CYBERSE	CURITY ANALYST				
Your signature	Date	Your occupation					
•							
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occ	cupation				
Paid Preparer Use Only							
SYAM PRIYA RAM SAGAR GUPTA TALLAM	09/09/2021	GLOBAL	TAXES LLC				
Preparer's signature	Date	Firm's name	Firm's name (or yours if self-employed)				
SYAM PRIYA RAM SAGAR GUPTA TALLAM		2530 Pe	ebble Creek Ln Cum	ming GA 30041			
Print/type preparer's name		Firm's addres	ss and ZIP code				
P02082703	Check if self-employed		(678)965-9522	30-1017196			
PTIN			Phone number	EIN			
For forms and publications, visit www.irs.gov.			REV 07/28/21 PRO	Form 1040-X (Rev. 1-2020)			

E 104 0		artment of the Treasury—Internal Revenue Servi S. Individual Income Ta >		(99) urn	202	20	OMB No. 1545	-0074	IRS Use	Only	—Do not w	rite or staple	in this space.
Filing Status Check only one box.	lf yo	Single Married filing jointly Checked the MFS box, enter the n son is a child but not your dependent	ame of y	-	separately use. If you					,		, ,	ow(er) (QW) ne qualifying
Your first name	and m	iddle initial	Last na	me							Your so	cial securi	ty number
NIKHIL I	KUMAI	R REDDY	MARA	M							663-	58-820	4
lf joint return, s	pouse's	s first name and middle initial	Last na	me							Spouse'	s social see	curity number
9768 MA	YFAI	er and street). If you have a P.O. box, see R ST , UNIT B							Apt. no.		Check h	nere if you,	on Campaign or your htly, want \$3
City, town, or p	oost offi	ce. If you have a foreign address, also co	mplete s	paces bel	ow.	Sta	te	ZIP co	ode				Checking a
ENGLEWO	OD					C	C	801	.12		box bel	ow will not	change
Foreign countr	y name		F	Foreign pr	ovince/state	/coun	ty	Foreig	gn postal co	ode	your tax	or refund.	Spouse
At any time du	uring 20	020, did you receive, sell, send, excl	nange, c	or otherw	vise acquire	any	financial intere	l est in a	any virtua	ıl cu	rrency?		
Standard Deduction	_	eone can claim:	•		•		a dependent		-		-		
Age/Blindnes	s You:	: 🗌 Were born before January 2, 1	956	Are bl	ind Sp	ouse	: 🗌 Was bo	rn befo	ore Janua	ary 2	2, 1956	🗌 ls bl	ind
Dependent	s (see	instructions):		(2) S	Social securi	y	(3) Relationsh					r (see instru	ictions):
- If more		irst name Last name		number to you			Child tax cred		redit	Credit for ot	her dependents		
than four									[[
dependents, see instruction	s								[[
and check	J								[[
here 🕨 🗌									[[
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2 .	· · ·						. 1	10	00,643.
Attach Sch. B if	2a	Tax-exempt interest	2a			bТ	axable interes	t.			. 2b		
required.	<u>3a</u>	Qualified dividends	3a			bС	Ordinary divide	nds .			. 3b		
	4a	IRA distributions	4a			bΤ	axable amoun	t			. 4b		
	5a	Pensions and annuities	5a			bΤ	axable amoun	t			. 5b		
Standard	6a	Social security benefits	6a			bΤ	axable amoun	t			. 6b		
 Deduction for – Single or 	7	Capital gain or (loss). Attach Schee	dule D if	f required	d. If not rec	luired	, check here				_ 7		
Married filing	8	Other income from Schedule 1, lin	e9.								. 8		-5,000.
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	⁻ his is yo	ur total in d	ome				.	▶ 9		95,643.
Married filing	10	Adjustments to income:					1						
Jointly or Qualifying	а	From Schedule 1, line 22					10	a					
widow(er), \$24,800	b	Charitable contributions if you take the standard deduction. See instructions 10b Add lines 10a and 10b. These are your total adjustments to income											
 Head of 	с							► <u>10</u>					
household, \$18,650	11	Subtract line 10c from line 9. This	is your a	adjusted	l gross inc	ome				.	► <u>11</u>		95,643.
 If you checked any box under 	12	Standard deduction or itemized		`		,							12,400.
Standard	13	Qualified business income deduction	ion. Atta	ach Form	1 8995 or F	orm 8	8995-A				. 13		
Deduction, see instructions.	14	Add lines 12 and 13											12,400.
	15	Taxable income. Subtract line 14	from lin	ie 11. lf z	ero or less	, ente	er-0				. 15		83,243.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2020)

