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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.

Form with fields for Taxpayer SSN or ITIN, Spouse SSN or ITIN, Submission ID, Taxpayer Last Name, Taxpayer First Name, Middle Initial, Spouse Last Name, Spouse First Name, Street Address, Phone Number, City, State, ZIP.

Part I — Tax Return Information

Table with 6 rows showing tax return information: Total Income, Taxable Income, Colorado Tax, Colorado Tax Withheld, Refund, Amount You Owe.

Part II — Declaration of Tax Payer

Under penalties of perjury, I declare that the information I have provided for electronic filing and the amounts shown in Part I above agree with the amounts shown on my 2021 Federal/Colorado income tax returns...

Signature fields for Taxpayer, Spouse's Signature, and Date.

Part III — Declaration of ERO/Preparer/Transmitter

If the transmitter did not prepare the tax return, check here []

If I am not the preparer, I declare only that the amounts shown in Part I above agree with the amounts shown on the taxpayer's 2021 Federal/Colorado income tax returns. If I am the preparer, under penalties of perjury I declare that I have reviewed the above taxpayer's 2021 Federal/Colorado income tax returns...

ERO's Signature and Preparer Identification Number or Your SSN fields.

Check if also Preparer [X]

Date (MM/DD/YY) field with value 03/27/22.



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DR 0104 (12/07/21)
COLORADO DEPARTMENT OF REVENUE
Tax.Colorado.gov
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2021 Colorado Individual Income Tax Return

Full-Year 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 First Name		Middle Initial
GENTE		HARUN SAI KUMAR		
Date of Birth (MM/DD/YYYY)	SSN or ITIN	Deceased		
03/27/1996	701-56-7166	<input type="checkbox"/> If checked and claiming a refund, you must include the DR 0102 and death certificate with your return.		
Enter the following information from your current driver license or state identification card.		State of Issue	Last 4 characters of ID number	Date of Issuance
		CO	3480	09/21/21
If Joint, Spouse's Last Name		Spouse's First Name		Middle Initial
Spouse's Date of Birth (MM/DD/YYYY)	Spouse's SSN or ITIN	Deceased		
		<input type="checkbox"/> If checked and claiming a refund, you must include the DR 0102 and death certificate with your return.		
Enter the following information from your spouse's current driver license or state identification card.		State of Issue	Last 4 characters of ID number	Date of Issuance
Mailing Address			Phone Number	
12656 ROOSEVELT LN APT H3			(816)663-3914	
City	State	ZIP Code	Foreign Country (if applicable)	
ENGLEWOOD	CO	80112		
<input type="checkbox"/>	To see if you or members of your household qualify for free or reduced-cost health coverage, check this box if:			
	<ul style="list-style-type: none"> You are a Colorado resident and at least one person in your household does not have health coverage AND You give permission for the Colorado Department of Revenue to share the information on Form DR 0104EE with Connect for Health Colorado (the Colorado Health Benefit Exchange) and the Department of Health Care Policy & Financing. 			
Round To The Nearest Dollar				
1. Enter Federal Taxable Income from your federal income tax form: 1040, 1040 SR, or 1040 SP line 15.			• 1	31464 00
Include W-2s and 1099s with CO withholding.				
Additions to Federal Taxable Income				
2. State Addback, enter the state income tax deduction from your federal form 1040, 1040 SR, or 1040 SP schedule A, line 5a (see instructions)			• 2	00
3. Qualified Business Income Deduction Addback (see instructions)			• 3	00



