(Rev. January 2021)

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

▶ ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID)					
Taxpayer's name	Social securi	y numb	er		
SAI PRASAD ASHILA	171-02	-3044	1		
Spouse's name	Spouse's soc	ial secu	ırity numb	er	
Part I Tax Return Information — Tax Year Ending December 31, 2022	 (Enter vear vou a	re aut	horizin	a.)	
Enter whole dollars only on lines 1 through 5.	(=:::0:) 0 0:: 0			9-/	
Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.					
1 Adjusted gross income		1	8	4,3	95.
2 Total tax		2	1	1,3	31.
3 Federal income tax withheld from Form(s) W-2 and Form(s) 1099		3	1	3,4	30.
4 Amount you want refunded to you		4		2,0	99.
5 Amount you owe		5			
Part II Taxpayer Declaration and Signature Authorization (Be sure you get Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or an					
return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reasor for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authoriz Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution accorpayment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to the payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellate business days prior to the payment (settlement) date. I also authorize the financial institutions involved taxes to receive confidential information necessary to answer inquiries and resolve issues related to personal identification number (PIN) below is my signature for the income tax return (original or amend Electronic Funds Withdrawal Consent.	n for rejection of the tree the U.S. Treasury a punt indicated in the tree tree tree to debit the tree tree tree to debit the tree tree tree tree tree tree tree	ansmised and its of an architecture and its of architecture and it	ssion, (b) lesignate learation s o this ac o revoke led no la ectronic knowled	the red Find of two counts (care to cay make)	reason ancial are for t. This ncel) a than 2 nent of lat the
				7	
Taxpayer's PIN: check one box only X I authorize GLOBAL TAXES LLC to enter or get	porato my DIN	3 0	4 4		0 mv
ERO firm name	En		digits, but	t	ıs my
signature on the income tax return (original or amended) I am now authorizing. I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PII below.					
Your signature ▶ Da	nte ▶				
Spouse's PIN: check one box only					
· _	nerate my PIN				ıs my
ERO firm name	,	ter five o	 diaits. but	_	is iiiy
signature on the income tax return (original or amended) I am now authorizing.	do	n't ente	r all zeros	;	
I will enter my PIN as my signature on the income tax return (original or amended) if you are entering your own PIN and your return is filed using the Practitioner PII below.					
Spouse's signature ▶ Da	ate ▶				
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 6	1 9	8	9
	Don't ent	er all ze	ros		
I certify that the above numeric entry is my PIN, which is my signature for the electronic individual in authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I arrequirements of the Practitioner PIN method and Pub. 1345 , Handbook for Authorized IRS <i>e-file</i> Providence.	m submitting this retu	ırn in a	ccordan		
ERO's signature ▶ Da	ate ►				
ERO Must Retain This Form — See Instruction	ons				
Don't Submit This Form to the IRS Unless Requeste					

E 1040 Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return

2022

OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space.

