

228454 11555

DR 8454 (01/26/23)

COLORADO DEPARTMENT OF REVENUE
Denver CO 80261-0005

Tax Colorado goy

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State of Colorado Income Tax Declaration for Online Electronic Filing

Do not mail this form to the IRS or the Colorado		For Tax Year (MM/DD/YY)					or Fiscal Year beginning (MM/DD/YY)				
Department of Revenue. Retain with your records.			12/31/22								
Tax Type											
Individual Income Corporate Ir (DR 0104) (DR 0112)	ncome		nersh 0106		orp Inco	ome)		Fiduc (DR 0		ncome
Taxpayer Last Name or Business Name	First Na	me or Busin	ess DE	A if diff	erent from	Bu	siness N	lame			Middle Initial
BODIPATI	HEMAI	NTH									
Spouse's Last Name (if applicable)	First Na	ime									Middle Initial
VELAGAPUDI	DIVY	A									
Taxpayer SSN or ITIN	Spouse	SSN or ITIN	(if app	icable)				FEI	IN		
805-18-0810	966-9	98-0563									
Taxpayer or Business Address			City						State	ZIP	
17727 E 54TH AVE			DEI	IVER					CO	80	249
Part	t I — Tax	x Return I	nforn	nation							
Total Income from your federal return (see instance)	struction	s for more	infori	mation)	1	\$				144319
Taxable Income (or allowable deduction) from for more information)	n your fe	deral retur	n (se	e instr	uctions	2	\$				118419
3. Colorado Tax from your Colorado return (see						3	\$				4133
4. Colorado Tax Withheld or Payments, from yo	ur Color	ado return	(see	instru	ctions						4970
or more information)	II — Dec	claration o	of Tax	Pave	r	4	ֆ				
Under penalties of perjury, I declare that the information I have pro Federal/Colorado income tax returns, and that said tax returns, state I understand that I (or my Electronic Return Originator (ERO) if app	vided for ele ments, sche licable) may	ectronic filing a edules and atta y be required t	and the chments o provid	amounts are true e paper	shown in F , correct, an copies of th	nd co is de	mplete to claration,	the be	est of my eturns, v	y knowl vithholo	ledge and belief. ding statements,
schedules, and attachments upon request by the Colorado Departments Signature	ent of Rever	nue at any time	e during	trie peric			e Colorad (MM/DD/		ute or iii	nitation	.s.
Spouse's Signature (If Joint Return, Both Must Sign)						Date	(MM/DD/	YY)			
Part III — Dec	laration	of ERO/	Prepa	rer/Tr	ansmitte	er					
If the transmitter did not prepare the tax r	eturn, ch	neck here									
If I am not the preparer, I declare only that the amounts shown in Pathe preparer, under penalties of perjury I declare that I have reviewed taxpayer and the amounts shown in Part I above agree with the amounts and complete to the best of my knowledge and belief. As propared to the provided the taxpayer with copies of all forms and information of limitations, and to provide paper copies of this declaration, said reference at any time during this period.	I the above to unts shown of eparer, I furt filed. I also	taxpayer's Fed on said tax retu ther declare th agree to maint	eral/Col irns, and at I have ain this	orado ind that said obtaine signed F	come tax ret d tax returns d the taxpa orm (DR 84	turns s, sta yer's 154)	and that t tements, s signature for the pe	the inf sched e on th riod c	formation lules, an his form overed l	n provion d attacl at the to y the 0	ded to me by the hments are true, time of filing and Colorado statute
ERO's Signature				Prepar	er Identific	catio	n Numb	er, Yo	our SSI	۱, or ۱٦	ΓIN
RVSSMANIKUMARAPPANA				P020	90332						
Check if also Preparer X					MM/DD/YY)						
Check ii also Flepalei A				03/2	22/23						





