

Filing status:  Single  Married filing jointly  Married filing separately  Head of household  Qualifying widow(er)

Your first name and initial: SHIVA PRASAD Last name: MADIRAJU Your social security number: 222-67-2282

Your standard deduction:  Someone can claim you as a dependent  You were born before January 2, 1954  You are blind

If joint return, spouse's first name and initial: Last name: Spouse's social security number:

Spouse standard deduction:  Someone can claim your spouse as a dependent  Spouse was born before January 2, 1954  Full-year health care coverage or exempt (see inst.)

Spouse is blind  Spouse itemizes on a separate return or you were dual-status alien

Home address (number and street). If you have a P.O. box, see instructions. 7600 E CALEY AVE Apt. no. Presidential Election Campaign (see inst.)  You  Spouse

City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6. Englewood CO 80111 If more than four dependents, see inst. and check here

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see inst.):	
(1) First name	Last name			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"/>

**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.

Joint return? See instructions. Keep a copy for your records.

Your signature: Spouse's signature. If a joint return, both must sign.

Date: Date

Your occupation: SOFTWARE ENGINEER Spouse's occupation:

If the IRS sent you an Identity Protection PIN, enter it here (see inst.):

**Paid Preparer Use Only**

Preparer's name: APPANA RUPA VENKATA SATYA SAI MANIKUMAR Preparer's signature: PTIN: P02090332 Firm's EIN: Check if:  3rd Party Designee  Self-employed

Firm's name: GLOBAL TAXES LLC Phone no.:

Firm's address: 2530 Pebble Creek Ln Cumming GA 30041

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form 1040 (2018)

1	Wages, salaries, tips, etc. Attach Form(s) W-2		1	77,526.
2a	Tax-exempt interest	2a	2b	
3a	Qualified dividends	3a	3b	
4a	IRAs, pensions, and annuities	4a	4b	
5a	Social security benefits	5a	5b	
6	Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22	-4,700.	6	72,826.
7	Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6		7	72,826.
8	Standard deduction or itemized deductions (from Schedule A)		8	12,000.
9	Qualified business income deduction (see instructions)		9	
10	Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-		10	60,826.
11	a Tax (see inst.) 9,321. (check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input type="checkbox"/> Form 4972 3 <input type="checkbox"/> )		11	9,321.
12	b Add any amount from Schedule 2 and check here <input type="checkbox"/>		12	
13	a Child tax credit/credit for other dependents b Add any amount from Schedule 3 and check here <input type="checkbox"/>		13	9,321.
14	Subtract line 12 from line 11. If zero or less, enter -0-		14	0.
15	Other taxes. Attach Schedule 4		15	9,321.
16	Total tax. Add lines 13 and 14		16	10,419.
17	Federal income tax withheld from Forms W-2 and 1099		17	
18	Refundable credits: a EIC (see inst.) No b Sch. 8812 c Form 8863		18	10,419.
19	Add any amount from Schedule 5		19	1,098.
20a	Add lines 16 and 17. These are your total payments		20a	1,098.
21	If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid		21	
22	Amount of line 19 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>		22	
23	Routing number: 072000805 Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		23	
24	Account number: 375016839262			
25	Amount of line 19 you want applied to your 2019 estimated tax	25		
26	Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions	26		
27	Estimated tax penalty (see instructions)	27		