Filing Status	s 🔀 S	Single Married filing jointly	Marrie	ed filing separately	(MFS)	☐ Head of	household (HOH)		lifying use (Q		ing
Check only one box.	•	u checked the MFS box, enter the n on is a child but not your dependent	,	our spouse. If you	ı check	ed the HOH or	QSS box, enter t		,	,	qualifying
Your first name	and mi	ddle initial	Last nar	me				Your so	cial se	curity r	number
SAI PRAS	SAD		ASHI	LA				171-	02-3	044	
If joint return, s	pouse's	first name and middle initial	Last nar	me				Spouse	's socia	l secur	ity number
Home address	(numbe	r and street). If you have a P.O. box, see	instruction	ons.			Apt. no.	Preside	ntial El	ection	Campaign
6653 MCI	KINNE	EY RANCH PKWY						Check			•
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete sp	paces below.	Sta	te	ZIP code		_		, want \$3 necking a
MCKINNE	Y				T	ζ	75070	box bel	ow will	not ch	•
Foreign countr	y name		F	Foreign province/sta	te/count	ty	Foreign postal code	your ta	k or refu Y ∏	_	Spouse
Digital		ny time during 2022, did you: (a) rec	,				, , , , , , , , , , , , , , , , , , , ,	. ,			
Assets	exch	ange, gift, or otherwise dispose of a		<u>_</u>			asset)? (See instr	ructions.)	Y	es [⊠ No
Standard Deduction		eone can claim:	•	·		a dependent					
Age/Blindnes	s You:	Were born before January 2, 1	958	Are blind S	pouse	: Was bor	n before January	2, 1958		ls blinc	t
Dependent	s (see	instructions):		(2) Social secu	rity	(3) Relationsh	ip (4) Check the	box if quali	fies for	(see ins	structions):
If more	(1) Fi	rst name Last name		number		to you	Child tax	credit	Credit f	or other	dependents
than four											
dependents, see instruction	s ——										
and check	·										
here]										
Income	1a	Total amount from Form(s) W-2, b	ox 1 (see	e instructions) .				. 1a	1	<u>93</u>	,917.
	b	Household employee wages not re	•					. 1b)		
Attach Form(s) W-2 here. Also	С	Tip income not reported on line 1a	a (see ins	structions)				. 10			
attach Forms	d	Medicaid waiver payments not rep		()	e instru	ıctions)		. 1c			
W-2G and 1099-R if tax	е	Taxable dependent care benefits t		•				. 1e			
was withheld.	f	Employer-provided adoption bene	fits from	n Form 8839, line	29 .			. 1f			
If you did not	g	Wages from Form 8919, line 6.						10			
get a Form W-2, see	h	Other earned income (see instruct	,				· · · · ·	. 1h	1		0.
instructions.	i	Nontaxable combat pay election (see instr	fuctions)		<u>li</u>				0.2	017
		Add lines 1a through 1h	 o-		 L T			. 1z		93	,917.
Attach Sch. B if required.	2a	' -	2a			axable interes		. 2b			
	3a		3a			ordinary divide		. 3b			
Standard	4a 5a		4a 5a			axable amoun axable amoun		. 4b			
Standard Deduction for—	6a		6a			axable amoun		. 6b			
Single or Married filing	C	If you elect to use the lump-sum e		method check be				. 50			
separately,	7	Capital gain or (loss). Attach Sche		•	`	,					-9.
\$12,950 Married filing	8	Other income from Schedule 1, lin						. 8		9	,513.
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7						. 9	_		,395.
surviving spouse,	10	Adjustments to income from Sche		•				. 10			,
\$25,900 • Head of	11	Subtract line 10 from line 9. This is						. 11		84	,395.
household, \$19,400	12	Standard deduction or itemized	-					. 12			,950.
If you checked	13	Qualified business income deduct		•	,	5-A		. 13			
any box under Standard	14							. 14		12	,950.
Deduction, see instructions.	15	Subtract line 14 from line 11. If zer	o or less	s, enter -0 This is	s your t	taxable incom	ie	. 15	i		,445.

Form 1040 (202	2)								Page 2
Tax and	16	Tax (see instructions). Check if any	y from Form(s): 1	8814	2 4972	3 🗌		. 16	11,331.
Credits	17	Amount from Schedule 2, line 3						. 17	
	18	Add lines 16 and 17						. 18	11,331.
	19	Child tax credit or credit for other	r dependents from S	chedule	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 ze	ero or less, enter -0-					. 22	11,331.
	23	Other taxes, including self-emplo	,						0.
	24	Add lines 22 and 23. This is your	total tax					. 24	11,331.
Payments	25	Federal income tax withheld from	ղ:			1 1			
	а	Form(s) W-2				25a	13,43	30.	
	b	Form(s) 1099				25b			
	С	Other forms (see instructions) .				25c			
	d	Add lines 25a through 25c						. 25d	13,430.
If you have a	26	2022 estimated tax payments and						. 26	
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)			. No .	27			
allacii Scii. Elo.	28	Additional child tax credit from Scl	hedule 8812			28			
	29	American opportunity credit from	*			29			
	30	Reserved for future use				30			
	31	Amount from Schedule 3, line 15				31			
	32	Add lines 27, 28, 29, and 31. The	,						
	33	Add lines 25d, 26, and 32. These							13,430.
Refund	34	If line 33 is more than line 24, sub				•			2,099.
	35a	Amount of line 34 you want refur						35a	2,099.
Direct deposit? See instructions.	b	Routing number 0 7 1 0			c Type: 🔀	Checking	Savi	ngs	
oce manactions.	d	Account number 3 1 6 3							
	36	Amount of line 34 you want appli	ed to your 2023 est	imated	tax	36			
Amount You Owe	37	Subtract line 33 from line 24. This For details on how to pay, go to			e instructions .			. 37	
	38	Estimated tax penalty (see instru	ctions)			38			
Third Party Designee		you want to allow another perstructions					s. Comp	lete below.	⊠ No
		signee's		Phone				dentification	
		me		10.			number (F		
Sign Here		der penalties of perjury, I declare that I I ief, they are true, correct, and complete.							
TICIC	Yo	ur signature	Date	Y	our occupation				nt you an Identity
laint vatuus?					OFTWARE E	NCTNEED.	ING	(see inst.)	IN, enter it here
Joint return? See instructions. Keep a copy for your records.	Sp	ouse's signature. If a joint return, both r	must sign. Date		oouse's occupati		ING		nt your spouse an ection PIN, enter it here
	Ph	one no. (516) 727-6771	Email ad	dress S	AIPRASAD.AS	HILA@GMAII	.COM		
Daid	Pre		parer's signature			Date	PTI	N	Check if:
Paid	SYAN	I PRIYA RAM SAGAR GUPTA TALLAM SYA	M PRIYA RAM SA	GAR GU	PTA TALLAM	03/01/20	24 PO	2082703	Self-employed
Preparer	Fir	m's name GLOBAL TAXES	LLC						(678) 965-9522
Use Only	Fir	m's address 245 ROONEY C		K NJ	08816			Firm's EIN	88-2145487
Co to ununu !	/Γa::::	a1040 for instructions and the latest infe							F 1040 (2000)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074 Attachment Sequence No. 01

