



DO NOT SEND

KEEP THIS PAGE FOR YOUR RECORDS

Colorado Estimated Tax – Individuals Worksheet

Do not send, keep for your records

1. Estimated 2024 Colorado taxable income	\$	179167	00
2. Estimated 2024 Colorado income tax — 4.4% of line 1	\$	7883	00
3. Estimated 2024 Colorado alternative minimum tax	\$		00
4. Estimated 2024 recapture of prior year credits	\$		00
5. Total of lines 2, 3 and 4	\$	7883	00
6. All credits other than withholding and estimated payments	\$		00
7. Subtract line 6 from line 5	\$	7883	00
8. Estimated 2024 Colorado wage or nonresident real estate withholding tax	\$	7034	00
9. Net estimated tax, subtract line 8 from line 7	\$	849	00

Payment Number	Net Amount Due		2023 Overpayment Applied		Payment Due		Due Dates
1	\$	410 00	\$	0 00	\$	410 00	April 15
2	\$	410 00	\$	0 00	\$	410 00	June 15
3	\$	410 00	\$	0 00	\$	410 00	September 15
4	\$	410 00	\$	0 00	\$	410 00	January 15, 2025

Round your payment to the nearest dollar. If paying by check, 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. It is strongly recommended that estimated payments be remitted online at Colorado.gov/RevenueOnline to avoid problems or delays with the 2024 income tax return.

Due Dates: If the due date falls on a weekend or legal holiday, payment will be due the next business day.



240104EP11555

(0012)

2024 Colorado Estimated Income Tax Payment Form

Only return this payment form with a check or money order.

DO NOT CUT – Return Full Page

(0012)

DR 0104EP	
Return the DR 0104EP 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 “2024 DR 0104EP” on your check or money order. Do not send cash. Enclose, but do not staple or attach, your payment with this form. File only if you are making a payment of estimated tax and are unable to pay online.	
SSN or ITIN	
662-43-3655	
Your Last Name	
VARAHALA	
Your First Name	Middle Initial
VAMSHI KRISHNA	
Spouse SSN or ITIN	
815-77-2652	
Spouse Last Name	
VAVILALA	
Spouse First Name	Middle Initial
ANUSHA	
Address	
6628 S KILLARNEY COURT	
City	
AURORA	
State	ZIP
CO	80016
Amount of Payment	
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.	
\$	410.00

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SSN or ITIN	
662-43-3655	
Your Last Name	
VARAHALA	
Your First Name	Middle Initial
VAMSHI KRISHNA	
Spouse SSN or ITIN	
815-77-2652	
Spouse Last Name	
VAVILALA	
Spouse First Name	Middle Initial
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SSN or ITIN	
662-43-3655	
Your Last Name	
VARAHALA	
Your First Name	Middle Initial
VAMSHI KRISHNA	
Spouse SSN or ITIN	
815-77-2652	
Spouse Last Name	
VAVILALA	
Spouse First Name	Middle Initial
ANUSHA	
Address	
6628 S KILLARNEY COURT	
City	
AURORA	
State	ZIP
CO	80016
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662-43-3655	
Your Last Name	
VARAHALA	
Your First Name	Middle Initial
VAMSHI KRISHNA	
Spouse SSN or ITIN	
815-77-2652	
Spouse Last Name	
VAVILALA	
Spouse First Name	Middle Initial
ANUSHA	
Address	
6628 S KILLARNEY COURT	
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AURORA	
State	ZIP
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Amount of Payment	
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\$	410.00

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15550012 12312024 01 000815772652 01 00662433655 53



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: VARAHALA
First Name or Business DBA if different from Business Name: VAMSHI KRISHNA
Spouse's Last Name (if applicable): VAVILALA
First Name: ANUSHA
Taxpayer SSN or ITIN: 662-43-3655
Spouse SSN or ITIN (if applicable): 815-77-2652
Taxpayer or Business Address: 6628 S KILLARNEY COURT
City: AURORA
State: CO
ZIP: 80016

Part I — Tax Return Information

Table with 4 rows: 1. Total Income from your federal return (see instructions for more information) 1 \$ 209274; 2. Taxable Income (or allowable deduction) from your federal return (see instructions for more information) 2 \$ 179167; 3. Colorado Tax from your Colorado return (see instructions for more information) 3 \$ 7883; 4. Colorado Tax Withheld or Payments, from your Colorado return (see instructions or more information) 4 \$ 7034

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 and Date fields for Taxpayer and Spouse's Signature (If Joint Return, Both Must Sign)

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) 03/14/24



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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

Your Last Name		Your First Name		Middle Initial
VARAHALA		VAMSHI KRISHNA		
Date of Birth (MM/DD/YYYY)	SSN or ITIN	Deceased <input type="checkbox"/>		
01/11/1981	662-43-3655	<input type="checkbox"/> If checked and claiming a refund, you must include the DR 0102 and death certificate with your return.		
Enter the following information from your current driver license or state identification card.		State of Issue	Last 4 characters of ID number	Date of Issuance
		CO	9756	06/12/23
If Joint, Spouse's Last Name		Spouse's First Name		Middle Initial
VAVILALA		ANUSHA		
Spouse's Date of Birth (MM/DD/YYYY)	Spouse's SSN or ITIN	Deceased <input type="checkbox"/>		
05/18/1987	815-77-2652	<input type="checkbox"/> If checked and claiming a refund, you must include the DR 0102 and death certificate with your return.		
Enter the following information from your spouse's current driver license or state identification card.		State of Issue	Last 4 characters of ID number	Date of Issuance
		CO	9178	09/16/22
Mailing Address			Phone Number	
6628 S KILLARNEY COURT				
City	State	ZIP Code	Foreign Country (if applicable)	
AURORA	CO	80016		
<input type="checkbox"/> To see if you or members of your household qualify for free or reduced-cost health coverage, check this box if: <ul style="list-style-type: none"> You are a Colorado resident and at least one person in your household does not have health coverage AND <ul style="list-style-type: none"> You give permission for the Colorado Department of Revenue to share the information on Form DR 0104EE with Connect for Health Colorado (the Colorado Health Benefit Exchange) and the Department of Health Care Policy & Financing. 				
Round To The Nearest Dollar				
1. Enter Federal Taxable Income from your federal income tax form: 1040, 1040 SR, or 1040 SP			• 1	179167 00
Include W-2s and 1099s with CO withholding.				
Additions to Federal Taxable Income				
2. State and Local Income taxes or general sales taxes claimed on federal form 1040, Schedule A. (see instructions)			• 2	00
3. Qualified Business Income Deduction Addback (see instructions)			• 3	00



230104 21555

Name	SSN or ITIN
VAMSHI KRISHNA VARAHALA & ANUSHA VAVILALA	662-43-3655
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	179167 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	179167 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	7883 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	7883 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	7883 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	7883 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	7034 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 KRISHNA VARAHALA & ANUSHA VAVILALA	662-43-3655
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	7034 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	206867 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	206867 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	1600 00
35. Sum of lines 29 and 34 • 35	8634 00
36. Overpayment, if line 35 is greater than line 20 then subtract line 20 from line 35 • 36	751 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	751 00
Direct Deposit Routing Number <input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value="3"/> <input type="text" value="9"/> 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="8"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="4"/> <input type="text" value="2"/> <input type="text" value="1"/> <input type="text" value="6"/> <input type="text" value="9"/> <input type="text" value="4"/> <input type="text" value="0"/> <input type="text" value="8"/>	
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 KRISHNA VARAHALA & ANUSHA VAVILALA		662-43-3655	
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="checkbox"/> No • <input type="checkbox"/> 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://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.