Form 1040 (2020))										Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 🗌 881	4 2	4972	3			16	14,100.
	17	Amount from Schedule 2, lin	e3							17	
	18	Add lines 16 and 17								18	14,100.
	19	Child tax credit or credit for	other dependen	ts						19	
	20	Amount from Schedule 3, lin	e7							20	
	21	Add lines 19 and 20								21	
	22	Subtract line 21 from line 18	. If zero or less,	enter -0						22	14,100.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 10	э.				23	0.
	24	Add lines 22 and 23. This is	your total tax						. 🕨	24	14,100.
	25	Federal income tax withheld	from:								
	а	Form(s) W-2					25a	15	,408.		
	b	Form(s) 1099					25b				
	с	Other forms (see instructions	s)				25c				
	d	Add lines 25a through 25c								25d	15,408.
• If you have a	26	2020 estimated tax payment	s and amount a	pplied from 20	19 return					26	
qualifying child,	27	Earned income credit (EIC)			N	o .	27				
attach Sch. EIC.	28	Additional child tax credit. A					28				
nontaxable	29	American opportunity credit	from Form 8863	3, line 8			29				
combat pay, see instructions.	30	Recovery rebate credit. See	instructions .				30		168.		
	31	Amount from Schedule 3, lin					31				
	32	Add lines 27 through 31. The	ese are your tot a	al other paym	ents and	refunda	L	redits	. 🕨	32	168.
	33	Add lines 25d, 26, and 32. T								33	15,576.
Defend	34	If line 33 is more than line 24								34	1,476.
Refund	35a	Amount of line 34 you want	·				,	•		35a	1,476.
Direct deposit?	►b	Routing number 1 0 1			► c Typ		Chec		Savings		
See instructions.	►d	Account number 5 1 8							saringe		
	36	Amount of line 34 you want a					1	Τ'			
Amount	37	Subtract line 33 from line 24							. 🕨	37	
You Owe	0,	Note: Schedule H and Sch		-							
For details on		2020. See Schedule 3, line 1			•		Ji lile	laxes you			
how to pay, see instructions.	38	Estimated tax penalty (see in					38				
Third Party		you want to allow another									
Designee	ins	structions						Yes. Co	omplete	below.	× No
3	De	signee's		Phone				Perso	onal ident	ification	
	nai	me 🕨		no. 🕨				num	oer (PIN)		
Sign		der penalties of perjury, I declare t									
Here		ief, they are true, correct, and com	plete. Declaration of				ased on	all informatio			, ,
	Yo	ur signature		Date	Your occi	upation					nt you an Identity IN, enter it here
Joint return?					CYBERSECURITY ANALYST				inst.) ►		
See instructions.	Sp	ouse's signature. If a joint return, k	ooth must sign.	Date	Spouse's					e IRS sei	nt your spouse an
Keep a copy for		,	5						Ider	tity Prot	ection PIN, enter it here
your records.									(see	inst.) 🕨	
		one no. (913)636-201		Email address	NIKHILS	SAILPOI	NT290	1@GMAIL.CO			1
Paid	Pre	eparer's name	Preparer's signat				Date		PTIN		Check if:
Preparer	SYAM	PRIYA RAM SAGAR GUPTA TALLAM	SYAM PRIYA	RAM SAGAR	GUPTA I	TALLAM	09/	09/2021	P0208	2703	Self-employed
Use Only		m's name ► GLOBAL TAX							Pho	ne no. (678)965-9522
	Fir	m's address ► 2530 Pebbl	le Creek I	n Cumming	g GA 3	0041			Firm	n's EIN ▶	30-1017196
Go to www.irs.go	ov/Forn	n1040 for instructions and the late	st information.		ВА	Α	RE\	/ 07/28/21 PRC			Form 1040 (2020)

Go to *www.irs.gov/Form1040* for instructions and the latest information.

BAA

SCHEDULE	1
(Form 1040)	

Additional Income and Adjustments to Income

OMB No. 1545-0074

Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Your soc	ial security number
	Attachment Sequence No. 01

Department of the Treasury	► Attach
Internal Revenue Service	► Go to <i>www.irs.gov/F</i>
Name(s) shown on Fo	orm 1040, 1040-SR, or 1040-NR

NIKHIL KUMAR REDDY MARAM

663-58-8204

Pa	rt I Additional Income		
1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2 a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions)		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-5,000.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income. List type and amount ►		
•		8	
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	9	-5,000.
Par	t II Adjustments to Income		5,000.
10	Educator expenses	10	
11	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	11	
10			
12	Health savings account deduction. Attach Form 8889	12 13	
13 14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
14	Deductible part of self-employment tax. Attach Schedule SE	14	
15 16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
17 18a	Penalty on early withdrawal of savings	18a	
loa b		Tod	
c b			
19		19	
20		20	
20 21	Tuition and fees deduction. Attach Form 8917	20	
21	Add lines 10 through 21. These are your adjustments to income. Enter here and		
<u> </u>	on Form 1040, 1040-SR, or 1040-NR, line 10a	22	
For Pa	perwork Reduction Act Notice, see your tax return instructions. BAA REV 07/28/21 PRO	Schedule	e 1 (Form 1040) 2020

SCHEDULE E	
(Form 1040)	

Supplemental Income and Loss

OMB No. 1545-0074

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Depar	tment of	the	reasu	ry
Interna	al Revenu	ie Se	ervice	(99)

► Go to *www.irs.gov/ScheduleE* for instructions and the latest information.

