



**2022 Federal Tax Return Filing
Instructions
FOR THE YEAR ENDING
December 31, 2022**

Prepared for	JACOB A GARNER																
Tax Summary	<table border="1"><tr><td>Gross Income.....</td><td>\$12484</td></tr><tr><td>Adjusted Gross Income.....</td><td>\$12484</td></tr><tr><td>Total Deductions.....</td><td>\$12884</td></tr><tr><td>Total Taxable Income.....</td><td>\$0</td></tr><tr><td>Total Tax.....</td><td>\$0</td></tr><tr><td>Total Payments.....</td><td>\$335</td></tr><tr><td>Refund Amount.....</td><td>\$335</td></tr><tr><td>Amount You Owe.....</td><td>\$0</td></tr></table>	Gross Income.....	\$12484	Adjusted Gross Income.....	\$12484	Total Deductions.....	\$12884	Total Taxable Income.....	\$0	Total Tax.....	\$0	Total Payments.....	\$335	Refund Amount.....	\$335	Amount You Owe.....	\$0
Gross Income.....	\$12484																
Adjusted Gross Income.....	\$12484																
Total Deductions.....	\$12884																
Total Taxable Income.....	\$0																
Total Tax.....	\$0																
Total Payments.....	\$335																
Refund Amount.....	\$335																
Amount You Owe.....	\$0																
Make check payable to																	
Mailing Address	<div>Since you are filing your return electronically and you chose to use an electronic signature, you do not mail your return.</div>																

Instructions

If you e-filed your return and it has been accepted, you will get notified via text or email if you opted for that option.



**2022 STATE TAX RETURN FILING
INSTRUCTIONS
COLORADO
FOR THE YEAR ENDING
December 31, 2022**

Prepared for																						
Tax Summary	<table border="1"><tr><td>Adjusted Gross Income.....</td><td>\$</td><td>0</td></tr><tr><td>Total Deductions.....</td><td>\$</td><td>0</td></tr><tr><td>Total Taxable Income.....</td><td>\$</td><td>0</td></tr><tr><td>Total Tax.....</td><td>\$</td><td>0</td></tr><tr><td>Total Payments.....</td><td>\$</td><td>395</td></tr><tr><td>Refund Amount.....</td><td>\$</td><td>548</td></tr><tr><td>Amount You Owe.....</td><td>\$</td><td>0</td></tr></table>	Adjusted Gross Income.....	\$	0	Total Deductions.....	\$	0	Total Taxable Income.....	\$	0	Total Tax.....	\$	0	Total Payments.....	\$	395	Refund Amount.....	\$	548	Amount You Owe.....	\$	0
Adjusted Gross Income.....	\$	0																				
Total Deductions.....	\$	0																				
Total Taxable Income.....	\$	0																				
Total Tax.....	\$	0																				
Total Payments.....	\$	395																				
Refund Amount.....	\$	548																				
Amount You Owe.....	\$	0																				
Make check payable to																						
Mailing Address	<div>Since you are filing your return electronically and you chose to use an electronic signature, you do not mail your return.</div>																					

Special Instructions

Keep A Copy

Click on Main Menu and then E-File or Print to print your return. Attach your copy of each W-2, W-2G, 1099R or 1099G with withholding. Keep with your records for three years.

