

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.
▶ Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID) ▶

Taxpayer's name VAMSHI ANNASARAPU	Social security number 290-75-2518
Spouse's name	Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2023 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1	Adjusted gross income	1	126,571.
2	Total tax	2	20,453.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	24,244.
4	Amount you want refunded to you	4	3,791.
5	Amount you owe	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

- I authorize GLOBAL TAXES LLC to enter or generate my PIN

5	2	5	1	8
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 as my signature on the income tax return (original or amended) I am now authorizing.
Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶ _____ Date ▶ _____

Spouse's PIN: check one box only

- I authorize _____ to enter or generate my PIN

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 as my signature on the income tax return (original or amended) I am now authorizing.
Enter five digits, but don't enter all zeros
- I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶ _____ Date ▶ _____

Practitioner PIN Method Returns Only—continue below

Part III Certification and Authentication – Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

2	2	2	4	9	6	0	8	2	7	1
---	---	---	---	---	---	---	---	---	---	---

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ _____ Date ▶ _____

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning _____, 2023, ending _____, 20 _____ See separate instructions.

Your first name and middle initial VAMSHI	Last name ANNASARAPU	Your social security number 290 75 2518
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. 930 RIDGEVIEW DR		Apt. no. 2228	Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. ALLEN	State TX	ZIP code 75013	
Foreign country name	Foreign province/state/county	Foreign postal code	

Filing Status Single Head of household (HOH)

Check only one box. Married filing jointly (even if only one had income) Qualifying surviving spouse (QSS)

Married filing separately (MFS) If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: _____

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) Yes No

Standard Deduction **Someone can claim:** You as a dependent Your spouse as a dependent Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: Were born before January 2, 1959 Are blind Spouse: Was born before January 2, 1959 Is blind

Dependents (see instructions): If more than four dependents, see instructions and check here <input type="checkbox"/>	(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions):	
					Child tax credit	Credit for other dependents
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

Income	1a Total amount from Form(s) W-2, box 1 (see instructions)	1a	141,645.
	b Household employee wages not reported on Form(s) W-2	1b	
	c Tip income not reported on line 1a (see instructions)	1c	
	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d	
	e Taxable dependent care benefits from Form 2441, line 26	1e	
	f Employer-provided adoption benefits from Form 8839, line 29	1f	
	g Wages from Form 8919, line 6	1g	
	h Other earned income (see instructions)	1h	0.
	i Nontaxable combat pay election (see instructions) 1i		
	z Add lines 1a through 1h	1z	141,645.

Attach Sch. B if required.	2a Tax-exempt interest 2a	2a		b Taxable interest 2b	2b	
	3a Qualified dividends 3a	3a		b Ordinary dividends 3b	3b	
	4a IRA distributions 4a	4a		b Taxable amount 4b	4b	
	5a Pensions and annuities 5a	5a		b Taxable amount 5b	5b	
	6a Social security benefits 6a	6a		b Taxable amount 6b	6b	
	c If you elect to use the lump-sum election method, check here (see instructions) <input type="checkbox"/>					
	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>			7		
	8 Additional income from Schedule 1, line 10			8	-15,074.	
	9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income			9	126,571.	
	10 Adjustments to income from Schedule 1, line 26			10		
	11 Subtract line 10 from line 9. This is your adjusted gross income			11	126,571.	
	12 Standard deduction or itemized deductions (from Schedule A)			12	13,850.	
	13 Qualified business income deduction from Form 8995 or Form 8995-A			13		
	14 Add lines 12 and 13			14	13,850.	
	15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income			15	112,721.	

Standard Deduction for—

- Single or Married filing separately, \$13,850
- Married filing jointly or Qualifying surviving spouse, \$27,700
- Head of household, \$20,800
- If you checked any box under Standard Deduction, see instructions.

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	20,453.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	20,453.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	20,453.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
	24	Add lines 22 and 23. This is your total tax	24	20,453.

Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	24,244.
	b	Form(s) 1099	25b	
	c	Other forms (see instructions)	25c	
	d	Add lines 25a through 25c	25d	24,244.
	26	2023 estimated tax payments and amount applied from 2022 return	26	
	27	Earned income credit (EIC) <input type="checkbox"/> NO	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
	31	Amount from Schedule 3, line 15	31	
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	24,244.