2 \cap Attachment Sequence No. **13**

Name(s)	shown on return						Your	social securit	y number
NIKH	IL KUMAR REDDY	MARAM					663	8-58-820	4
Part		From Rental Real Estate and Rom	-	-					
		nts in 2020 that would require you to						-	
	, , ,	bu file required Form(s) 1099?	· ·	,					Yes No
1a		each property (street, city, state, ZIF					• •	••□	
A		ERABAD TELANGANA IN 5000	,						
B	KARMANGHAT HID	ERABAD IELANGANA IN 5000	133						
 1b	Type of Property		n autor l'atta al		Fair	Rental	Dorse	onal Use	
10	(from list below)	2 For each rental real estate prop above, report the number of fa	ir rental and	ł	-	Days		Days	QJV
Α	3	personal use days. Check the of if you meet the requirements to	QJV box or	ily A		365		0	
B	3	qualified joint venture. See inst	tructions.	B		305		0	
				C					
	of Property:			U					
	le Family Residence	3 Vacation/Short-Term Rental	5 Land		7 Self-	Rontal			
-	i-Family Residence		6 Rovaltie			r (describe)	\ \		
Incom	,	Properties:		A	o Othe	i (describe) E			С
3	-		3		650.		,		0
4		· · · · · · · · · · · · ·	4		050.				
Expen		<u>· · · · · · · · · · · · · · · · · · · </u>							
5			5		150.				
6		nstructions)	6		350.				
7	,		7		550.				
8			8						
9			9						
9 10		ssional fees	10						
11			11						
12		d to banks, etc. (see instructions)	12						
12			12	E	000.				
13			13	5,	150.				
15			15		130.				
16			16						
17			17						
18		or depletion	18						
19	Othor (ligt)		19						
20	Total expenses Add I	ines 5 through 19	20	5	650.				
			20	J,	050.				
21		line 3 (rents) and/or 4 (royalties). If nstructions to find out if you must							
	file Form 6198		21	-5	000.				
22		estate loss after limitation, if any,							
22	on Form 8582 (see in:		22 (-5 (000.)	()
23a	•	eported on line 3 for all rental prope		5,0	23a	1	650) ()	/
b		eported on line 4 for all royalty prop			23b				
c		eported on line 12 for all properties			23c				
d		eported on line 18 for all properties			23d				
e		eported on line 20 for all properties			23e		5,650	2.	
24		e amounts shown on line 21. Do no	t include a	ny losses				24	
25		sses from line 21 and rental real estate			nter tot	al losses her		25 (5,000.)
		ate and royalty income or (loss).						- \	-,::::,
26		V, and line 40 on page 2 do not							
		0), line 5. Otherwise, include this ar						26	-5,000.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2020

9	8582	Passive Activity Loss Limitations	0	MB No. 1545-1008		
Form	JJUZ	See separate instructions.		2020		
	nent of the Treasury Revenue Service (99)	Ą	Attachment Sequence No. 858			
	s) shown on return		Identifying n			
NIKH	HIL KUMAR R	EDDY MARAM	663-58-			
Par	2020 Pa	ssive Activity Loss	1			
	Caution	Complete Worksheets 1, 2, and 3 before completing Part I.				
Renta	al Real Estate	Activities With Active Participation (For the definition of active participation,	see			
Speci	ial Allowance f	or Rental Real Estate Activities in the instructions.)				
1a	Activities with	net income (enter the amount from Worksheet 1, column (a)) . 1a	0.			
b	Activities with	net loss (enter the amount from Worksheet 1, column (b)) [1b] (5,00)0.)			
С	Prior years' ur	allowed losses (enter the amount from Worksheet 1, column (c)))			
d	Combine lines	1a, 1b, and 1c	. 1d	-5,000.		
Comr		zation Deductions From Rental Real Estate Activities				
2 a	Commercial re	evitalization deductions from Worksheet 2, column (a) 2a ()			
b		Illowed commercial revitalization deductions from Worksheet 2, 2b ()			
С	Add lines 2a a	nd 2b	. 2c	()		
All Ot	her Passive Ac	tivities				
3a		net income (enter the amount from Worksheet 3, column (a)) . 3a				
b		net loss (enter the amount from Worksheet 3, column (b)) 3b ()			
С	•	allowed losses (enter the amount from Worksheet 3, column (c)))			
d	Combine lines	3a, 3b, and 3c	. 3d			
4		1d, 2c, and 3d. If this line is zero or more, stop here and include this form with y				
		es are allowed, including any prior year unallowed losses entered on line 1c, 2b, or	I I			
	-	ses on the forms and schedules normally used	. 4	-5,000.		
	If line 4 is a los					
		• Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part				
• • •		• Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and	-			
		status is married filing separately and you lived with your spouse at any time durin ead, go to line 15.	ig the year,	do not complete		
Part		Allowance for Rental Real Estate Activities With Active Participation				
	-	ter all numbers in Part II as positive amounts. See instructions for an example.				
5		ller of the loss on line 1d or the loss on line 4	. 5	5,000.		
6	Enter \$150,00	0. If married filing separately, see instructions 6 150,00	20.			
7		adjusted gross income, but not less than zero. See instructions 7 100,64				
		is greater than or equal to line 6, skip lines 8 and 9, enter -0- on				
	line 10. Otherv	vise, go to line 8.				
8	Subtract line 7	Ý from line 6	57.			
9	Multiply line 8	by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instruct	ions 9	24,679.		
10		Iler of line 5 or line 9	. 10	5,000.		
		oss, go to Part III. Otherwise, go to line 15.				
Part		Allowance for Commercial Revitalization Deductions From Rental Real		ctivities		
	Note: En	ter all numbers in Part III as positive amounts. See the example for Part II in the instr	uctions.			
11		reduced by the amount, if any, on line 10. If married filing separately, see instruction				
12		from line 4	. 12			
13		2 by the amount on line 10				
14		llest of line 2c (treated as a positive amount), line 11, or line 13	. 14			
Part		osses Allowed				
15		ne, if any, on lines 1a and 3a and enter the total		0.		
16		allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instruction				
		v to report the losses on your tax return	. 16	5,000.		
For Pa	aperwork Reduct	ion Act Notice, see instructions. BAA REV 07/28/21 PRO		Form 8582 (2020)		

