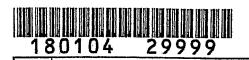


DR 0104 (09/17/18)
COLORADO DEPARTMENT OF REVENUE
Colorado.gov/Tax
(0013)

## 2018 Colorado Individual Income Tax Return

Your Last Name	You	ur First Name	ودوعد الدوعية والإدارة الما المواجعة	Middle Initial			
			1				
Date of Birth (MM/DD/YYYY) SSN SSN	De	ceased		If checked and o			ı must
Enter the following information from your currer	nt St	ate of Issue		Last 4 characters of	ID number	Date of Issua	nce
driver license or state identification card.		CO				7	
If Joint, Spouse's Last Name		ouse's First Na	ame	e (* * * * * * * * * * * * * * * * * * *	The second	andres of a manager	Middle Initial
Spouse's Date of Birth (MM/DD/YYYY) Spouse's SSN	De	ceased		· · · · · · · · · · · · · · · · · · ·		<del></del>	
			_ {	If checked and c submit the DR 0	102 with	your return.	
Enter the following information from your spouse's current driver license or state identification card.		State of Issue	1	Last 4 characters of	ID number	Date of Issuar	ıce
Mailing Address	So cases we estimate	الا الرحاق بوبيات بدرام الرياسات		to south for the manufactures ( to the forest the total	Pho	ne Number	with the second of V
						,	
City	A CHI THY SHIP SHIP	State	Zip,	Code	Foreign (	Country (if appl	icable)
•		co		-	1		
						Round To T	he Next Dollar
1. Enter Federal Taxable Income from your fed	daral incom	a tau fama	. 40	140 line 40 - 4			0 00
Attach W-2s and 1099s with CO withholding he		ie tax iorni.	. 10	J40 line 10 • 1	<u>.l</u>		100
<u> </u>	16.						
Additions to Federal Taxable Income  2. State Addback, enter the state income tax of	leduction f	om vour fe	der	ral form	<del></del>		
1040 schedule A, line 5a (see instructions)		om your ic		• 2			000
						, , , , , , , , , , , , , , , , , , , ,	
3. Other Additions, explain (see instructions)				<b></b>			0.0



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

Name	SSN Englander England	Gentle ins
Lauren		
4. Subtotal, sum of lines 1 through 3	O	00
5. Subtractions from the DR 0104AD Schedule, line 18, you must submit the	0	,
DR 0104AD schedule with your return. • 5		00
6. Colorado Taxable Income, subtract line 5 from line 4 6	0	00
Tax, Prepayments and Credits: full-year residents use DR 0104CR and part-year and nonres	idents use DR 0104PN	
<ul> <li>7. Colorado Tax from tax table or the DR 0104PN line 36, you must submit the DR 0104PN with your return if applicable.</li> </ul>	0	00
8. Alternative Minimum Tax from the DR 0104AMT, you must submit the		
DR 0104AMT with your return.      8	0	00
9. Recapture of prior year credits	0	00
	0	
10. Subtotal, sum of lines 7 through 9  11. Nonrefundable Credits from the DR 0104CR line 39, the sum of lines 11 and 12		00
cannot exceed line 10, you must submit the DR 0104CR with your return.	0	00
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.	, . 0	00
you must custiff the Six 1000 Mile your folding.	i e	1 1
13. Net Income Tax, sum of lines 11 and 12. Subtract that sum from line 10.	0	00
<ul><li>14. Use Tax reported on the DR 0104US schedule line 7, you must submit the DR 0104US with your return.</li></ul>	0	00
	<b>5</b>	00
15. Net Colorado Tax, sum of lines 13 and 14  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.	2508	00
17. Prior-year Estimated Tax Carryforward • 17	,) o	00
18. Estimated Tax Payments, enter the sum of the quarterly payments		
remitted for this tax year • 18	0	0.0
19. Extension Payment remitted with the DR 0158-I	0	00
20. Other Prepayments:	0	00
21. Gross Conservation Easement Credit from the DR 1305G line 33, you must	0	$\top$
submit the DR 1305G with your return. • 21  22. Innovative Motor Vehicle Credit from the DR 0617, you must submit each	· · · · · · · · · · · · · · · · · · ·	0.0
DR 0617 with your return.	0	00
23. Refundable Credits from the DR 0104CR line 8, you must submit the	1	
DR 0104CR with your return. • 23		100
24. Subtotal, sum of lines 16 through 23	2508	00
25. Federal Adjusted Gross Income from your federal income tax form: 1040 line 7 • 25	0	00
26. Overpayment, if line 24 is greater than line 15 then subtract line 15 from line 24 26	2508	00
27. Estimated Tax Credit Carryforward to 2019 first quarter, if any • 27	1	