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	3,791.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	3,791.
Direct deposit? See instructions.	b	Routing number 081000032 c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d	Account number 355007824293		
	36	Amount of line 34 you want applied to your 2024 estimated tax	36	

Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)	38	

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes**. Complete below. **No**

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

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

Your signature	Date	Your occupation SOFTWARE ENGINEER	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
Phone no. (660) 238-2758	Email address VAMSHIA26@GMAIL.COM		

Paid Preparer Use Only

Preparer's name SYAM PRIYA RAM SAGAR GUPTA TALLAM	Preparer's signature SYAM PRIYA RAM SAGAR GUPTA TALLAM	Date 03/09/2024	PTIN P02082703	Check if: <input type="checkbox"/> Self-employed
Firm's name GLOBAL TAXES LLC	Firm's address 245 ROONEY CT E BRUNSWICK NJ 08816			Phone no. (678) 965-9522
				Firm's EIN 84-3171965

**SCHEDULE 1
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

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

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

OMB No. 1545-0074

2023
Attachment
Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

VAMSHI ANNASARAPU

Your social security number

290-75-2518

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes		1	
2a	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	-15,074.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
a	Net operating loss	8a ()		
b	Gambling	8b		
c	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
e	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
l	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8l		
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
o	Section 951A(a) inclusion (see instructions)	8o		
p	Section 461(l) excess business loss adjustment	8p		
q	Taxable distributions from an ABL account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount: _____	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8		10	-15,074.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2023

Part II Adjustments to Income

11	Educator expenses		11
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106		12
13	Health savings account deduction. Attach Form 8889		13
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14
15	Deductible part of self-employment tax. Attach Schedule SE		15
16	Self-employed SEP, SIMPLE, and qualified plans		16
17	Self-employed health insurance deduction		17
18	Penalty on early withdrawal of savings		18
19a	Alimony paid		19a
b	Recipient's SSN		
c	Date of original divorce or separation agreement (see instructions): _____		
20	IRA deduction		20
21	Student loan interest deduction		21
22	Reserved for future use		22
23	Archer MSA deduction		23
24	Other adjustments:		
a	Jury duty pay (see instructions)	24a	
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b	
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c	
d	Reforestation amortization and expenses	24d	
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e	
f	Contributions to section 501(c)(18)(D) pension plans	24f	
g	Contributions by certain chaplains to section 403(b) plans	24g	
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h	
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i	
j	Housing deduction from Form 2555	24j	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k	
z	Other adjustments. List type and amount: _____	24z	
25	Total other adjustments. Add lines 24a through 24z		25
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10		26

**SCHEDULE E
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Supplemental Income and Loss

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

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.
Go to www.irs.gov/ScheduleE for instructions and the latest information.

OMB No. 1545-0074

2023
Attachment
Sequence No. **13**

Name(s) shown on return

VAMSHI ANNASARAPU

Your social security number

290-75-2518

Part I Income or Loss From Rental Real Estate and Royalties

Note: If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

- A** Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions Yes No
B If "Yes," did you or will you file required Form(s) 1099? Yes No

1a Physical address of each property (street, city, state, ZIP code)

A 4-11-133, RAMAIAH GUDA VIKARABAD TELANGANA IN 501101

B
C

1b Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days		Personal Use Days	QJV
		A	B	C	
A 3		360		0	<input type="checkbox"/>
B					<input type="checkbox"/>
C					<input type="checkbox"/>

Type of Property:

- 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) _____

Income:	Properties:		
	A	B	C
3 Rents received	3 720.		
4 Royalties received	4		
Expenses:			
5 Advertising	5		
6 Auto and travel (see instructions)	6		
7 Cleaning and maintenance	7 1,057.		
8 Commissions	8		
9 Insurance	9		
10 Legal and other professional fees	10		
11 Management fees	11 2,415.		
12 Mortgage interest paid to banks, etc. (see instructions)	12		
13 Other interest	13		
14 Repairs	14 4,857.		
15 Supplies	15 5,400.		
16 Taxes	16		
17 Utilities	17 2,065.		
18 Depreciation expense or depletion	18		
19 Other (list) _____	19		
20 Total expenses. Add lines 5 through 19	20 15,794.		
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21 -15,074.		
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 (15,074.)		
23a Total of all amounts reported on line 3 for all rental properties	23a 720.		
b Total of all amounts reported on line 4 for all royalty properties	23b		
c Total of all amounts reported on line 12 for all properties	23c		
d Total of all amounts reported on line 18 for all properties	23d		
e Total of all amounts reported on line 20 for all properties	23e 15,794.		
24 Income. Add positive amounts shown on line 21. Do not include any losses	24		
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25 (15,074.)		
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2	26 -15,074.		