Caution: The worksheets must be filed with your tax return. Keep a copy for your records. Worksheet 1-For Form 8582, Lines 1a, 1b, and 1c (see instructions)

	Currer	nt year	Prior years	Overall gain or loss	
Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
KARMANGHAT	0.	5,000.			5,000.
Total. Enter on Form 8582, lines 1a, 1b,					
and 1c	0.	5,000.			

Worksheet 2-For Form 8582, Lines 2a and 2b (see instructions)

Name of activity	(a) Current year deductions (line 2a)	(b) Prior year unallowed deductions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and			
<u>2b </u> ►			

Worksheet 3-For Form 8582, Lines 3a, 3b, and 3c (see instructions)

Name of activity	Currer	nt year	Prior years	Overall gain or loss		
	(a) Net income (line 3a)	(b) Net loss (line 3b)	(c) Unallowed loss (line 3c)	(d) Gain	(e) Loss	
Total. Enter on Form 8582, lines 3a, 3b, and 3c						

Worksheet 4-Use This Worksheet if an Amount Is Shown on Form 8582, Line 10 or 14. See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) oss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
KARMANGHAT	E Ln 22	5,000.	1.00000000	5,000.	0.
Total		5,000.	1.00	5,000.	0.

Worksheet 5-Allocation of Unallowed Losses (see instructions)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
Total			1.00	



208453 11555

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State of Colorado Individual Income Tax Declaration for Electronic Filing Do not mail this form to the IRS or the Colorado Department of Revenue. Retain with your records.

					, , .		
Taxpayer SSN or ITIN	Spouse SSN or ITIN (If Joint	Return)	Submission ID				
663-58-8204							
Taxpayer Last Name		Taxpayer Fi	rst Name			Middle Ini	itial
MARAM		NIKHIL	KUMAR REDD	Y			
Spouse Last Name (If Joint Return)		Spouse Firs	t Name (If Joint F	Return)			
Street Address				Phone	Number		
9768 MAYFAIR ST,UNIT B				(91)	3)636-2012	2	
City				State	Zip		
ENGLEWOOD				CO	80112		
	Part I — Tax R	eturn Inform	ation		•		
1. Total Income, line 9 from your fe	deral Form 1040			1 \$		9564	:3
2. Taxable Income, line 15 on feder	ral Form 1040			2 \$		8324	3
 Colorado Tax, line 19 on Colorado 				3 \$		52	8
 Colorado Tax Withheld, line 20 c 				4 \$		58	6
5. Refund, line 32 Colorado Form 1	104			5 \$		5	58
5. Reiding, line 32 Colorado i onn	104			J U			-
6. Amount You Owe, line 37 on Co	lorado Form 104 Part II — Declar	ation of Tox	Devez	6 \$			
Under penalties of perjury, I declare tha with the amounts shown on my 2020 Fec are true, correct, and complete to the b applicable) may be required to provide upon request by the Colorado Departme	t the information I have pro- deral/Colorado income tax re pest of my knowledge and b paper copies of this declara	vided for electro turns, and that pelief. I underst tion, my return	onic filing and th said tax returns, and that I (or m s, withholding s	statements, statements,	s, schedules ai ic Return Orig schedules, ar	nd attachmer inator (ERO) nd attachmer	nts) if
Signature	Date	Spouse's	Signature (If Joint	Return, Bo	th Must Sign)	Date	
Р	art III — Declaration of	ERO/Prepar	er/Transmitte	ər			
If the transmitter did not prepare the	e tax return, check here						
If I am not the preparer, I declare only that Colorado income tax returns. If I am the provided income tax returns and that the amounts shown on said tax returns, and best of my knowledge and belief. As prep have provided the taxpayer with copies of covered by the Colorado statute of limitation and attachments upon request by the Correct ERO's Signature	preparer, under penalties of p e information provided to me that said tax returns, statem arer, I further declare that I h of all forms and information t tions, and to provide paper c	berjury I declare by the taxpaye ents, schedules ave obtained the iled. I also agre opies of this de	that I have revie and the amou s, and attachme e taxpayer's signed to maintain the claration, said re during this period	ewed the a nts shown nts are true nature on th nis signed F eturns, with I.	bove taxpayer in Part I above e, correct, and his form at the t Form (DR 8453	s 2020 Fede agree with complete to ime of filing a 3) for the per ents, schedu	ral/ the the and riod iles
SYAM PRIYA RAM SAGAR GUPT	A TALLAM			P020827			
Check if also Preparer X				Date (мм/dd/ 09/09/2			
			I	J / J / Z	÷		