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COLORADO DEPARTMENT OF REVENUE
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2022 Colorado Individual Income Tax Return

	r or Nonresident (o dent combinatior				0104	PN		if Al		d on due ons	date –	
Your Last Name			Your Fir								Middle	Initial
BODIPATI			HEMA	NTH								
Date of Birth (MM/DD/YYYY)	SSN or ITIN		Deceas	ed								
06/12/1987	805-18-0810				t	he DF	ked and cla R 0102 and	deatl	h cer	rtificate wit	h your re	
Enter the following information	n from vour curre	nt	State of	f Issue	L	_ast 4 c	characters of I	D num	nber	Date of Issua	ance	
driver license or state identific	•		OK	OK 5862					12/16/21			
If Joint, Spouse's Last Name			Spouse	's First I	Name						Middle	Initial
VELAGAPUDI			DIVY	TA .								
Spouse's Date of Birth (MM/DD/YYYY)	Spouse's SSN or I	ΓIN	Deceas	ed	- .							
04/15/1992	966-98-0563				t	he DF	cked and cla R 0102 and	deatl	h cer	rtificate wit	h your re	
Enter the following information	n from vour snous	se's	State of	f Issue	L	_ast 4 d	characters of I	D num	nber	Date of Issua	ance	
Enter the following information current driver license or state	identification care	d.										
Mailing Address									Phon	e Number		
17727 E 54TH AVE									(30	9)750-3	899	
City				State	ZIP	Code		Fore	ign C	ountry (if ap	plicable)	
DENVER				CO	80	249						
To see if you or members	•	•	•						•			
You are a Colorado re AND			•	•							Ū	
	 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. 											
									Ro	und To The	Nearest D	ollar
 Enter Federal Taxable Income from your federal income 1040, 1040 SR, or 1040 SP line 15. 				ax forn	n:						118419	
Include W-2s and 1099s with 0							• 1					00
Therade W-23 and 10003 with V		ons to	Federa	al Taxa	able	Incor	ne					
2. State Addback, enter the s												
1040 SR, or 1040 SP sche	dule A, line 5a (s	ee inst	ructions	s)			• 2					0 0
3. Qualified Business Income	Deduction Addb	ack (se	ee instru	uctions	s)		• 3					0 0



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Name				SSN or ITIN	
HEMANTH BODIP	PATI & DIVYA VELAGAPUD	I		805-18-0810	
4. Itemized Deduc	ction addback (see instruction	ons)	• 4		0 0
	Recapture Prior Year - Non-	,			
Contribution (se	ee instructions)		• 5		00
	s, explain (see instructions)		• 6		0 0
Explain:					
7. Subtotal, sum o	of lines 1 through 6		7	118419	0 0
O Contator of the conta	The DD 0404AD Oak and	Colorado Subtractions			
	om the DR 0104AD Schedul chedule with your return.	e, line 22, you must submit the	8		0 0
DK 0104AD 50	neddie with your return.	•	• 6		00
9. Colorado Taxal	ble Income, subtract line 8 fr	rom line 7	9	118419	00
		4 Book for full-year tax table and pa	rt-year DR	0104PN Schedule	
	rom tax table or the DR 0104 th your return if applicable.	4PN line 36, you must submit the	• 10	4133	0 0
		AMT line 8, you must submit the			
DR 0104AMT v	with your return.	·	• 11		00
12. Recapture of p	rior year credits		• 12		0 0
				4133	
	of lines 10 through 12	D. 10 II	13		00
		R line 48, the sum of lines 14, 15, and	l l		00
		e DR 0104CR with your return. es used – as calculated, or from the	• 14		00
1	•	nd 16 cannot exceed line 13, you mus	t		
•	1366 with your return.		15		00
16. Strategic Capit	al Tax Credit from DR 1330,	the sum of lines 14, 15, and 16 cannot	ot		
exceed line 13,	, you must submit the DR 13	30 with your return.	• 16		00
47. Not Income To	v our of lines 14 15 and 1	C. Culpture at the terror from line 42	47	4133	0.0
		6. Subtract that sum from line 13. dule line 7, you must submit the	17		0 0
DR 0104US with		. •	18		00
511010100 m	ti. your roturn.		- 10	41.22	
	Tax, sum of lines 17 and 18		19	4133	00
	x Withheld from W-2s and 10 g Colorado withholding with y	099s, you must submit the W-2s and/o	or ▶ 20	4970	0 0
10000 olalitiling	, colorado maniolanig with	Sur rotaini.			
21. Prior-year Estir	mated Tax Carryforward		• 21		00
		the quarterly payments remitted for			
this tax year			• 22		00
22 Extension Der	mont remitted with the DD 0	150	. 22		0.0
Las. Extension Payr	ment remitted with the DR 0	100-1	• 23		0 0