For Paperwork Reduction Act Notice, see the separate instructions.

NPA -15,074.

Schedule E (Form 1040) 2023



238454 11555

State of Colorado Income Tax Declaration
for Online Electronic Filing

Do not mail this form to the IRS or the Colorado Department of Revenue. Retain with your records.

For Tax Year (MM/DD/YY) 12/31/23
or Fiscal Year beginning (MM/DD/YY)

Tax Type: Individual Income (DR 0104)
Taxpayer Last Name or Business Name: ANNASARAPU
First Name or Business DBA if different from Business Name: VAMSHI
Spouse's Last Name (if applicable):
Taxpayer SSN or ITIN: 290-75-2518
Spouse SSN or ITIN (if applicable):
FEIN:
Taxpayer or Business Address: 930 RIDGEVIEW DR APT 2228
City: ALLEN
State: TX
ZIP: 75013

Part I - Tax Return Information

Table with 4 rows: 1. Total Income from your federal return (see instructions for more information) 1 \$ 126571; 2. Taxable Income (or allowable deduction) from your federal return (see instructions for more information) 2 \$ 112721; 3. Colorado Tax from your Colorado return (see instructions for more information) 3 \$ 3110; 4. Colorado Tax Withheld or Payments, from your Colorado return (see instructions or more information) 4 \$ 3351

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 Federal/Colorado income tax returns, and that said tax returns, statements, schedules and attachments are true, correct, and complete to the best of my knowledge and belief.

Signature:
Date (MM/DD/YY):
Spouse's Signature (If Joint Return, Both Must Sign):
Date (MM/DD/YY):

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 Federal/Colorado income tax returns. If I am the preparer, under penalties of perjury I declare that I have reviewed the above taxpayer's Federal/Colorado income tax returns and that the information provided to me by the taxpayer and the amounts shown in Part I above agree with the amounts shown on said tax returns, and that said tax returns, statements, schedules, and attachments are true, correct, and complete to the best of my knowledge and belief.

ERO's Signature: SYAM PRIYA RAM SAGAR GUPTA TALLAM
Preparer Identification Number, Your SSN, or ITIN: P02082703

Check if also Preparer [X]

Date (MM/DD/YY): 03/09/24



230104 11555



DR 0104 (11/28/23)
COLORADO DEPARTMENT OF REVENUE
Tax.Colorado.gov
Page 1 of 4
(0013)

2023 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

Form with fields for personal information, spouse information, address, and tax calculations. Includes sections for 'Your Last Name', 'Date of Birth', 'Mailing Address', and 'Additions to Federal Taxable Income'.



230104 21555

Name	SSN or ITIN
VAMSHI ANNASARAPU	290-75-2518
4. Federal Deduction addback (see instructions) ● 4	00
5. Nonqualified CollegeInvest Tuition Savings Account distributions (see instructions) ● 5	00
6. Nonqualified Colorado ABLE Account distributions (see instructions) ● 6	00
7. Other Additions, explain (see instructions) ● 7	00
Explain:	
8. Subtotal, sum of lines 1 through 7 ● 8	112721 00
Colorado Subtractions	
9. Subtractions from the DR 0104AD Schedule, line 23, you must submit the DR 0104AD schedule with your return. ● 9	00
10. Colorado Taxable Income, subtract line 9 from line 8 ● 10	112721 00
Tax, Prepayments and Credits: see 104 Book for full-year tax table and part-year DR 0104PN Schedule	
11. Colorado Tax from tax table or the DR 0104PN line 36, you must submit the DR 0104PN with your return if applicable. ● 11	3110 00
12. Alternative Minimum Tax from the DR 0104AMT line 8, you must submit the DR 0104AMT with your return. ● 12	00
13. Recapture of prior year credits ● 13	00
14. Subtotal, sum of lines 11 through 13 ● 14	3110 00
15. Nonrefundable Credits from the DR 0104CR line 54, the sum of lines 15, 16, and 17 cannot exceed line 14, you must submit the DR 0104CR with your return. ● 15	00
16. Total Nonrefundable Enterprise Zone credits used – as calculated, or from the DR 1366 line 85, the sum of lines 15, 16, and 17 cannot exceed line 14, you must submit the DR 1366 with your return. ● 16	00
17. Strategic Capital Tax Credit from DR 1330, the sum of lines 15, 16, and 17 cannot exceed line 14, you must submit the DR 1330 with your return. ● 17	00
18. Net Income Tax, sum of lines 15, 16, and 17. Subtract that sum from line 14. ● 18	3110 00
19. Use Tax reported on the DR 0104US schedule line 7, you must submit the DR 0104US with your return. ● 19	00
20. Net Colorado Tax, sum of lines 18 and 19 ● 20	3110 00
21. CO Income Tax Withheld from W-2s and 1099s, you must submit the W-2s and/or 1099s claiming Colorado withholding with your return. ● 21	3351 00
22. Prior-year Estimated Tax Carryforward ● 22	00
23. Estimated Tax Payments, enter the sum of the quarterly payments remitted for this tax year ● 23	00
24. Extension Payment remitted with the DR 0158-I ● 24	00