DR 0104 (10/19/20) COLORADO DEPARTMENT OF REVENUE Tax.Colorado.gov Page 1 of 4 (0013)

2020 Colorado Individual Income Tax Return

Full-Year

X Part-Year or Nonresident (or resident, part-year, non-resident combination) *Must include DR 0104PN Mark if Abroad on due date – see instructions

Your Last Name			Your Fi	rst Nam	e					Middle Initi	ial
MARAM			NIKH	IL KU	JMA	R REI	DDY				
Date of Birth (MM/DD/YYYY)	SSN or ITIN		Deceas	ed						1	
01/29/1994	663-58-8204								refund, you n ertificate with y		
Enter the following informatio	n from your current		State o	f Issue		Last 4	characters of I	D number	Date of Issuand	xe 🛛	
driver license or state identific			СО			0585	5		09/20/19		
If Joint, Spouse's Last Name			Spouse	's First I	Vame	e				Middle Initi	ial
Spouse's Date of Birth (MM/DD/YYYY)	Spouse's SSN or ITIN		Deceas	ed							
									refund, you n ertificate with		
	· · · · ·		State o	f Issue		Last 4	characters of II	D number	Date of Issuand	ce 🛛	
Enter the following informatio current driver license or state	n from your spouse's identification card.	5									
Mailing Address								Pho	ne Number		
9768 MAYFAIR ST,UNIT 1	3							(9)	13)636-201	2	
City				State	Zip	Code		Foreign (Country (if applic	able)	
ENGLEWOOD				CO	80)112					
								Ro	ound To The Ne	arest Dolla	۱r
 Enter Federal Taxable Inco or 1040 SR line 15 	ome from your feder	al in	come ta	ax forn	n: 1(040 lir	ne 15 ● 1			83243 0	00
Include W-2s and 1099s with	CO withholding.										
	Addition										
 State Addback, enter the s 1040 or 1040 SR schedule 				your f	ede	eral for	m • 2			0	00
3. Business Interest Expense	e Deduction Addbac	k (se	e instru	uctions	;)		• 3			0	00

DR 0104 (10/19/20) COLORADO DEPARTMENT OF REVENUE Tax.Colorado.gov Page 2 of 4

200104 21555 Page 2 Name		SSN or ITIN	
NIKHIL KUMAR REDDY MARAM		663-58-8204	
4. Excess Business Loss Addback (see instructions)	• 4		c
5. Net Operating Loss Addback (see instructions)	• 5		C
6. Other Additions, explain (see instructions)	• 6		C
Explain:			
7. Subtotal, sum of lines 1 through 6	7	83243	0
Color	ado Subtractions		
8. Subtractions from the DR 0104AD Schedule, line 20			
DR 0104AD schedule with your return.	• 8		(
9. Colorado Taxable Income, subtract line 8 from line	7 • 9	83243	(
Tax, Prepayments and Credits: see 104 Book	for full-year tax table and part-year DR	0104PN Schedule	
 Colorado Tax from tax table or the DR 0104PN line the DR 0104PN with your return if applicable. 	• 10	528	
 Alternative Minimum Tax from the DR 0104AMT line DR 0104AMT with your return. 	e 8, you must submit the 11 		
· · · · · · · · · · · · · · · · · · ·			
2. Recapture of prior year credits	• 12		
3. Subtotal, sum of lines 10 through 12	13	528	(
4. Nonrefundable Credits from the DR 0104CR line 43			
cannot exceed line 13, you must submit the DR 010 5. Total Nonrefundable Enterprise Zone credits used -			
or from the DR 1366 line 87, the sum of lines 14, 15			
you must submit the DR 1366 with your return.	• 15		
6. Strategic Capital Tax Credit from DR 1330, the sum	, -,		
exceed line 13, you must submit the DR 1330 with	your return. • 16		
7. Net Income Tax, sum of lines 14, 15, and 16. Subtra	act that sum from line 13. 17	528	
8. Use Tax reported on the DR 0104US schedule line			
the DR 0104US with your return.	• 18		
9. Net Colorado Tax, sum of lines 17 and 18	19	528	
0. CO Income Tax Withheld from W-2s and 1099s, yo			
and/or 1099s claiming Colorado withholding with yo		586	
1. Prior-year Estimated Tax Carryforward	• 21		
2. Estimated Tax Payments, enter the sum of the quar			
remitted for this tax year	• 22		
3. Extension Payment remitted with the DR 0158-I	• 23		
4. Other Prepayments: DR 0104BEP	• DR 0108 DR 1079 • 24		