**SCHEDULE 1**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Income and Adjustments to Income**

▶ **Attach to Form 1040.**

▶ **Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.**

OMB No. 1545-0074

**2018**  
Attachment  
Sequence No. **01**

Name(s) shown on Form 1040

SHIVA PRASAD MADIRAJU

Your social security number

222-67-2282

<b>Additional Income</b>	<b>1-9b</b>	Reserved . . . . .	<b>1-9b</b>	
	<b>10</b>	Taxable refunds, credits, or offsets of state and local income taxes . . . . .	<b>10</b>	
	<b>11</b>	Alimony received . . . . .	<b>11</b>	
	<b>12</b>	Business income or (loss). Attach Schedule C or C-EZ . . . . .	<b>12</b>	
	<b>13</b>	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>	<b>13</b>	
	<b>14</b>	Other gains or (losses). Attach Form 4797 . . . . .	<b>14</b>	
	<b>15a</b>	Reserved . . . . .	<b>15b</b>	
	<b>16a</b>	Reserved . . . . .	<b>16b</b>	
	<b>17</b>	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	<b>17</b>	-4,700.
	<b>18</b>	Farm income or (loss). Attach Schedule F . . . . .	<b>18</b>	
	<b>19</b>	Unemployment compensation . . . . .	<b>19</b>	
	<b>20a</b>	Reserved . . . . .	<b>20b</b>	
<b>21</b>	Other income. List type and amount ▶ _____	<b>21</b>		
<b>22</b>	Combine the amounts in the far right column. If you don't have any adjustments to income, enter here and include on Form 1040, line 6. Otherwise, go to line 23 . . . . .	<b>22</b>	-4,700.	
<b>Adjustments to Income</b>	<b>23</b>	Educator expenses . . . . .	<b>23</b>	
	<b>24</b>	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 . . . . .	<b>24</b>	
	<b>25</b>	Health savings account deduction. Attach Form 8889 . . . . .	<b>25</b>	
	<b>26</b>	Moving expenses for members of the Armed Forces. Attach Form 3903 . . . . .	<b>26</b>	
	<b>27</b>	Deductible part of self-employment tax. Attach Schedule SE . . . . .	<b>27</b>	
	<b>28</b>	Self-employed SEP, SIMPLE, and qualified plans . . . . .	<b>28</b>	
	<b>29</b>	Self-employed health insurance deduction . . . . .	<b>29</b>	
	<b>30</b>	Penalty on early withdrawal of savings . . . . .	<b>30</b>	
	<b>31a</b>	Alimony paid <b>b</b> Recipient's SSN ▶ _____	<b>31a</b>	
	<b>32</b>	IRA deduction . . . . .	<b>32</b>	
<b>33</b>	Student loan interest deduction . . . . .	<b>33</b>		
<b>34</b>	Reserved . . . . .	<b>34</b>		
<b>35</b>	Reserved . . . . .	<b>35</b>		
<b>36</b>	Add lines 23 through 35 . . . . .	<b>36</b>		

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

Schedule 1 (Form 1040) 2018

**SCHEDULE E  
(Form 1040)**

**Supplemental Income and Loss**

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

OMB No. 1545-0074

**2018**

Attachment  
Sequence No. **13**

Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to Form 1040, 1040NR, or Form 1041.

▶ Go to [www.irs.gov/ScheduleE](http://www.irs.gov/ScheduleE) for instructions and the latest information.

Name(s) shown on return

SHIVA PRASAD MADIRAJU

Your social security number

222-67-2282

**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 or C-EZ (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 2018 that would require you to file Form(s) 1099? (see instructions) . . . . .  Yes  No

**B** If "Yes," did you or will you file required Forms 1099? . . . . .  Yes  No

<b>1a</b>	Physical address of each property (street, city, state, ZIP code)				
<b>A</b>	KPHB HYDERABAD HYDERABAD IN 548448				
<b>B</b>					
<b>C</b>					
<b>1b</b>	Type of Property (from list below)	<b>2</b> For each rental real estate property listed above, report the number of fair rental and personal use days. Check the <b>QJV</b> box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
<b>A</b>	3		<b>A</b> 365	0	<input type="checkbox"/>
<b>B</b>			<b>B</b>		<input type="checkbox"/>
<b>C</b>			<b>C</b>		<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
<b>3</b>	Rents received . . . . .	<b>3</b>		500.		
<b>4</b>	Royalties received . . . . .	<b>4</b>				
<b>Expenses:</b>						
<b>5</b>	Advertising . . . . .	<b>5</b>		100.		
<b>6</b>	Auto and travel (see instructions) . . . . .	<b>6</b>		600.		
<b>7</b>	Cleaning and maintenance . . . . .	<b>7</b>				
<b>8</b>	Commissions. . . . .	<b>8</b>				
<b>9</b>	Insurance . . . . .	<b>9</b>				
<b>10</b>	Legal and other professional fees . . . . .	<b>10</b>				
<b>11</b>	Management fees . . . . .	<b>11</b>				
<b>12</b>	Mortgage interest paid to banks, etc. (see instructions)	<b>12</b>				
<b>13</b>	Other interest. . . . .	<b>13</b>		4,500.		
<b>14</b>	Repairs. . . . .	<b>14</b>				
<b>15</b>	Supplies . . . . .	<b>15</b>				
<b>16</b>	Taxes . . . . .	<b>16</b>				
<b>17</b>	Utilities. . . . .	<b>17</b>				
<b>18</b>	Depreciation expense or depletion . . . . .	<b>18</b>				
<b>19</b>	Other (list) ▶ . . . . .	<b>19</b>				
<b>20</b>	Total expenses. Add lines 5 through 19 . . . . .	<b>20</b>		5,200.		
<b>21</b>	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 . . . . .	<b>21</b>		-4,700.		
<b>22</b>	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) . . . . .	<b>22</b>	(	-4,700.)	(	)
<b>23a</b>	Total of all amounts reported on line 3 for all rental properties . . . . .	<b>23a</b>		500.		
<b>b</b>	Total of all amounts reported on line 4 for all royalty properties . . . . .	<b>23b</b>				
<b>c</b>	Total of all amounts reported on line 12 for all properties . . . . .	<b>23c</b>				
<b>d</b>	Total of all amounts reported on line 18 for all properties . . . . .	<b>23d</b>				
<b>e</b>	Total of all amounts reported on line 20 for all properties . . . . .	<b>23e</b>		5,200.		
<b>24</b>	<b>Income.</b> Add positive amounts shown on line 21. Do not include any losses . . . . .	<b>24</b>				
<b>25</b>	<b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here . . . . .	<b>25</b>	(	4,700.)		
<b>26</b>	<b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result 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 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2. . . . .	<b>26</b>		-4,700.		