230104 31555

Name	SSN or ITIN
VAMSHI ANNASARAPU	290-75-2518
25. Other Prepayments: <input type="checkbox"/> • DR 0104BEP <input type="checkbox"/> • DR 0108 <input type="checkbox"/> • DR 1079 • 25	00
26. Gross Conservation Easement Credit from the DR 1305G line 33, you must submit the DR 1305G with your return. • 26	00
27. Innovative Motor Vehicle and Innovative Truck Credit from form DR 0617, you must submit each DR 0617 with your return. • 27	0 00
28. Refundable Credits from the DR 0104CR line 16, you must submit the DR 0104CR with your return. • 28	00
29. Subtotal, sum of lines 21 through 28 • 29	3351 00
Modified AGI for TABOR	
Lines 30 through 33 are only used to calculate your TABOR Credit, they do not affect your Colorado tax liability.	
30. Federal Adjusted Gross Income from your federal income tax form: 1040, 1040 SR, or 1040 SP • 30	126571 00
31. Nontaxable Social Security Income • 31	00
32. Nontaxable interest income from state and local bonds • 32	00
33. Sum of lines 30 through 32: Modified AGI for TABOR • 33	126571 00
This space is reserved for future use.	
34. State Sales Tax Refund: For full-year Colorado residents, born before 2005, or full-year Colorado residents who are under the age of eighteen but are required to file a return. Enter \$800 for one qualifying taxpayer or \$1,600 for two qualifying taxpayers filing jointly. See instructions if you are filing an extension. • 34	00
35. Sum of lines 29 and 34 • 35	3351 00
36. Overpayment, if line 35 is greater than line 20 then subtract line 20 from line 35 • 36	241 00
37. Estimated Tax Credit Carryforward to 2024 first quarter, if any. • 37	00
If you have an overpayment on line 38 below and would like to donate all or a portion of your overpayment to a qualified Colorado charity, include Form DR 0104CH to contribute.	
38. Refund, subtract line 37 from line 36 (see instructions) • 38	241 00
Direct Deposit Routing Number <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value="2"/> Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> CollegeInvest 529 Account Number <input type="text" value="3"/> <input type="text" value="5"/> <input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="8"/> <input type="text" value="2"/> <input type="text" value="4"/> <input type="text" value="2"/> <input type="text" value="9"/> <input type="text" value="3"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
For questions regarding CollegeInvest direct deposit or to open an account, visit CollegeInvest.org or call 800-448-2424.	



230104 41555

Name		SSN or ITIN	
VAMSHI ANNASARAPU		290-75-2518	
39. Net Tax Due, subtract line 35 from line 20	39		00
40. Delinquent Payment Penalty (see instructions)	40		00
41. Delinquent Payment Interest (see instructions)	41		00
42. Estimated Tax Penalty, you must submit the DR 0204 with your return (see instructions)	42		00
43. Amount You Owe, sum of lines 39 through 42	43		
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. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your bank account electronically.			
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.			
<input checked="" type="radio"/> No <input type="radio"/> Yes. Complete the following:			
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 (MM/DD/YY)	
Spouse's Signature. If joint return, BOTH must sign.		Date (MM/DD/YY)	
Paid Preparer's Name		Paid Preparer's Phone	
GLOBAL TAXES LLC		(678) 965-9522	
Paid Preparer's Address		City	State ZIP Code
245 ROONEY CT		E BRUNSWICK	NJ 08816

REV 01/22/24 PRO

File and pay at: [Colorado.gov/RevenueOnline](https://www.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.