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Name	SSN or ITIN
NIKHIL KUMAR REDDY MARAM	663-58-8204
 25. Gross Conservation Easement Credit from the DR 1305G line 33, you must submit the DR 1305G with your return. 	0 0
submit the DR 1305G with your return.• 2526. Innovative Motor Vehicle Credit from the DR 0617, you must submit each	
DR 0617 with your return. • 26	⁰ 0 0
27. Refundable Credits from the DR 0104CR line 9, you must submit the	
DR 0104CR with your return. • 27	0 0
28. Subtotal, sum of lines 20 through 27 28	⁵⁸⁶ 00
 29. Federal Adjusted Gross Income from your federal income tax form: 1040 line 11, or 1040 SR line 11 29 	95643 00
30. Overpayment, if line 28 is greater than line 19 then subtract line 19 from line 28 30	⁵⁸ 00
31. Estimated Tax Credit Carryforward to 2021 first quarter, if any. • 31	0 0
If you have an overpayment on line 32 below and would like to donate all or a portion of y Colorado charity, include Form DR 0104CH to contribute.	
32. Refund, subtract line 31 from line 30 (see instructions) • 32	⁵⁸ 00
Direct Routing Number 1 0 1 1 0 0 0 4 5 Type: X Checking	Savings CollegeInvest 529
Deposit Account Number 5 1 8 0 6 6 0 2 8 4 2 1	
For questions regarding CollegeInvest direct deposit or to open an account, visit CollegeInve	est.org or call 800-448-2424.
33. Net Tax Due, subtract line 28 from line 19 33	0 0
34. Delinquent Payment Penalty (see instructions) • 34	0 0
35. Delinquent Payment Interest (see instructions) • 35	0 0
36. Estimated Tax Penalty, you must submit the DR 0204 with your return. (see instructions) • 36	0 0
37. Amount You Owe, sum of lines 33 through 36 • 37	
The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the san check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the p electronically.	ne day received by the State. If converted, your bayment amount directly from your bank account

200104	41555

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Name			SSN or ITIN		
NIKHIL KUMAR REDDY MARAM			663-58-8204		
-	Third Party Designee				
Do you want to allow another person to discuss this return and any related information with the Colorado Department of Revenue? See the instructions.	• X No • Yes. Comple	ete the fo	llowing:		
Designee's Name		Phone N	lumber		
•		•			
Sign Below Under penalties of perjury, I declare that to the	best of my knowledge and belief, this return is tru	ue, correct	and complete.		
Your Signature			Date (MM/DD/YY)		
Spouse's Signature. If joint return, BOTH must sign.			Date (MM/DD/YY)		
Paid Preparer's Name		Paid Prep	parer's Phone		
GLOBAL TAXES LLC		(678)	965-9522		
Paid Preparer's Address	City	State	Zip		
2530 PEBBLE CREEK LN	CUMMING	GA	30041		

File and pay at: Colorado.gov/RevenueOnline

If you are filing this return **with** a check or payment, please mail the return to:

COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-000**6** If you are filing this return **without** a check or payment, please mail the return to:

COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-000**5**

These addresses and zip codes are exclusive to the Colorado Department of Revenue, so a street address is not required.