Department of the Treasury Internal Revenue Service

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

Name	(s) shown on Form 1040, 1040-SR, or 1040-NR		Your so	cial s	ecurity number
SAI	PRASAD ASHILA		171-0	2-30	44
Par	t 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. Att			5	-9,513.
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
а	Net operating loss	8a ()		
b	Gambling	8b			
С	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d ()		
е	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			
I	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	81			
m	Olympic and Paralympic medals and USOC prize money (see				
	instructions)	8m		-	
	Section 951(a) inclusion (see instructions)	8n			
0	Section 951A(a) inclusion (see instructions)	80		-	
р	Section 461(I) excess business loss adjustment	8p		-	
q	Taxable distributions from an ABLE account (see instructions)	8q 8r			
r	Scholarship and fellowship grants not reported on Form W-2 Nontaxable amount of Medicaid waiver payments included on Form	or			
S	1040, line 1a or 1d	8s (١		
	Pension or annuity from a nonqualifed deferred compensation plan or	05 (
t	a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
z	Other income. List type and amount:	00			
~	other income. Else type and amount.	8z			
9	Total other income. Add lines 8a through 8z			9	

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

-9,513.

10

Schedule 1 (Form 1040) 2022 Page **2**

Par	t II Adjustments to Income		
11	Educator expenses	 11	
12	Certain business expenses of reservists, performing artists, and fee-basis gov		
	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		
С	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:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
d	Reforestation amortization and expenses	-	
е	Repayment of supplemental unemployment benefits under the Trade		
	Act of 1974	-	
f	Contributions to section 501(c)(18)(D) pension plans		
g	Contributions by certain chaplains to section 403(b) plans	-	
h	Attorney fees and court costs for actions involving certain unlawful		
	discrimination claims (see instructions)	-	
- 1	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		
	tax law violations		
J	Excess deductions of section 67(e) expenses from Schedule K-1 (Form		
k	1041)		
-	Other adjustments. List type and amount:		
Z	04-		
25	Total other adjustments. Add lines 24a through 24z	25	
25 26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here	23	
20	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	

SCHEDULE D (Form 1040)

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

Capital Gains and Losses

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

Go to www.irs.gov/ScheduleD for instructions and the latest information.
Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2022

Attachment Sequence No. **12**

	(s) shown on return I PRASAD ASHILA				r social se	ecurity number 3044
	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona					
Pa	Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (see ins	tructions)
lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustn to gain or le Form(s) 894 line 2, col	nents oss from 19, Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	490.	499.			-9.
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term gain from Form 6252 and short-term gain or (le	•			4	
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	rusts fron 	n 5	
6	Short-term capital loss carryover. Enter the amount, if an Worksheet in the instructions	-	-	_	r 6	(
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwise					-9.
Pai	Long-Term Capital Gains and Losses—Ger	nerally Assets H	leld More Than	One Yea	ar (see i	nstructions)
lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustn to gain or le Form(s) 894 line 2, col	nents oss from 9, Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824					
	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Scheo	dule(s) K-1	12	
	Capital gain distributions. See the instructions					
	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions				14	(
15	Net long-term capital gain or (loss). Combine lines 8a	through 14 in co	lumn (h). Then, go	o to Part I	II	

Schedule D (Form 1040) 2022 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 16 -9. • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet . 19 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. □ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: 21 • The loss on line 16; or 9.) 21 • (\$3,000), or if married filing separately, (\$1,500) **Note:** When figuring which amount is smaller, treat both amounts as positive numbers. Do you have gualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? 22 ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Form **8949**

Sales and Other Dispositions of Capital Assets

Go to www.irs.gov/Form8949 for instructions and the latest information.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074

2022

Attachment
Sequence No. 12A

Name(s) shown on return

SAI PRASAD ASHILA

Department of the Treasury

Internal Revenue Service

Social security number or taxpayer identification number

171-02-3044

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

broker and may even tell you which box to check. Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above) X (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss 1 If you enter an amount in column (a). (h) enter a code in column (f). (d) Cost or other basis Gain or (loss) (c) (a) (b) Date sold or Proceeds See the **Note** below See the separate instructions. Subtract column (e) Description of property Date acquired disposed of and see Column (e) (sales price) from column (d) and (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (Mo., day, yr.) combine the result (see instructions) in the separate (g) Code(s) from Amount of adjustment instructions. with column (a). instructions Robinhood Crypto LLC 01/01/22 12/31/22 490. 499. -9.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

