

238454 11555

DR 8454 (09/28/23)
COLORADO DEPARTMENT OF REVENUE
Denver CO 80261-0005
Tax. Colorado.gov

Tax.Colorado.gov
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State of Colorado Income Tax Declaration for Online Electronic Filing

Do not mail this form to the IRS or the Colorad			· or ran (minibb) · · ·)		Y)	or Fisca		iscal Year beginning (MM/DD/YY			DD/YY)
Depar	tment of Revenue. Retain with	your records.	12/31/	23							
Tax Ty	ре										
Σ		orate Income 0112)		nership 0106)	/S-Corp Ir	come)		Fiduc (DR 0		ncome
Taxpay	ver Last Name or Business Name	First Na	me or Busine	ss DBA i	f different fr	om Bu	siness N	ame			Middle Initia
NIMN	MAKAYALA	SHRU"	THI								
Spous	e's Last Name (if applicable)	First Na	me								Middle Initia
Тахрау	rer SSN or ITIN	Spouse	SSN or ITIN (if applica	ble)			FEI	IN		
138-	-95-5469										
Taxpay	yer or Business Address			City					State	ZIP	
1340	9 BROADWING AVE			PARKI	ER				CO	801	134
		Part I — Tax	Return Ir	format	tion						
1 Tota	al Income from your federal return	(see instructions	s for more	informa	ition)	1	\$				78559
2. Tax	cable Income (or allowable deduction more information)						\$				64709
	orado Tax from your Colorado retu					3	\$				2847
	orado Tax Withheld or Payments, f nore information)	from your Colora	ado return	(see ins	structions	4	\$				2037
		Part II — Dec					•				
Federal/0 I underst	enalties of perjury, I declare that the information of Colorado income tax returns, and that said tax returns that I (or my Electronic Return Originator (Eles, and attachments upon request by the Colorado	urns, statements, sche RO) if applicable) may	dules and attac be required to	hments ar provide p	e true, correct aper copies o	, and co f this de	mplete to eclaration,	the be my re	est of my eturns, v	y knowle withholdi	edge and beliefing statements
Signatu		5 Department of Never	ide at arry time	during the	period cover		(MM/DD/	_	ute or in	Tillations).
Spouse	e's Signature (If Joint Return, Both Must Sig	gn)				Date	(MM/DD/	YY)			
	Part III	— Declaration	of ERO/P	repare	r/Transm	itter					
	If the transmitter did not prepare the	he tax return, ch	neck here [
the prepa taxpayer correct, a have pro of limitati	to the preparer, I declare only that the amounts starer, under penalties of perjury I declare that I have and the amounts shown in Part I above agree with and complete to the best of my knowledge and be wided the taxpayer with copies of all forms and in ions, and to provide paper copies of this declaration at any time during this period.	e reviewed the above th the amounts shown collief. As preparer, I furtoformation filed. I also	caxpayer's Fede on said tax retur ther declare that agree to mainta	eral/Colora rns, and tha at I have ob ain this sig	do income tax at said tax retu otained the tax ned Form (DF	returns urns, sta kpayer's 8 8454)	and that t tements, s signature for the per	he inf sched on th riod c	formation lules, an his form overed l	n provided attach at the tided by the C	ed to me by the iments are true me of filing and colorado statute
ERO's	Signature			P	reparer Iden	tificatio	n Numbe	er, Yo	our SSI	N, or IT	IN
SYAM	M PRIYA RAM SAGAR GUPTA TA	LLAM		F	0208270)3					
	a			Da	te (MM/DD/Y	Y)					
Check if also Preparer x				C	02/29/24						

DR 0900 (07/14/23)

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2023 Individual Income Tax Payment Form (Calendar year—Due April 15, 2024)

Caution!

This form **MUST** accompany your payment if you filed electronically and wish to pay by check. If you paid electronically or do not owe a payment do not file this form.

The Department strongly recommends that you file using Revenue Online (*Colorado.gov/RevenueOnline*) or another electronic filing method and remit your payment electronically.

To pay by mail, make the check or money order payable to the "Colorado Department of Revenue." Be sure to round your payment to the nearest dollar. Clearly write your Social Security number or ITIN and "2023 DR 0104" on the memo line. Be sure to keep a copy of the money order or note the check number with your tax records.