REV 04/06/21 PRO



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Form 104PN

Part-Year Resident/Nonresident Tax Calculation Schedule 2020

Taxpayer's Name		SSN or ITI	N
NIKHIL KUMA	R REDDY MARAM	663-58	-8204
Use this form if you and/or your spouse were a resident of another state for all or part of 2020. This form apportions your gross income so that Colorado tax is calculated for only your Colorado income. Complete this form after you have filled out lines 1 through 9 of the DR 0104. If you filed federal form 1040NR, see the instructions.			
	Beginn	ing (MM/YY) E	Ending (MM/YY)
1. ● Taxpayer is	s (mark one): X Full-Year Nonresident Part-Year Resident from		
	Full-Year Resident Nonresident 305-day rule Mili	tary	
2. ● Spouse is		ing (MM/YY)	Ending (MM/YY)
	Full-Year Resident Nonresident 305-day rule Mili	tary	
3. ● Mark the federal form you filed: X 1040 I 1040 NR I 1040 SR Other			
	Federal Information	Colorado In	nformation
		Colorado II	normation
4. Enter all inc line 1.	come from form 1040 line 1 or 1040 SR • 4 100643 00	Colorado II	lionnation
line 1. 5. Enter incom while you we	come from form 1040 line 1 or 1040 SR • 4 e from line 4 that was earned while working in Colorado and/or earned ere a Colorado resident. Part-year residents should include moving		13333
line 1. 5. Enter incom while you we expense rei	come from form 1040 line 1 or 1040 SR 100643 00 • 4 100643 00 e from line 4 that was earned while working in Colorado and/or earned ere a Colorado resident. Part-year residents should include moving 00		
line 1. 5. Enter incom while you we expense reit 6. Enter the st	come from form 1040 line 1 or 1040 SR 100643 00 • 4 100643 00 e from line 4 that was earned while working in Colorado and/or earned ere a Colorado resident. Part-year residents should include moving mbursements only if paid for moving into Colorado. • 5 um of all interest/dividend income from • 5		13333
line 1. 5. Enter incom while you we expense rein 6. Enter the su form 1040 l	come from form 1040 line 1 or 1040 SR • 4 • 6 • 4 • 6 • 6 • 6 • 6 • 6 • 6 • 6 • 6		13333
line 1. 5. Enter incom while you we expense reli 6. Enter the su form 1040 I and 3b. 7. Enter income	come from form 1040 line 1 or 1040 SR 100643 00 • 4 100643 00 e from line 4 that was earned while working in Colorado and/or earned ere a Colorado resident. Part-year residents should include moving mbursements only if paid for moving into Colorado. • 5 um of all interest/dividend income from 6 00 • 6 00		13333 00
line 1. 5. Enter incom while you we expense rein 6. Enter the su form 1040 I and 3b. 7. Enter income derived from	come from form 1040 line 1 or 1040 SR 100643 00 • 4 100643 00 e from line 4 that was earned while working in Colorado and/or earned 00 ere a Colorado resident. Part-year residents should include moving 5 mbursements only if paid for moving into Colorado. • 5 um of all interest/dividend income from 00 • 6 00 • 6 00 • 6 00		13333
line 1. 5. Enter incom while you we expense rein 6. Enter the su form 1040 l and 3b. 7. Enter income derived from 8. Enter all inc	come from form 1040 line 1 or 1040 SR 100643 00 • 4 100643 00 e from line 4 that was earned while working in Colorado and/or earned ere a Colorado resident. Part-year residents should include moving mbursements only if paid for moving into Colorado. • 5 um of all interest/dividend income from 6 00 • 6 00		13333 00
line 1. 5. Enter incom while you we expense rein 6. Enter the su form 1040 I and 3b. 7. Enter income derived from 8. Enter all inc 1040 SR, Se	come from form 1040 line 1 or 1040 SR 100643 00 • 4 100643 00 e from line 4 that was earned while working in Colorado and/or earned 00 ere a Colorado resident. Part-year residents should include moving 5 mbursements only if paid for moving into Colorado. • 5 um of all interest/dividend income from 00 • 6 00 • 6 00 • 6 00 e from line 6 that was earned while you were a resident of Colorado or 7 the ownership of real or tangible personal property located in Colorado. • 7 ome from form 1040, Schedule 1, line 7 or 00		13333 00
line 1. 5. Enter incom while you we expense rein 6. Enter the su form 1040 I and 3b. 7. Enter income derived from 8. Enter all inc 1040 SR, Se 9. Enter income	come from form 1040 line 1 or 1040 SR 100643 00 • 4 100643 00 e from line 4 that was earned while working in Colorado and/or earned earned earned ere a Colorado resident. Part-year residents should include moving 5 mbursements only if paid for moving into Colorado. • 5 um of all interest/dividend income from 00 e from line 6 that was earned while you were a resident of Colorado or 00 e from line 6 that was earned while you were a resident of Colorado or 7 ome from form 1040, Schedule 1, line 7 or 00 chedule 1, line 7. • 8		13333 00
line 1. 5. Enter incom while you we expense reli 6. Enter the si form 1040 l and 3b. 7. Enter income derived from 8. Enter all inc 1040 SR, Se 9. Enter income from another 10. Enter all inc	come from form 1040 line 1 or 1040 SR 100643 00 • 4 100643 00 e from line 4 that was earned while working in Colorado and/or earned ere a Colorado resident. Part-year residents should include moving mbursements only if paid for moving into Colorado. • 5 um of all interest/dividend income from • 6 ines 2b and 3b or form 1040 SR lines 2b 00 • 6 00 e from line 6 that was earned while you were a resident of Colorado or 00 the ownership of real or tangible personal property located in Colorado. • 7 ome from form 1040, Schedule 1, line 7 or 00 e from line 8 that is from State of Colorado unemployment benefits; and/or is 00 e from line 8 that is from State of Colorado unemployment benefits; and/or is 9 ome from line 7 of form 1040 or 1040 SR 9		13333 00 00
line 1. 5. Enter incom while you we expense rein 6. Enter the su form 1040 l and 3b. 7. Enter income derived from 8. Enter all inc 1040 SR, Se 9. Enter income from another 10. Enter all income and line 4 of	come from form 1040 line 1 or 1040 SR 100643 00 e from line 4 that was earned while working in Colorado and/or earned ere a Colorado resident. Part-year residents should include moving mbursements only if paid for moving into Colorado. • 5 um of all interest/dividend income from • 6 ines 2b and 3b or form 1040 SR lines 2b 00 e from line 6 that was earned while you were a resident of Colorado or • 7 ome from form 1040, Schedule 1, line 7 or 00 chedule 1, line 7. • 8 of form line 8 that is from State of Colorado unemployment benefits; and/or is • 1000 e from line 7 of form 1040 or 1040 SR 00 Schedule 1 of form 1040 or 1040 SR 00		13333 00 00
line 1. 5. Enter incom while you we expense rein 6. Enter the su form 1040 l and 3b. 7. Enter income derived from 8. Enter all inc 1040 SR, Se 9. Enter income from another 10. Enter all income and line 4 of	come from form 1040 line 1 or 1040 SR 100643 00 • 4 100643 00 e from line 4 that was earned while working in Colorado and/or earned ere a Colorado resident. Part-year residents should include moving mbursements only if paid for moving into Colorado. • 5 um of all interest/dividend income from • 6 ines 2b and 3b or form 1040 SR lines 2b 00 • 6 00 e from line 6 that was earned while you were a resident of Colorado or 00 the ownership of real or tangible personal property located in Colorado. • 7 ome from form 1040, Schedule 1, line 7 or 00 e from line 8 that is from State of Colorado unemployment benefits; and/or is 00 e from line 8 that is from State of Colorado unemployment benefits; and/or is 9 ome from line 7 of form 1040 or 1040 SR 9		13333 00 00