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Name					SSN or I	TIN	
HEMANTH BODIPATI		805-1	18-0810				
24. Other Prepayments:	• DR 1079 • 24			0 0			
25. Gross Conservation the DR 1305G with	u must submit ● 25			0 0			
26. Innovative Motor Ve		tive Truck Credit	from form DR 0			0	
submit each DR 061				• 26		0	00
27. Refundable Credits with your return.	from the DR 010	4CR line 14, you	u must submit the	e DR 0104CR ● 27			0 0
with your return.				• 21		4050	
28. Subtotal, sum of line	es 20 through 27			28		4970	00
Lines 20 through 3	2 are only used t		I AGI for TABOR		t vour Colorado	toy liability	
Lines 30 through 33 29. Federal Adjusted Gr					t your Colorado	_	\Box
1040 SR line 11, or		- your rodorar in		• 29		144319	00
30. Nontaxable Social S	Security Income			• 30			0 0
31. Nontaxable interest	income from sta	te and local bon	ds	• 31			00
						144319	
32. Sum of lines 29 thro			for State Sales	Tax Bafund			0 0
	\$48,000	\$48,001 –	\$95,001 –	\$151,001 –	\$209,001 -	\$268,001	_
If line 32 is:	or less	\$95,000	\$151,000	\$209,000	\$268,000	or more	
Single Filers Enter	\$153	\$208	\$234	\$285	\$300	\$486	
Joint Filers Enter	\$306	\$416	\$468	\$570	\$600	\$972	
 33. State Sales Tax Refund: For full-year Colorado residents, born before 2004, or full-year Colorado residents who are under the age of eighteen but are required to file a return. Use the amount on line 32 and reference the table above. See instructions if you are filing an extension. 33 							
34. Sum of lines 28 and	33			34		4970	0 0
						837	
35. Overpayment, if line	34 is greater tha	an line 19 then s	ubtract line 19 fr	om line 34 35			00
36. Estimated Tax Cred	36. Estimated Tax Credit Carryforward to 2023 first quarter, if any. ● 36 0						
If you have an overpayment on line 37 below and would like to donate all or a portion of your overpayment to a qualified Colorado charity, include Form DR 0104CH to contribute.							
37. Refund, subtract line	e 36 from line 35	(see instruction	s)	• 37		837	00
Direct Routing Nur	nber 0 7 1 9	9 2 1 8 9 1	1 Type: X	Checking	Savings	CollegeInvest 5	29
Deposit Account Nur	mber 4 6 8 1	L 2 0 5 3 6	5 7				
For questions regarding CollegeInvest direct deposit or to open an account, visit CollegeInvest.org or call 800-448-2424.							