SCHEDULE E (Form 1040)

Supplemental Income and Loss

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

Department of the Treasury Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-NR, or 1041, Go to www.irs.gov/ScheduleE for instructions and the latest information. Attachment Sequence No. 13

OMB No. 1545-0074

Name(s) shown on return Your social security number 171-02-3044 SAI PRASAD ASHILA 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. Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions . Physical address of each property (street, city, state, ZIP code) 1a 1-53/2 ATHVELLY MEDCHAL HYDERABAD TELANGANA IN 501401 Α В C 1b Type of Property **Fair Rental Personal Use** For each rental real estate property listed QJV (from list below) above, report the number of fair rental and **Davs Davs** personal use days. Check the QJV box only Α Α 365 0 if you meet the requirements to file as a В В qualified joint venture. See instructions. С C Type of Property: 3 Vacation/Short-Term Rental 1 Single Family Residence 5 Land 7 Self-Rental 8 Other (describe) 2 Multi-Family Residence 4 Commercial 6 Royalties **Properties:** Α В C Income: 3 620. 4 Royalties received . 4 **Expenses:** 5 5 Advertising 6 Auto and travel (see instructions) 6 750. 7 Cleaning and maintenance. 7 8 Commissions 8 9 9 Insurance . . 10 10 Legal and other professional fees 11 Management fees 11 1,546. 12 Mortgage interest paid to banks, etc. (see instructions) 12 13 13 2,774. 14 14 Repairs 3,218. 15 Supplies 15 16 16 Taxes 17 Utilities 17 1,845. 18 18 Depreciation expense or depletion 19 19 20 20 10,133. Total expenses. Add lines 5 through 19 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 -9,513. 22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 9,513.) 620. Total of all amounts reported on line 3 for all rental properties Total of all amounts reported on line 4 for all royalty properties 23b Total of all amounts reported on line 12 for all properties 23c 23d Total of all amounts reported on line 18 for all properties 10,133. Total of all amounts reported on line 20 for all properties 23e 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 9,513. Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result 26 here. If Parts II, III, 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 .

-9,513.



228454 11555

DR 8454 (01/26/23)
COLORADO DEPARTMENT OF REVENUE
Denver CO 80261-0005

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State of Colorado Income Tax Declaration for Online Electronic Filing

	t mail this form to the				ar (MM/DD/YY)			or Fiscal	Year I	begin	ning (M	IM/DD/YY)
Depar	tment of Revenue. Ret	ain with you	ır records.	12/31/	22							
Tax Typ	ре											
X	Individual Income (DR 0104)	Corporat (DR 0112	te Income 2)		nership/S-0	Corp Ind	come	• [iary I (105)	ncome
Тахрау	er Last Name or Business Nar	ne	First Na	me or Busine	ess DBA if dit	fferent fro	m Bu	siness Na	ame			Middle Initial
ASHI	LA		SAI E	PRASAD								
Spouse	e's Last Name (if applicable)		First Na	me								Middle Initial
T	or OOM or ITIN		0	OON ITIN	//f - - - -				FFIN			
	er SSN or ITIN		Spouse	SSN OF ITIN	(if applicable)				FEIN			
171-	02-3044											
Taxpay	rer or Business Address				City				S	state	ZIP	
6653	MCKINNEY RANCH PK	(WY			MCKINNE	ΞY				ΓX	75	070
		F	Part I — Tax	Return li	nformation	n						
	al Income from your fede						1	\$				84395
	able Income (or allowabl more information)	e deduction) f	rom your fee	deral retur	n (see inst	ructions	2	\$				71445
3. Cold	orado Tax from your Colo	orado return (s	see instruction	ons for mo	ore informa	ition)	3	\$				1760
4. Col	orado Tax Withheld or Panore information)	ayments, from	your Colora	ado return	(see instru	ıctions	4					2058
	,	P	art II — Dec	laration o	of Tax Pay	er		Ι Ψ				
Federal/C I understa	enalties of perjury, I declare that the Colorado income tax returns, and the and that I (or my Electronic Return s, and attachments upon request be	nat said tax returns, s n Originator (ERO) if	statements, sched f applicable) may	dules and attac be required to	chments are tru provide paper	e, correct, r copies of	and co	mplete to t	he bes my retu	t of my urns, v	y knowl vithhold	edge and belief. ling statements,
Signatu		,		,			· -	(MM/DD/Y				
Spouse	s's Signature (If Joint Return, B	oth Must Sign)					Date	(MM/DD/Y	Y)			
		Part III —	Declaration	of ERO/F	Preparer/T	ransmi	tter					
	If the transmitter did not	prepare the ta	ax return, ch	neck here								
the prepa taxpayer correct, a have prov of limitation	of the preparer, I declare only that the preparer, I declare only that the previous of perjury I declared the amounts shown in Part I aloud complete to the best of my know vided the taxpayer with copies of a cons, and to provide paper copies of at any time during this period.	clare that I have revieus over agree with the and belief. A wiledge and belief. A will forms and informa	ewed the above to amounts shown o As preparer, I furth ation filed. I also a	axpayer's Fedon said tax returher declare the agree to maint	eral/Colorado ir rns, and that sa at I have obtain ain this signed	ncome tax raturated the tax returned the tax Form (DR	returns rns, sta payer's 8454)	and that the tements, so signature for the period	ne infor chedule on this iod cov	mationes, an formered b	n provion d attach at the toy the 0	ded to me by the hments are true, ime of filing and Colorado statute
ERO's	Signature				Prepa	arer Identi	ificatio	n Numbe	er, You	r SSN	۱, or IT	TIN
SYAM	PRIYA RAM SAGAR G	;UPTA TALLA	M		P02	082703	3					
	Charlett alex Dec				Date	(MM/DD/YY)					
	Check if also Prepa	rer X			03/	01/24						