230104PN11555



DR 0104PN (11/08/23)
COLORADO DEPARTMENT OF REVENUE
Tax.Colorado.gov
Page 1 of 3

Form 104PN

Part-Year Resident/Nonresident
Tax Calculation Schedule 2023

Table with 2 columns: Taxpayer's Name (VAMSHI ANNASARAPU) and SSN or ITIN (290-75-2518)

Use this form if you and/or your spouse were a resident of another state for all or part of 2023. 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 10 of the DR 0104. If you filed federal form 1040NR, see the instructions.

1. Taxpayer is (mark one): [] Full-Year Nonresident [X] Part-Year Resident from [] Full-Year Resident [] Nonresident 305-day rule Military. Dates: Beginning (MM/YY) 01/23, Ending (MM/YY) 05/23

2. Spouse is (mark one): [] Full-Year Nonresident [] Part-Year Resident from [] Full-Year Resident [] Nonresident 305-day rule Military. Dates: Beginning (MM/YY), Ending (MM/YY)

3. Mark the federal form you filed: [X] 1040 [] 1040 NR [] 1040 SR [] Other

Table with 3 columns: Description, Federal Information, Colorado Information. Rows 4-11 detailing income and tax calculations.



230104PN21555

Name		SSN or ITIN	
VAMSHI ANNASARAPU		290-75-2518	
		Federal Information	Colorado Information
12. Enter the sum of all income from your federal form 1040, 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 income or (loss) and farm income or (loss) from your federal form 1040. These amounts are found on two separate lines. ● 14	00		
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. ● 15			00
16. Enter all supplemental income and (loss) found on your federal form 1040, Schedule E. ● 16	-15074	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 were a Colorado resident; and/or partnership/S corporation/fiduciary income that is taxable to Colorado during the tax year. ● 17			0 00
18. Enter the sum of all other income from your federal form 1040, Schedule 1 such as taxable refunds, alimony, and income listed as "total other income". ● 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. ● 19			00
List Type			
20. Total Income. Enter total other income amount found on your federal form 1040. ● 20	126571	00	
21. Total Colorado Income. Enter the total from the Colorado column, lines 5, 7, 9, 11, 13, 15, 17 and 19. ● 21			79374 00
22. Enter all federal adjustments from your federal form 1040. ● 22		00	
List Type			
23. Enter adjustments from line 22 as follows ● 23			00
List Type			
<ul style="list-style-type: none"> • 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 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. <p>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.</p>			



230104PN31555



Name		SSN or ITIN	
VAMSHI ANNASARAPU		290-75-2518	
		Federal Information	Colorado Information
24. Adjusted Gross Income. Enter amount from your federal form 1040. 24	126571	00	
25. Colorado Adjusted Gross Income. Subtract line 23 from line 21. 25			79374 00
26. Additions to Adjusted Gross Income. Enter the sum of lines 3 through 7 of Colorado Form 104 excluding any charitable contribution adjustments. 26		00	
27. Additions to Colorado Adjusted Gross Income. Enter any amount from line 26 that is from non-Colorado state or local bond interest earned while a Colorado resident.* 27			00
28. Total of lines 24 and 26 28	126571	00	
29. Total of lines 25 and 27 29			79374 00
30. Subtractions from Adjusted Gross Income. Enter the amount from line 9 of Colorado Form 104 excluding any qualifying charitable contributions. 30		00	
31. Subtractions from Colorado Adjusted Gross Income. Enter any amount from line 30 as follows: 31			00
<ul style="list-style-type: none"> • 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 <p>For treatment of other subtractions, see the Individual Income Tax Guide and/or the Income Tax Topics: Part-Year Residents & Nonresidents.</p>			
32. Modified Adjusted Gross Income. Subtract line 30 from line 28. 32	126571	00	
33. Modified Colorado Adjusted Gross Income. Subtract line 31 from line 29. 33			79374 00
34. Divide line 33 by line 32. Round to the fourth decimal place, i.e. xxx.xxxx 34	62.7110	%	
35. Tax from the tax table based on income reported on the DR 0104 line 10 35			4960 00
36. Apportioned tax. Multiply line 35 by the percentage on line 34. Enter here and on DR 0104 line 11. 36	3110	00	

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