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Name			SSN or ITIN				
HEMANTH BODIPATI & DIVYA VELAGAPUDI			805-18-0810				
38. Net Tax Due, subtract line 34 from line 19	38		C	0 0			
39. Delinquent Payment Penalty (see instructions)	• 39		C	00			
40. Delinquent Payment Interest (see instructions)	• 40		C	0 0			
41. Estimated Tax Penalty, you must submit the DR (see instructions)	0204 with your return.		(0 0			
42. Amount You Owe, sum of lines 38 through 41 The State may convert your check to a one-time electronic bank by the State. If converted, your check will not be returned. If your Revenue may collect the payment amount directly from your bar	• 42 king transaction. Your bank account may be del r check is rejected due to insufficient or uncolle		arly as the same day receive				
Th	nird Party Designee			ㅓ			
Do you want to allow another person to discuss this return and any related information with the Colorado • X No • Yes. Complete the following: Department of Revenue? See the instructions.							
Designee's Name		Phone N	lumber				
		•					
Sign Below Under penalties of perjury, I declare that to the be	est of my knowledge and belief, this return is tru	ie, 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		(646)	727-7157				
Paid Preparer's Address C	City	State	ZIP Code				
245 ROONEY CT	E BRUNSWICK	NJ	08816				

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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 80261-0006

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.





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Form 104PN

Part-Year Resident/Nonresident Tax Calculation Schedule 2022

Taxpayer's Name		SSN or ITIN							
HEMANTH BOD	IPATI & DIVYA VELAGAPUDI	805-18-0810							
gross income so	you and/or your spouse were a resident of another state for all or part of 2022. The that Colorado tax is calculated for only your Colorado income. Complete this for gh 9 of the DR 0104. If you filed federal form 1040NR, see the instructions.								
	Beginning (N	MM/YY) Ending (MM/YY)							
1. • Taxpayer is	s (mark one): Full-Year Nonresident X Part-Year Resident from	22 12/22							
	Full-Year Resident Nonresident 305-day rule Military	,							
	Beginning (N	MM/YY) Ending (MM/YY)							
2. • Spouse is	(mark one): Full-Year Nonresident X Part-Year Resident from 05/2	12/22							
	Full-Year Resident Nonresident 305-day rule Military								
3.	ederal form you filed: X 1040 1040 NR 1040 SR Othe	:r							
		olorado Information							
4. Enter all inc	ome from form 1040, 1040 SR, or e 1.								
5. Enter incom	e from line 4 that was earned while working in Colorado and/or earned								
	ere a Colorado resident. Part-year residents should include moving	114491							
	mbursements only if paid for moving into Colorado. • 5	00							
	um of all interest/dividend income								
	040, 1040 SR or 1040 SP lines 2b								
and 3b.	• 6 00 00 e from line 6 that was earned while you were a resident of Colorado or								
	the ownership of real or tangible personal property located in Colorado. • 7	00							
	ome from form 1040, 1040 SR or 1040 SP,								
Schedule 1,									
9. Enter incom	e from line 8 that is from State of Colorado unemployment benefits; and/or is								
from anothe	state's benefits that were received while you were a Colorado resident. • 9	00							
	ne from line 7 of form 1040, 1040 SR, or 1040 SP chedule 1 of form 1040, 1040 SR or 1040 SP. • 10								
11. Enter incom	e from line 10 that was earned during that part of the year you were a sident and/or was earned on property located in Colorado. • 11	00							