DR 0104 (11/18/22)
COLORADO DEPARTMENT OF REVENUE
Tax. Colorado.gov
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(0013)

2022 Colorado Individual Income Tax Return

	r or Nonreside dent combina				0104	PN		if Abro	ad on due ons	date –	
Your Last Name			Your Fir							Middle	Initial
ASHILA			SAI	PRASA	AD						
Date of Birth (MM/DD/YYYY)	SSN or ITIN		Decease	ed							
02/17/1994	171-02-30) 4 4			t	he DF	cked and cla R 0102 and	death c	ertificate w	ith your re	
Enter the following information driver license or state identific	•	ırrent	State of	fIssue	L	₋ast 4 c	characters of I	D number	Date of Issu	uance	
If Joint, Spouse's Last Name			Spouse'	s First I	Name					Middle	Initial
Spouse's Date of Birth (MM/DD/YYYY)	Spouse's SSN	or ITIN	Deceas	ed							
					l [·] t	f ched he DF	cked and cla R 0102 and	aiming a death c	refund, yo ertificate w	u must ind ith your re	clude eturn.
Enter the following information	n from vour sr))))	State of	fIssue	L	₋ast 4 c	characters of I	D number	Date of Issu	ıance	
current driver license or state	identification	card.									
Mailing Address								Pho	ne Number		
6653 MCKINNEY RANCH PM	XWY										
City				State	ZIP	Code		Foreign	Country (if ap	oplicable)	
MCKINNEY				TX	75	070					
To see if you or members	s of your hou	sehold qua	lify for f	ree or	redu	iced-d	cost health	coverag	je, check tł	nis box if:	
You are a Colorado re AND			•							•	
You give permission for for Health Colorado (the											inect
								R	ound To The	Nearest D	ollar
1. Enter Federal Taxable Inco		r federal in	come ta	ax forr	n:					71445	5 0
1040, 1040 SR, or 1040 SI Include W-2s and 1099s with 0) C					• 1				00
Include W-25 and 10995 with		ditions to	Federa	ıl Taxa	able	Incor					
2. State Addback, enter the s											
1040 SR, or 1040 SP sche				-			• 2				0 0
O Coalificat Books and I	Dadwatia A	-1-II1- /									
3. Qualified Business Income	: Deduction A	<u>aaback (se</u>	<u>e instru</u>	<u>ictions</u>	S)		• 3				0 0



DR 0104 (11/18/22)
COLORADO DEPARTMENT OF REVENUE
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220104 21555