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Name	SSN or ITIN
HARUN SAI KUMAR GENTE	701-56-7166
4. Other Additions, explain (see instructions) ● 4	00
Explain:	
5. Subtotal, sum of lines 1 through 4 5	31464 00
Colorado Subtractions	
6. Subtractions from the DR 0104AD Schedule, line 20, you must submit the DR 0104AD schedule with your return. ● 6	00
7. Colorado Taxable Income, subtract line 6 from line 5 ● 7	31464 00
Tax, Prepayments and Credits: see 104 Book for full-year tax table and part-year DR 0104PN Schedule	
8. Colorado Tax from tax table or the DR 0104PN line 36, you must submit the DR 0104PN with your return if applicable. ● 8	1415 00
9. Alternative Minimum Tax from the DR 0104AMT line 8, you must submit the DR 0104AMT with your return. ● 9	00
10. Recapture of prior year credits ● 10	00
11. Subtotal, sum of lines 8 through 10 11	1415 00
12. Nonrefundable Credits from the DR 0104CR line 43, the sum of lines 12, 13, and 14 cannot exceed line 11, you must submit the DR 0104CR with your return. ● 12	00
13. Total Nonrefundable Enterprise Zone credits used – as calculated, or from the DR 1366 line 84, the sum of lines 12, 13, and 14 cannot exceed line 11, you must submit the DR 1366 with your return. ● 13	00
14. Strategic Capital Tax Credit from DR 1330, the sum of lines 12, 13, and 14 cannot exceed line 11, you must submit the DR 1330 with your return. ● 14	00
15. Net Income Tax, sum of lines 12, 13, and 14. Subtract that sum from line 11. 15	1415 00
16. Use Tax reported on the DR 0104US schedule line 7, you must submit the DR 0104US with your return. ● 16	00
17. Net Colorado Tax, sum of lines 15 and 16 17	1415 00
18. CO Income Tax Withheld from W-2s and 1099s, you must submit the W-2s and/or 1099s claiming Colorado withholding with your return. ● 18	2060 00
19. Prior-year Estimated Tax Carryforward ● 19	00
20. Estimated Tax Payments, enter the sum of the quarterly payments remitted for this tax year ● 20	00
21. Extension Payment remitted with the DR 0158-I ● 21	00
22. Other Prepayments: <input type="checkbox"/> ● DR 0104BEP <input type="checkbox"/> ● DR 0108 <input type="checkbox"/> ● DR 1079 ● 22	00
23. Gross Conservation Easement Credit from the DR 1305G line 33, you must submit the DR 1305G with your return. ● 23	00
24. Innovative Motor Vehicle Credit from the DR 0617, you must submit each DR 0617 with your return. ● 24	0 00



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Name: HARUN SAI KUMAR GENTE
SSN or ITIN: 701-56-7166

25. Refundable Credits from the DR 0104CR line 9, you must submit the DR 0104CR with your return. 25 00
26. Subtotal, sum of lines 18 through 25 26 2060 00

Modified AGI for TABOR

Lines 28 through 30 are only used to calculate your TABOR Credit, they do not affect your Colorado tax liability.

27. Federal Adjusted Gross Income from your federal income tax form: 1040 line 11, 1040 SR line 11, or 1040 SP line 11 27 44314 00
28. Nontaxable Social Security Income 28 00
29. Nontaxable Lump-sum Distribution from pension and profit sharing plans. 29 00
30. Nontaxable interest income from state and local bonds 30 00
31. Sum of lines 27 through 30: Modified AGI for TABOR 31 44314 00

Modified AGI Tiers for State Sales Tax Refund

Table with 7 columns: If line 31 is: (with ranges), Single Filers Enter, Joint Filers Enter. Values range from \$37 to \$234.

32. State Sales Tax Refund: For full-year Colorado residents, born before 2003, or full-year Colorado residents who are under the age of eighteen but are required to file a return. Use the amount on line 31 and reference the table above. See instructions if you are filing an extension. 32 00
33. Sum of lines 26 and 32 33 2060 00
34. Overpayment, if line 33 is greater than line 17 then subtract line 17 from line 33 34 645 00
35. Estimated Tax Credit Carryforward to 2022 first quarter, if any. 35 00

If you have an overpayment on line 36 below and would like to donate all or a portion of your overpayment to a qualified Colorado charity, include Form DR 0104CH to contribute.

36. Refund, subtract line 35 from line 34 (see instructions) 36 645 00

Direct Deposit

Routing Number: 081000032 Type: [X] Checking [] Savings [] CollegeInvest 529
Account Number: 355004614642

For questions regarding CollegeInvest direct deposit or to open an account, visit CollegeInvest.org or call 800-448-2424.



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Name: HARUN SAI KUMAR GENTE
SSN or ITIN: 701-56-7166

Table with 3 columns: Description, Amount, and Balance. Rows include Net Tax Due, Delinquent Payment Penalty, Delinquent Payment Interest, Estimated Tax Penalty, and Amount You Owe.

The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned.

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.

Designee's Name, Phone Number

Sign Below Under penalties of perjury, I declare that to the best of my knowledge and belief, this return is true, correct and complete.

Your Signature, Date, Spouse's Signature, Date

Paid Preparer's Name: GLOBAL TAXES LLC, Paid Preparer's Phone: (678) 965-9522, Paid Preparer's Address: 2530 PEBBLE CREEK LN, City: CUMMING, State: GA, ZIP Code: 30041

File and pay at: Colorado.gov/RevenueOnline

Instructions for filing and payment: If you are filing this return with a check or payment, please mail the return to: COLORADO DEPARTMENT OF REVENUE, Denver, CO 80261-0006. If you are filing this return without a check or payment, please mail the return to: COLORADO DEPARTMENT OF REVENUE, Denver, CO 80261-0005. These addresses and zip codes are exclusive to the Colorado Department of Revenue, so a street address is not required.