188453 11555

DR 8453 (09/17/18)  
**COLORADO DEPARTMENT OF REVENUE**  
 Denver, CO 80261-0005  
 Colorado.gov/Tax

# State of Colorado Individual Income Tax Declaration for Electronic Filing

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

Taxpayer SSN		Spouse SSN (If Joint Return)		Submission ID	
222-67-2282					
Taxpayer Last Name			Taxpayer First Name		Middle Initial
MADIRAJU			SHIVA PRASAD		
Spouse Last Name (If Joint Return)			Spouse First Name (If Joint Return)		
Street Address				Phone Number	
7600 E CALEY AVE				(616) 264-7344	
City				State	Zip
ENGLEWOOD				CO	80111

### Part I — Tax Return Information

1. Total Income, line 6 from your federal form 1040	1	\$	72826
2. Taxable Income, line 10 on federal form 1040	2	\$	60826
3. Colorado Tax, Line 15 on Colorado form 104	3	\$	2816
4. Colorado Tax Withheld, Line 16 on Colorado form 104	4	\$	3469
5. Refund, Line 30 Colorado form 104	5	\$	653
6. Amount You Owe, Line 35 on Colorado form 104	6	\$	

### 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 2018 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. I understand that I (or my Electronic Return Originator (ERO) if applicable) may be required to provide paper copies of this declaration, my returns, withholding statements, schedules, and attachments upon request by the Colorado Department of Revenue at any time during the period covered by the Colorado statute of limitations.

Signature	Date	Spouse's Signature (If Joint Return, Both Must Sign)	Date

### 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 2018 Federal/Colorado income tax returns. If I am the preparer, under penalties of perjury I declare that I have reviewed the above taxpayer's 2018 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. As preparer, I further declare that I have obtained the taxpayer's signature on this form at the time of filing and have provided the taxpayer with copies of all forms and information filed. I also agree to maintain this signed Form (DR 8453) for the period covered by the Colorado statute of limitations, and to provide paper copies of this declaration, said returns, withholding statements, schedules and attachments upon request by the Colorado Department of Revenue at any time during this period.

ERO's Signature	Preparer Identification Number or Your SSN
	P02090332

Check if also Preparer

Date (MM/DD/YY)



180104 11555

DR 0104 (09/17/18)  
COLORADO DEPARTMENT OF REVENUE  
Colorado.gov/Tax

(0013)



## 2018 Colorado Individual Income Tax Return

Full-Year     Part-Year or Nonresident (or resident, part-year, non-resident combination)     Mark if Abroad on due date – see instructions  
\*Must attach DR 0104PN

Your Last Name		Your First Name		Middle Initial
MADIRAJU		SHIVA PRASAD		
Date of Birth (MM/DD/YYYY)	SSN	Deceased <input type="checkbox"/>		
12/07/1992	222-67-2282	If checked and claiming a refund, you must submit the DR 0102 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
		MI	9932	10/23/15
If Joint, Spouse's Last Name		Spouse's First Name		Middle Initial
Spouse's Date of Birth (MM/DD/YYYY)	Spouse's SSN	Deceased <input type="checkbox"/>		
		If checked and claiming a refund, you must submit the DR 0102 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
Mailing Address			Phone Number	
7600 E CALEY AVE			(616) 264-7344	
City	State	Zip Code	Foreign Country (if applicable)	
ENGLEWOOD	CO	80111		

Round To The Next Dollar

1. Enter Federal Taxable Income from your federal income tax form: 1040 line 10 • 1 60826 00

Attach W-2s and 1099s with CO withholding here. ◀

### Additions to Federal Taxable Income

2. State Addback, enter the state income tax deduction from your federal form 1040 schedule A, line 5a (see instructions) • 2 00

3. Other Additions, explain (see instructions) • 3 00

Explain:



180104 21555

Name	SSN		
SHIVA PRASAD MADIRAJU	222-67-2282		
<b>4. Subtotal, sum of lines 1 through 3</b>	<b>4</b>	60826	00
<b>5. Subtractions from the DR 0104AD Schedule, line 18, you must submit the DR 0104AD schedule with your return.</b>	<b>• 5</b>		00
<b>6. Colorado Taxable Income, subtract line 5 from line 4</b>	<b>• 6</b>	60826	00
<b>Tax, Prepayments and Credits: full-year residents use DR 0104CR and part-year and nonresidents use DR 0104PN</b>			
<b>7. Colorado Tax from tax table or the DR 0104PN line 36, you must submit the DR 0104PN with your return if applicable.</b>	<b>• 7</b>	2816	00
<b>8. Alternative Minimum Tax from the DR 0104AMT, you must submit the DR 0104AMT with your return.</b>	<b>• 8</b>		00
<b>9. Recapture of prior year credits</b>	<b>• 9</b>		00
<b>10. Subtotal, sum of lines 7 through 9</b>	<b>10</b>	2816	00
<b>11. Nonrefundable Credits from the DR 0104CR line 39, the sum of lines 11 and 12 cannot exceed line 10, you must submit the DR 0104CR with your return.</b>	<b>• 11</b>		00
<b>12. Total Nonrefundable Enterprise Zone credits used – as calculated, or from the DR 1366 line 87, the sum of lines 11 and 12 cannot exceed line 10, you must submit the DR 1366 with your return.</b>	<b>• 12</b>		00
<b>13. Net Income Tax, sum of lines 11 and 12. Subtract that sum from line 10.</b>	<b>13</b>	2816	00
<b>14. Use Tax reported on the DR 0104US schedule line 7, you must submit the DR 0104US with your return.</b>	<b>• 14</b>		00
<b>15. Net Colorado Tax, sum of lines 13 and 14</b>	<b>15</b>	2816	00
<b>16. CO Income Tax Withheld from W-2s and 1099s, you must submit the W-2s and/or 1099s claiming Colorado withholding with your return.</b>	<b>• 16</b>	3469	00
<b>17. Prior-year Estimated Tax Carryforward</b>	<b>• 17</b>		00
<b>18. Estimated Tax Payments, enter the sum of the quarterly payments remitted for this tax year</b>	<b>• 18</b>		00
<b>19. Extension Payment remitted with the DR 0158-I</b>	<b>• 19</b>		00
<b>20. Other Prepayments:</b> <input type="checkbox"/> • DR 0104BEP <input type="checkbox"/> • DR 0108 <input type="checkbox"/> • DR 1079 <b>• 20</b>			00
<b>21. Gross Conservation Easement Credit from the DR 1305G line 33, you must submit the DR 1305G with your return.</b>	<b>• 21</b>		00
<b>22. Innovative Motor Vehicle Credit from the DR 0617, you must submit each DR 0617 with your return.</b>	<b>• 22</b>	0	00
<b>23. Refundable Credits from the DR 0104CR line 8, you must submit the DR 0104CR with your return.</b>	<b>• 23</b>		00
<b>24. Subtotal, sum of lines 16 through 23</b>	<b>24</b>	3469	00
<b>25. Federal Adjusted Gross Income from your federal income tax form: 1040 line 7</b>	<b>• 25</b>	72826	00
<b>26. Overpayment, if line 24 is greater than line 15 then subtract line 15 from line 24</b>	<b>26</b>	653	00
<b>27. Estimated Tax Credit Carryforward to 2019 first quarter, if any</b>	<b>• 27</b>		00



180104 31555

DR 0104 (09/17/18)  
COLORADO DEPARTMENT OF REVENUE  
Colorado.gov/Tax

Name	SHIVA PRASAD MADIRAJU	SSN	222-67-2282
------	-----------------------	-----	-------------

28. Voluntary Contributions elected on the DR 0104CH schedule line 21, you must submit the DR 0104CH with your return.	• 28	00
29. Subtotal, add lines 27 and 28	29	00
30. Refund, subtract line 29 from line 26 (see instructions)	• 30	653 00

**Direct Deposit**

Routing Number  Type:  Checking  Savings  CollegeInvest 529  
 Account Number

For questions regarding CollegeInvest direct deposit or to open an account, visit [CollegeInvest.org](http://CollegeInvest.org) or call 800-448-2424.

31. Net Tax Due, subtract line 24 from line 15, then add line 28	31	00
32. Delinquent Payment Penalty (see instructions)	• 32	00
33. Delinquent Payment Interest (see instructions)	• 33	00
34. Estimated Tax Penalty, you must submit the DR 0204 with your return. (see instructions)	• 34	00
35. Amount You Owe, sum of lines 31 through 34	• 35	

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 other information related to this return with the Colorado Department of Revenue? •  No •  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			
Paid Preparer's Address	City	State	Zip
2530 PEBBLE CREEK LN	CUMMING	GA	30041

REV 11/30/18 PRO

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.