Name		SSN or ITIN	
SAI PRASAD ASHILA		171-02-3044	
4. Itemized Deduction addheak (see instructions)	- 4		0 0
4. Itemized Deduction addback (see instructions)5. CollegeInvest Recapture Prior Year - Non-qualifying Tuition Program	• 4		00
Contribution (see instructions)	• 5		00
Contribution (See instructions)	• 5		
6. Other Additions, explain (see instructions)	• 6		0 0
Explain:			
7. Subtotal, sum of lines 1 through 6	7	71445	0 0
Colorado Subtractions 8. Subtractions from the DR 0104AD Schedule, line 22, you must submit the			
DR 0104AD schedule with your return.	• 8		00
DR 0104AD Schedule With your fetum.	• 0		00
9. Colorado Taxable Income, subtract line 8 from line 7	• 9	71445	00
Tax, Prepayments and Credits: see 104 Book for full-year tax table and p		R 0104PN Schedule	100
10. Colorado Tax from tax table or the DR 0104PN line 36, you must submit the			
DR 0104PN with your return if applicable.	• 10	1760	0 0
11. Alternative Minimum Tax from the DR 0104AMT line 8, you must submit the			
DR 0104AMT with your return.	• 11		0 0
12. Recapture of prior year credits	• 12		0 0
		17.00	
13. Subtotal, sum of lines 10 through 12	13	1760	00
14. Nonrefundable Credits from the DR 0104CR line 48, the sum of lines 14, 15, and	d 16		
cannot exceed line 13, you must submit the DR 0104CR with your return.	• 14		0 0
15. Total Nonrefundable Enterprise Zone credits used – as calculated, or from the			
DR 1366 line 85, the sum of lines 14, 15, and 16 cannot exceed line 13, you must			
submit the DR 1366 with your return.	• 15		00
16. Strategic Capital Tax Credit from DR 1330, the sum of lines 14, 15, and 16 cann	i		00
exceed line 13, you must submit the DR 1330 with your return.	• 16		00
17. Net Income Tax, sum of lines 14, 15, and 16. Subtract that sum from line 13.	17	1760	00
18. Use Tax reported on the DR 0104US schedule line 7, you must submit the	- ''		
DR 0104US with your return.	• 18		00
		17.00	
19. Net Colorado Tax, sum of lines 17 and 18	19	1760	00
20. CO Income Tax Withheld from W-2s and 1099s, you must submit the W-2s and	/or	2058	
1099s claiming Colorado withholding with your return.	• 20	2030	00
21. Prior-year Estimated Tax Carryforward	• 21		0 0
22. Estimated Tax Payments, enter the sum of the quarterly payments remitted for	. 22		0.0
this tax year	• 22		0 0
23 Extension Dayment remitted with the DD 0159 I	• 23		0 0
23. Extension Payment remitted with the DR 0158-I	■ 23		0 0



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Name					SSN or	ITIN
SAI PRASAD ASHILA	7				171-	02-3044
24. Other Prepayments:	● DR 01	04BEP	DR 0108	• DR 1079 • 24		
05 00000 000000000000000000000000000000	F	Programme DD 4	0050 15 00			0.0
25. Gross Conservation the DR 1305G with		III from the DR 1	305G line 33, yo	ou must submit		0.0
26. Innovative Motor Ve		ative Truck Credi	t from form DR 0			
submit each DR 061				• 26		0 0 0
27. Refundable Credits			u must submit th			
with your return.				• 27		0.0
						2058
28. Subtotal, sum of line	s 20 through 27			28		2038 00
Lines 20 through 2	2 are only used:		d AGI for TABO		at vour Colorada	a tay liability
Lines 30 through 33 29. Federal Adjusted Gr					t your Colorade	
1040 SR line 11, or		n your reactar in	come tax form.	• 29		84395
				0 20		
30. Nontaxable Social S	Security Income			• 30		0.0
31. Nontaxable interest	income from sta	ite and local bon	ids	• 31		0.0
22 Cum of lines 20 three	wah 24. Madifia	d ACI for TADOL	2	32		84395
32. Sum of lines 29 thro			for State Sales			00
	\$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 Ref						
full-year Colorado re			•			
to file a return. Use			ence the table ab			0.6
instructions if you ar	e filing an exten	sion.		• 33		0.0
34. Sum of lines 28 and	33			34		2058 00
04. Carr or lines 20 and						
35. Overpayment, if line	34 is greater th	an line 19 then s	subtract line 19 fr	om line 34 35		²⁹⁸ 00
36. Estimated Tax Cred	it Carryforward t	o 2023 first quai	rter, if any.	• 36		0.0
If you have an avernavi	mont on line 27 i	holow and would	l lika ta danata a	ll or a partian of	vour overnovm	ant to a gualified
If you have an overpaying Colorado charity, include				iii or a portion or	your overpayin	ent to a qualified
Colorado charity, includ	e i dilli bit did-	+CIT to continue	G .			
						000
37. Refund, subtract line	e 36 from line 35	(see instruction	ıs)	• 37		²⁹⁸ 00
Direct Routing Nur	mber 0 7 1 (0 0 0 0 1 3	3 Type: X	Checking	Savings	CollegeInvest 529
Deposit Account Nur	mber 3 1 6 3	3 8 8 7 8				
Deposit Account Nur	mber 3 1 6 3	3 8 8 7 8				
For questions rega	rding CollegeInves	st direct deposit or	to open an accour	nt, visit <i>CollegeInve</i>	est.org or call 800	0-448-2424.



220104 41555

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Name			SSN or ITIN
SAI PRASAD ASHILA			171-02-3044
38. Net Tax Due, subtract line 34 from line 19	38		0.0
39. Delinquent Payment Penalty (see instructions)	• 39		0.0
40. Delinquent Payment Interest (see instructions)	• 40		0.0
41. Estimated Tax Penalty, you must submit the D			
(see instructions)	• 41		0.0
42. Amount You Owe, sum of lines 38 through 41 The State may convert your check to a one-time electronic ba	• 42	hitod as or	orly as the same day received
by the State. If converted, your check will not be returned. If your check will not be returned. If you Revenue may collect the payment amount directly from your because the converted to a one-time electronic base.	our check is rejected due to insufficient or uncolle		
	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	ollowing:
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 tr	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 Code
245 ROONEY CT	E BRUNSWICK	NJ	08816