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Name			SSN or ITIN
NIKHIL KUMAR REDDY MARAM			663-58-8204
	Federal Information		Colorado Information
12. Enter the sum of all income from form 1040 lines 4b,			
5b and 6b or 1040 SR lines 4b, 5b and 6b. • 12		00	
13. Enter income from line 12 that was received during that	part of the year you were a		
Colorado resident.		13	00
14. Enter the sum of all business and farm income from			
form 1040, Schedule 1, lines 3 and 6 or 1040 SR,			
Schedule 1, lines 3 and 6. • 14		00	
15. Enter income from line 14 that was earned during that pa			
Colorado resident and/or was earned from Colorado sou	urces.	15	00
16. Enter all Schedule E income from form 1040,	-5000		
Schedule 1, line 5 or 1040 SR, Schedule 1, line 5. • 16		00	
17. Enter income from line 16 that was earned from Colorad			
royalty income received or credited to your account durin			0
were a Colorado resident; and/or partnership/S corporat	-		0.0
taxable to Colorado during the tax year.	•	17	00
18. Enter the sum of all other income from form 1040,			
Schedule 1, lines 1, 2a and 8 or 1040 SR, Schedule 1, lines 1, 2a and 8. • 18		00	
lines 1, 2a and 8. • 18 List Type			
List Type			
19. Enter income from line 18 that was earned during that pa	art of the vear vou were a		
Colorado resident and/or was derived from Colorado so		19	00
List Type			
20. Total Income. Enter amount from form 1040, line 9 or	95643		
1040 SR, line 9. 20		00	
21. Total Colorado Income. Enter the total from the Colorado	o column, lines 5, 7, 9, 11,		13333
13, 15, 17 and 19.		21	00
22. Enter all federal adjustments from form 1040, line 10c or			
1040 SR, line 10c. • 22		00	
List Type			
23. Enter adjustments from line 22 as follows	•	23	00
List Type			
 Educator expenses, IRA deduction, business expenses 	of reservists, performing a	rtists	and fee-basis
government officials, health savings account deduction			
deduction, SEP and SIMPLE deductions are allowed in	the ratio of Colorado wage	s and	d/or self-employment
income to total wages and/or self-employment income.	d fe e e de duction and a V	ا د ا	ha Calanada ta fadarat
 Student loan interest deduction, alimony, and tuition and total income ratio (line 21 (line 20)) 	a rees deduction are allowe	a in t	ne Colorado to federal
total income ratio (line 21 / line 20).Penalty paid on early withdrawals made while a Colorad	do resident		
Moving expenses for members of the Armed Forces.		.	40
For treatment of other adjustments reported on federal fo Individual Income Tax Guide and/or the Income Tax Topic			
	3. 1 al 1-leal 1.631061113 & NU		



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Name			SSN or ITIN
NIKHIL KUMAR REDDY MARAM			663-58-8204
	Federal Information		Colorado Information
24. Adjusted Gross Income. Enter amount from form 1040	95643		
line 11 or 1040 SR line 11. 24		00	
25. Colorado Adjusted Gross Income. Subtract the amount	on line 23 of Form 104PN		13333
from the amount on line 21 of Form 104PN.		25	0(
26. Additions to Adjusted Gross Income. Enter the sum of			
lines 3, 4, 5, and 6 of Colorado Form 104 excluding			
any charitable contribution adjustments. • 26		00	
27. Additions to Colorado Adjusted Gross Income. Enter			
line 26 that is from non-Colorado state or local bond			
a Colorado resident.*	•	27	00
	95643		
28. Total of lines 24 and 26 28		00	
			13333
29. Total of lines 25 and 27	T	29	00
30. Subtractions from Adjusted Gross Income. Enter the			
amount from line 8 of Colorado Form 104 excluding			
any qualifying charitable contributions. • 30		00	
31. Subtractions from Colorado Adjusted Gross Income.		24	00
Enter any amount from line 30 as follows: • The state income tax refund subtraction to the extent in		31	μι
The state income tax related subtraction to the extent included o The federal interest subtraction to the extent included o			
		ont i	naludad an lina 12 abaya
 The pension/annuity subtraction and the PERA or DPS ref The Colorado capital gain subtraction to the extent include 		enti	
For treatment of other subtractions, see the Individ		4/05	the Income Tax
Topics: Part-Year Residents & Nonresidents.		1/01	
32. Modified Adjusted Gross Income. Subtract line 30			
from line 28. 32	95643	00	
1011 III e 20. 32	1	00	
33. Modified Colorado Adjusted Gross Income. Subtract lin	e 31 from line 20	33	13333 00
34. Divide line 33 by line 32. Round to four significant digits,		- 33	
e.g. xxx.xxxx 34	1 13.9404	%	
		170	
35. Tax from the tax table based on income reported on the	e DR 0104 line 9	35	3788 00
36. Apportioned tax. Multiply line 35 by the percentage on			
line 34. Enter here and on DR 0104 line 10.	528	00	
	1		

* See the Individual Income Tax Guide and/or the Income Tax Topics: Part-Year Residents & Nonresidents for treatment of other additions.