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

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Lauren											
28. Voluntary Contributions elected on the DR 0104CH schedule line 21, you must submit the DR 0104CH with your return. • 28						0		00			
29. Subtotal, add lines 27 and 28					0			0 0			
30. Refund, subtract line 29 from line 26 (see instructions) • 30						250	3	00			
Direct Routing Number Type: Checking						Savings		CollegeInvest	t <b>52</b> 9		
Deposit	Account Number				]						
For questions regarding CollegeInvest direct deposit or to open an account, visit CollegeInvest.org or call 800-448-2424.											
31. Net Tax D	Due, subtract line 24 from line 15, the	en add line	28		31		0 0 0				
32. Delinquent Payment Penalty (see instructions) • 32					• 32	<del></del>	······································	· · · · · · · · · · · · · · · · · · ·	000		
33. Delinquent Payment Interest (see instructions) • 33					• 33				000		
34. Estimated Tax Penalty, you must submit the DR 0204 with your return.							·- ·· · · · · · · · · · · · · · · · · ·				
(see instri	uctions)	<del></del>			• 34				000		
35. Amount You Owe, sum of lines 31 through 34					• 35	0.00			0.00		
The State may conver not be returned, if you	nt your check to a one-time electronic banking transaction, or check is rejected due to insufficient or uncollected funds	Your bank acco	unt may be debi it of Revenue ma	ed as early as the sam y collect the payment a	e day reco	eived by the ectly from yo	State, if conv	erted, your check ount electronically.	cwiji L		
Third Party I	)esignee										
return and any	allow another person to discuss this other information related to this return do Department of Revenue?	• 🗴	No •	Yes. Co	omplet	e the fo	llowing:				
Designee's Nam	e la sa	7 × × × × × × × × × × × × × × × ×	Phone Nur	nber 🌅 📜	********	ran tagan anggan	- 1	AND	Astern Ast		
•		· · · · · · · · · · · · · · · · · · ·	•								
Sign Below U Your Signature	Inder penalties of perjury, I declare that to the	best of my	knowledge a	nd belief, this retur	n is true	correct	and compl		<del></del>		
i Opnatoroj	<del>na tina anta anti tang tina anti anti anti anti anti anti anti</del>		<del> </del>		<del>* .•. ,</del>		<del></del>	3/16/19			
Spouse's Signatu	re. If joint return, BOTH must sign.	र्गसङ्ग्रह्म स्टब्स्ट स्टब्स्ट्राइस्ट स्टब्स्ट १ - १ - १ - १	Antonio (Barton)	newborgheren betraggesen	Aerosé Latinos	**************************************	Date (мм	(איממו	والمحاجة المحاجمة		
Paid Preparer's I	Name ,	- magazini melanini	<i>न्द्रदक्षणात्</i> कात्रका	CCQUESSION SPENSORS CONTRACTORS	No-sign	Paid Prep	arer's Pho	ne Programme	201473°		
		- 2 - 2		· · · · · · · · · · · · · · · · · · ·		- <u></u>					
Paid Preparer's	Address	City	to de constituir de la co	APTREAM CONTRACTOR	भ्यत्रकनुरस्य	State 🖔	Zip 📉	vigar resultativa page ingen	masemer (		
	•										

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.

DR 0084 (08/30/13)



## **Substitute Colorado W-2 Form**

## See Form Below

## Photocopy for your records.

Employer's name, address and ZIP Code:	State of Colorado Department of Revenue FOR INCOME TAX WITHHELD  State of Colorado Department of Revenue Denver, CO 80261-0008					
• • • • • • • • • • • • • • • • • • •	Federal Employer's Ider	do Identification No.				
Employee's Social Security No.	DATES OF EMPLOYMENT					
	FRO		TO			
Employee's name (first, middle, last):	Month (мм)❷	Year (YYY)	Month (MM)	1 1 1		
Lauren	04	2012	03	2019		
Employee's address and ZIP Code:	COLO. INCOME TO WITHHELD, If an		NCOME TAX WITH- ELD, if any	TOTAL WAGES (before payroll deductions)		
•	● 2508.00		404.14	0		
NOTE: If taxpayer was employed by more than one employer, a separate	statement covering ea	ich employment and	the amount of tax	c withheld must be filed.		
How did you determine the amounts listed above?  Amount listed as "wages" on the W-2 the payer provided defined in IRC 3401(a) and 3121(a).						
Give reason why Form W-2, or the Statement of Corrected Incorknown. Explain your efforts to obtain the required information.  None	ne and Tax Amounts	s was not furnishe	ed by your emplo	oyer (or the payer), if		
I declare, under penalty of perjury in the second degree, that the	e statements made l	nerein are true to	the best of my k	nowledge and belief.		
Signature: ,				Date: (MM/DD/YY)		
				03/16/19		