REV 02/09/23 PRO

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 80261-000**5**

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 ITII	N .	
SAI PRASAD	ASHILA				171-02	-3044	
gross income s	you and/or your spouse were a reside that Colorado tax is calculated for ough 9 of the DR 0104. If you filed federal	only your Colorado	o income. Comple	te this for			
1. • Taxpayer	s (mark one): X Full-Year Nonresid	dent Part-Ye	ear Resident from	Beginning (N	MM/YY) E	Ending (MM/YY)	
	Full-Year Reside	nt Nonre	sident 305-day rul	e Military			
2. ● Spouse is	(mark one): Full-Year Nonresid	dent Part-Ye	ear Resident from	Beginning (N	IM/YY) E	Ending (MM/YY)	
	Full-Year Reside	nt Nonre	sident 305-day rul	e Military			
3. • Mark the f	ederal form you filed: X 1040	1040 NR	1040 SR	Othe	r		
	, , , , , , , , , , , , , , , , , , , ,		ral Information	Co	lorado In	formation	
	come from form 1040, 1040 SR, or		ral Information	C 0	lorado In	formation	
4. Enter all in 1040 SP lir 5. Enter incon while you w	come from form 1040, 1040 SR, or	Fede • 4 working in Coloracesidents should income	ral Information 93917 do and/or earned	00	lorado In	47250	00
4. Enter all in 1040 SP lin 5. Enter incon while you wexpense re 6. Enter the s	come from form 1040, 1040 SR, or ne 1. ne from line 4 that was earned while vere a Colorado resident. Part-year re	Fede ◆ 4 working in Coloracesidents should include into Colorado.	93917 do and/or earned clude moving	00	lorado In	47250	00
4. Enter all in 1040 SP lin 5. Enter incon while you wexpense re 6. Enter the sefrom form and 3b. 7. Enter incom	come from form 1040, 1040 SR, or ne 1. The from line 4 that was earned while were a Colorado resident. Part-year residents only if paid for moving um of all interest/dividend income 1040, 1040 SR or 1040 SP lines 2the from line 6 that was earned while you	Fede • 4 working in Colorace sidents should incomplete into Colorado. • 6 u were a resident constant of the colorace into Colorace.	do and/or earned clude moving	5 00	olorado In	47250	000
4. Enter all in 1040 SP lin 5. Enter incom while you we expense re 6. Enter the series from form and 3b. 7. Enter incom derived from Schedule 1	come from form 1040, 1040 SR, or the 1. The from line 4 that was earned while were a Colorado resident. Part-year residents only if paid for moving um of all interest/dividend income 1040, 1040 SR or 1040 SP lines 25 to the ownership of real or tangible persistence from form 1040, 1040 SR or 1040, line 7.	Fede • 4 working in Colorace sidents should incident into Colorado. • 6 u were a resident conal property local 40 SP, • 8	do and/or earned clude moving of Colorado or ted in Colorado.	5 00 7	lorado In	47250	
 4. Enter all in 1040 SP lin 1040 SP lin 5. Enter income while you wexpense received from form and 3b. 7. Enter income derived from 8. Enter all income Schedule 1 9. Enter income from another 	come from form 1040, 1040 SR, or ne 1. The from line 4 that was earned while were a Colorado resident. Part-year resident and the series and	Fede • 4 working in Coloradesidents should incidents should incident colorado. • 6 u were a resident conal property location on the second should be second should should be second should should be second should should be second should be second should should be second should should should be second should should should be second should sho	oral Information 93917 do and/or earned clude moving of Colorado or ted in Colorado.	00 5 00 7 00 s	olorado In	47250	
4. Enter all in 1040 SP lin 1040 SP lin 5. Enter incom while you wexpense re 6. Enter the series from form and 3b. 7. Enter incom derived from Schedule 1 9. Enter all income from another 10. Enter all income and line 4 of 5	come from form 1040, 1040 SR, or ne 1. The from line 4 that was earned while vere a Colorado resident. Part-year rembursements only if paid for moving um of all interest/dividend income 1040, 1040 SR or 1040 SP lines 2b or 1040, 1040 SR or 1040, 1040 SR or 1040 SR	Fede • 4 working in Coloradesidents should incidents should incident colorado. • 6 u were a resident conal property locate to the should incident conal property locate to the should be should	oral Information 93917 do and/or earned clude moving of Colorado or ted in Colorado. ont benefits; and/or is lorado resident. -9	00 5 00 7 00 s	olorado In	47250	00