Complete the form below. The amount on the check and the amount entered on the payment form must be the same. This will help maintain accuracy in your tax account.

DO NOT submit the DR 0104 if you have already filed electronically.

DO NOT CUT - Return Full Page.

DR 0900							
Return the DR 0900 with check or money order payable to the "Colorado Department of Revenue". Mail payments to Colorado Department of Revenue, Denver, Colorado 80261-0008. These addresses and zip codes are exclusive to the Colorado Department of Revenue, so a street address is not required. Write your Social Security number or ITIN and "2023 DR 0104" on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this form.							
SSN or ITIN							
138-95-5469							
Your Last Name	First Name		M	iddle Initial			
NIMMAKAYALA	SHRUTHI						
Spouse's SSN or ITIN							
Spouse's Last Name (if joint)	Spouse's First Name		M	iddle Initial			
Address							
13409 BROADWING AVE							
City		State	ZIP Code				
PARKER		CO	80134				
The Old state of the Line of t	and the delivery of the second second	Amou	nt of Paymer	nt			
The State may convert your check to a one-time electronic banking transaction. Your bank acceptes same day received by the State. If converted, your check will not be returned. If your check uncollected funds, the Department of Revenue may collect the payment amount directly from y	is rejected due to insufficient or		-	10.00			

DO NOT CUT – Return Full Page. IF NO PAYMENT IS DUE, DO NOT FILE THIS FORM.





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2023 Colorado Individual Income Tax Return

	r or Nonresident (or i dent combination)			0104PN		if Abroa	ad on due d ons	ate –	
Your Last Name			Your First Name					Middle	e Initial
NIMMAKAYALA			SHRUTHI						
Date of Birth (MM/DD/YYYY)	SSN or ITIN		Deceased	_					
05/15/1999	138-95-5469				cked and cla R 0102 and				
Enter the following information from your current driver license or state identification card.			State of Issue	Last 4	characters of I	D number	Date of Issua	nce	
If Joint, Spouse's Last Name		S	Spouse's First N	Name				Middle	e Initial
Spouse's Date of Birth (MM/DD/YYYY)	Spouse's SSN or ITII	N C	Deceased		cked and cla R 0102 and				
Enter the following information	from vour angues	,, ;	State of Issue	Last 4	characters of I	D number	Date of Issua	nce	
Enter the following information from your spouse's current driver license or state identification card.									
Mailing Address						Pho	ne Number		
13409 BROADWING AVE						(4	75)300-83	376	
City			State	ZIP Code		Foreign	Country (if app	licable)	
PARKER			CO	80134					
To see if you or members of your household qualify for free or reduced-cost health coverage, check this box if:								:	
AND	You are a Colorado resident and at least one person in your household does not have health coverage AND								
You give permission for for Health Colorado (the									nect
						R	ound To The I	Nearest [Dollar
1. Enter Federal Taxable Inco 1040, 1040 SR, or 1040 SR	eral inco	me tax forn	n:	• 1			64709	9 00	
Include W-2s and 1099s with 0					1				
			ederal Taxa						
2. State and Local Income tax		es taxes	s claimed or	i tederal f					0.0
Schedule A. (see instruction	ris)				• 2				0 0
3 Qualified Business Income	Deduction Addha	ck (see	instructions	:)	• 3				0.0



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COLORADO DEPARTMENT OF REVENUE