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Name SSN or ITIN HEMANTH BODIPATI & DIVYA VELAGAPUDI 805-18-0810 **Federal Information Colorado Information** 12. Enter the sum of all income from form 1040, 1040 SR, 00 or 1040 SP lines 4b, 5b and 6b. 12 13. Enter income from line 12 that was received during that part of the year you were a 00 Colorado resident. 13 **14.** Enter the sum of all business and farm income from form 1040, 1040 SR, or 1040 SP, Schedule 1, lines 3 loo • 14 15. Enter income from line 14 that was earned during that part of the year you were a Colorado resident and/or was earned from Colorado sources. 00 15 16. Enter all Schedule E income from form 1040, 1040 SR, -22923 or 1040 SP, Schedule 1, line 5. 00 17. Enter income from line 16 that was earned from Colorado sources; and/or rent and royalty income received or credited to your account during the part of the year you 0 were a Colorado resident: and/or partnership/S corporation/fiduciary income that is taxable to Colorado during the tax year. • 17 00 18. Enter the sum of all other income from form 1040. 1040 SR, or 1040 SP, Schedule 1, lines 1, 2a 18 00 List Type 19. Enter income from line 18 that was earned during that part of the year you were a Colorado resident and/or was derived from Colorado sources. 00 19 List Type 20. Total Income. Enter amount from form 1040, 1040 SR. 144319 or 1040 SP, line 9. 20 00 21. Total Colorado Income. Enter the total from the Colorado column, lines 5, 7, 9, 11, 114491 00 13, 15, 17 and 19. 21 22. Enter all federal adjustments from form 1040, 1040 SR. 0 or 1040 SP, line 10. 00 22 List Type 0 00 23. Enter adjustments from line 22 as follows 23 List Type

- Educator expenses, IRA deduction, business expenses of reservists, performing artists and fee-basis government officials, health savings account deduction, self-employment tax, self-employed health insurance deduction, SEP and SIMPLE deductions are allowed in the ratio of Colorado wages and/or self-employment income to total wages and/or self-employment income.
- Student loan interest deduction, alimony, and tuition and fees deduction are allowed in the Colorado to federal total income ratio (line 21 / line 20).
- · Penalty paid on early withdrawals made while a Colorado resident.
- · Moving expenses for members of the Armed Forces.

For treatment of other adjustments reported on federal form 1040, 1040 SR, or 1040 SP, line 10, see the Colorado Individual Income Tax Guide and/or the Income Tax Topics: Part-Year Residents & Nonresidents.



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Name			SSN or ITIN				
HEMANTH BODIPATI & DIVYA VELAGAPUDI			805-18-0810				
	Federal Information		Colorado Information				
24. Adjusted Gross Income. Enter amount from form 1040, 1040 SP, or 1040 SR line 11.	144319	00					
25. Colorado Adjusted Gross Income. Subtract the amount from the amount on line 21 of Form 104PN.	on line 23 of Form 104PN	25	114491 00				
 26. Additions to Adjusted Gross Income. Enter the sum of lines 3 through 6 of Colorado Form 104 excluding any charitable contribution adjustments. 	6	00					
27. Additions to Colorado Adjusted Gross Income. Enter line 26 that is from non-Colorado state or local bond a Colorado resident.*	interest earned while	27	00				
28. Total of lines 24 and 26 28	144319	00					
29. Total of lines 25 and 27		29	114491 00				
 30. Subtractions from Adjusted Gross Income. Enter the amount from line 8 of Colorado Form 104 excluding any qualifying charitable contributions. 30. Subtractions from Adjusted Gross Income. Enter the amount from line 8 of Colorado Form 104 excluding 		00					
31. Subtractions from Colorado Adjusted Gross Income. Enter any amount from line 30 as follows:		31	00				
 The state income tax refund subtraction to the extent included on line 19 above The federal interest subtraction to the extent included on line 7 above The pension/annuity subtraction and the PERA or DPS retirement subtraction to the extent included on line 13 above The Colorado Agricultural capital gain subtraction to the extent included on line 20 above For treatment of other subtractions, see the Individual Income Tax Guide and/or the Income Tax Topics: Part-Year Residents & Nonresidents. 							
32. Modified Adjusted Gross Income. Subtract line 30 from line 28.	144319	00					
33. Modified Colorado Adjusted Gross Income. Subtract lin 34. Divide line 33 by line 32. Round to four significant digits,		33	114491 00				
e.g. xxx.xxxx 34		%					
35. Tax from the tax table based on income reported on the	e DR 0104 line 9	35	5210 00				
36. Apportioned tax. Multiply line 35 by the percentage on line 34. Enter here and on DR 0104 line 10.	4133	00					

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

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