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2. Enter the sum of all income from 1040, 1040 SR, or 1040 SP lines 4b, 5b and 6b. 2. Enter income from line 12 that was received during that part of the year you were a Colorado resident. 4. Enter the sum of all business and farm income from form 1040, 1040 SR, or 1040 SP, Schedule 1, lines 3 and 6. 5. 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. 6. Enter all Schedule E income from 1040, 1040 SR, or 1040 SP, Schedule 1, line 5. 7. 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. 8. Enter the sum of all other income from form 1040, 1040 SR, or 1040 SP, Schedule 1, lines 1, 2a and 9. List Type 9. 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. 9 to colorado resident and/or was derived from Colorado sources. 9 to colorado resident and/or was derived from Colorado sources. 9 to colorado resident and/or was derived from Colorado sources. 9 to colorado resident and/or was derived from Colorado sources. 9 to colorado resident and/or was derived from Colorado sources. 9 to colorado resident and/or was derived from Colorado sources.	ZZUIUTENZIJJJ			
2. Enter the sum of all income from form 1040, 1040 SR, or 1040 SP lines 4b, 5b and 6b. • 12 2. Enter income from line 12 that was received during that part of the year you were a Colorado resident. 4. Enter the sum of all business and farm income from form 1040, 1040 SR, or 1040 SP, or 1040 SP, Schedule 1, lines 3 and 6. • 14 5. 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 6. Enter all Schedule E income from from 1040, 1040 SR, or 1040 SP, Schedule 1, line 5. • 16 7. 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 during the tax year. 8. Enter the sum of all other income from 1040, 1040 SR, or 1040 SP, or 1040 SP, schedule 1, lines 1, 2a and 9. • 18 9. 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 10. Total Income. Enter amount from form 1040, 1040 SR, or 1040 SP, line 9. 20 11. Total Colorado Income. Enter the total from the Colorado column, lines 5, 7, 9, 11, 13, 15, 17 and 19. 22. Enter all federal adjustments from form 1040, 1040 SR, or 1040 SP, line 10. • 22 23. Enter adjustments from line 22 as follows • 23	Name			SSN or ITIN
2. Enter the sum of all income from form 1040, 1040 SR, or 1040 SP lines 4b, 5b and 6b. • 12 2. Enter income from line 12 that was received during that part of the year you were a Colorado resident. 4. Enter the sum of all business and farm income from form 1040, 1040 SR, or 1040 SP, or 1040 SP, Schedule 1, lines 3 and 6. • 14 5. 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 6. Enter all Schedule E income from from 1040, 1040 SR, or 1040 SP, Schedule 1, line 5. • 16 7. 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 during the tax year. 8. Enter the sum of all other income from 1040, 1040 SR, or 1040 SP, or 1040 SP, schedule 1, lines 1, 2a and 9. • 18 9. 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 10. Total Income. Enter amount from form 1040, 1040 SR, or 1040 SP, line 9. 20 11. Total Colorado Income. Enter the total from the Colorado column, lines 5, 7, 9, 11, 13, 15, 17 and 19. 22. Enter all federal adjustments from form 1040, 1040 SR, or 1040 SP, line 10. • 22 23. Enter adjustments from line 22 as follows • 23	SAI PRASAD ASHILA			171-02-3044
2. Enter the sum of all income from form 1040, 1040 SR, or 1040 SP lines 4b, 5b and 6b. • 12		Fadaval lufavuatia		
or 1040 SP lines 4b, 5b and 6b. 12	42 Enter the cure of all income from form 1040		n	Colorado Information
3. Enter income from line 12 that was received during that part of the year you were a Colorado resident. • 13 • 14 • 15 • 16 • 17 • 18 • 18 • 18 • 18 • 19 • 18 • 19 • 19 • 19 • 19 • 19 • 19 • 19 • 19 • 10 •	·	·		
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- 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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Naı	me			SSN or ITIN					
SA	AI PRASAD ASHILA			171-02-3044					
		Federal Information		Colorado Information					
	Adjusted Gross Income. Enter amount from form 1040, 1040 SP, or 1040 SR line 11. 24	84395	00						
	Colorado Adjusted Gross Income. Subtract the amount from the amount on line 21 of Form 104PN.	25	47250	00					
26.	Additions to Adjusted Gross Income. Enter the sum of lines 3 through 6 of Colorado Form 104 excluding any charitable contribution adjustments. • 26		00						
27.	Additions to Colorado Adjusted Gross Income. Enter a line 26 that is from non-Colorado state or local bond i a Colorado resident.*	27		00					
28.	Total of lines 24 and 26 28	84395	00						
	Total of lines 25 and 27		29	47250	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. 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. 32	84395	00						
	33. Modified Colorado Adjusted Gross Income. Subtract line 31 from line 29.			47250	00				
34.	Divide line 33 by line 32. Round to four significant digits, e.g. xxx.xxxx 34	1 33.300/	%						
	Tax from the tax table based on income reported on the Apportioned tax. Multiply line 35 by the percentage on	DR 0104 line 9	35		00				
	line 34. Enter here and on DR 0104 line 10. 36	1700	00						

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

REV 02/09/23 PRO