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Name		SSN or ITIN	
SHRUTHI NIMMAKAYALA		138-95-5469	
Federal Deduction addback (see instructions)	• 4		00
5. Nonqualified CollegeInvest Tuition Savings Account distributions	V T		1
(see instructions)	• 5		00
6. Nonqualified Colorado ABLE Account distributions (see instructions)	• 6		0 0
7. Other Additions, explain (see instructions)	• 7		0 0
Explain:			
8. Subtotal, sum of lines 1 through 7	8	64709	0 0
Colorado Subtractions	<u> </u>		100
9. Subtractions from the DR 0104AD Schedule, line 23, you must submit the			\top
DR 0104AD schedule with your return.	• 9		00
•		64709	
10. Colorado Taxable Income, subtract line 9 from line 8	• 10		0 0
Tax, Prepayments and Credits: see 104 Book for full-year tax table and	part-year [OR 0104PN Schedule	
11. Colorado Tax from tax table or the DR 0104PN line 36, you must submit the		2847	
DR 0104PN with your return if applicable.	• 11		00
12. Alternative Minimum Tax from the DR 0104AMT line 8, you must submit the	40		0.0
DR 0104AMT with your return.	• 12		00
13. Recapture of prior year credits	• 13		0 0
		2847	
14. Subtotal, sum of lines 11 through 13	14	2017	0 0
15. Nonrefundable Credits from the DR 0104CR line 54, the sum of lines 15, 16, a			
cannot exceed line 14, you must submit the DR 0104CR with your return.	• 15		0.0
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 m			
submit the DR 1366 with your return.	• 16		0 0
17. Strategic Capital Tax Credit from DR 1330, the sum of lines 15, 16, and 17 car			100
exceed line 14, you must submit the DR 1330 with your return.	• 17		00
SACCOURTING THE STATE OF THE TOTAL THE STATE OF THE STATE		0045	
18. Net Income Tax, sum of lines 15, 16, and 17. Subtract that sum from line 14.	18	2847	0 0
19. Use Tax reported on the DR 0104US schedule line 7, you must submit the			1
DR 0104US with your return.	• 19		0 0
		2847	
20. Net Colorado Tax, sum of lines 18 and 19	20	2017	0.0
21. CO Income Tax Withheld from W-2s and 1099s, you must submit the W-2s ar	I	2037	
1099s claiming Colorado withholding with your return.	• 21		0.0
22 Prior year Estimated Tay Carryforward	22		0 0
22. Prior-year Estimated Tax Carryforward23. Estimated Tax Payments, enter the sum of the quarterly payments remitted fo	• 22 r		00
this tax year	• 23		0 0
and tax your	7 20		 5 5
	ı		



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Name	SSN or ITIN
SHRUTHI NIMMAKAYALA	138-95-5469
25. Other Prepayments:	0 0
26. Gross Conservation Easement Credit from the DR 1305G line 33, you must submit	
the DR 1305G with your return. • 26 27. Innovative Motor Vehicle and Innovative Truck Credit from form DR 0617, you must	0.0
submit each DR 0617 with your return. • 27	0 0 0
28. Refundable Credits from the DR 0104CR line 16, you must submit the DR 0104CR	0.0
with your return. • 28	0 0
29. Subtotal, sum of lines 21 through 28	2037 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	78559 00
01 1040 01	
31. Nontaxable Social Security Income • 31	0.0
22. Newtovable interact income from state and lead bands	0.0
32. Nontaxable interest income from state and local bonds • 32	
33. Sum of lines 30 through 32: Modified AGI for TABOR	78559 00
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	800
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.	0.0
taxpayers ming jointly. See instructions if you are ming arrestension.	
35. Sum of lines 29 and 34 35	²⁸³⁷ 00
36. Overpayment, if line 35 is greater than line 20 then subtract line 20 from line 35	0 0
37. Estimated Tax Credit Carryforward to 2024 first guarter, if any. • 37	0 0
If you have an overpayment on line 38 below and would like to donate all or a portion of your Colorado charity, include Form DR 0104CH to contribute.	
Societa orients, morale communication	our overpayment to a qualified
38. Refund, subtract line 37 from line 36 (see instructions) • 38	our overpayment to a qualified
38. Refund, subtract line 37 from line 36 (see instructions) • 38	
38. Refund, subtract line 37 from line 36 (see instructions) • 38	0 0



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230104 41333				
Name			SSN or ITIN	
SHRUTHI NIMMAKAYALA			138-95-5469	
39. Net Tax Due, subtract line 35 from line 20	39		10	0 0
40. Delinquent Payment Penalty (see instructions	s) • 40			00
41. Delinquent Payment Interest (see instructions				00
 Estimated Tax Penalty, you must submit the [(see instructions) 	DR 0204 with your return • 42			0 0
43. Amount You Owe, sum of lines 39 through 42			10.	00
The State may convert your check to a one-time electronic b by the State. If converted, your check will not be returned. If y Revenue may collect the payment amount directly from your	our check is rejected due to insufficient or uncolle			ived
	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	e best of my knowledge and belief, this return is tru	ue, correct		
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 01/22/24 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 80261-0005

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