2022 TWO YEAR COMPARISON

JACOB A GARNER
652-16-5129

Keep for Your Records

	2022	2021	Difference
Filing status	Single	Single	
INCOME:			
Wages, salaries, tips, etc.	12,484	4,388	8,096
Interest income			
Ordinary dividend income			
IRA distributions and pension income			
Taxable social security income			
Capital gain or (loss) (Schedule D)			
Schedule 1 - Income			
Refunds of state and local taxes			
Alimony received			
Business income or (loss) (Schedule C)			
Other gains or (losses) (Form 4797)			
Rental real estate, partnerships, estates, etc. (Schedule E)			
Farm income or (loss) (Schedule F)			
Unemployment compensation			
Other income			
Total income	12,484	4,388	8,096
ADJUSTMENTS:			
Schedule 1 - Adjustments			
Educator expenses			
Busn expenses for reserviists, performing artists, etc			
Health savings account deduction			
Moving expenses			
Deductible part of self-employment tax			
Self-employed SEP, SIMPLE and qualified plans deduction			
Self-employed health insurance			
Penalty on early withdrawal of savings			
Alimony paid			
IRA contributions			
Student loan interest deduction			
Archer MSA deduction			
Other adjustments			
Total adjustments			
ADJUSTED GROSS INCOME:	12,484	4,388	12,484
DEDUCTIONS:			
Standard deduction or Itemized deductions	12,884	4,738	8,146
Charitable contributions if taking standard deduction	N/A		
If itemized, Schedule A deductions:			
Medical and dental expenses			
Sales, income, and other taxes paid	395	158	237
Interest paid			
Gifts to charity			
Casualty and theft losses			
Other miscellaneous deductions			
Qualified business income deduction			
TAXABLE INCOME:			

2022 TWO YEAR COMPARISON

JACOB A GARNER
652-16-5129

Keep for Your Records

	2022	2021	Difference
TAX COMPUTATION (BEFORE CREDITS):			
Tax			
Tax calculation method	TABLE	TABLE	
Schedule 2 - Taxes			
Alternative minimum tax			
Excess advance premium tax credit repayment			
Total taxes			
Tax rate	10%	0.1	
CREDITS:			
Child and other dependents tax credit			
Schedule 3 - Non-Refundable Credits			
Foreign tax credit			
Child care credit			
Education credit			
Retirement savings contribution credit			
Other credits			
Total credits			
OTHER TAXES:			
Schedule 2 - Other Taxes			
Self-employment tax			
Additional tax on IRAs			
Other taxes			
TOTAL TAXES:			
PAYMENTS:			
Federal income tax withheld	335	166	169
Estimated payments made			
Earned income credit			
Refundable child tax credit or additional child tax credit			
American opportunity credit			
Recovery rebate credit			
Schedule 3 - Refundable Credits & Payments			
ACA premium tax credit			
Qualified sick and family leave credit			
Deferral for certain Schedule H or Schedule SE filers		N/A	
Other payments			
Total payments	335	166	169
AMOUNT DUE / REFUND:			
Amount overpaid	335	166	169
Overpayment applied to next year			
Refund	335	166	169
Amount due			
Penalty			

Tax Calculation Methods:

Sch D = Sch D tax worksheet
Sch J = Inc Aver for Farmer/Fisherman
FEITW = Foreign Earned Income Tax WS

QDCGTW = Qual Div Cap Gain Tax WS
F8615 = Child with unearned income

TCW = Tax Comp Worksheet (rates)
TABLE = Tax Table

Filing Status ☒ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying surviving spouse (QSS)
Check only If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the one box. qualifying person is a child but not your dependent:

Your first name and middle initial JACOB A	Last name GARNER	Your social security number 652-16-5129
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. 8212 Park Rd		Apt. no.	Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. Rye		State CO	
Foreign country name		Foreign postal code	

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

Standard Deduction **Someone can claim:** ☒ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** ☐ Were born before January 2, 1958 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1958 ☐ Is blind

Dependents (see instructions):

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see inst.): Child tax credit Credit for other dependents
If more than four dependents, see instructions and check here <input type="checkbox"/>				

Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a Form W-2, see instructions. Attach Sch. B if required. Standard Deduction for-- <ul style="list-style-type: none">• Single or Married filing separately, \$12,950• Married filing jointly or Qualifying surviving spouse, \$25,900• Head of household, \$19,400• If you checked any box under Standard Deduction, see instructions.	1a Total amount from Form(s) W-2, box 1 (see instructions)	1a 12,484
	b Household employee wages not reported on Form(s) W-2	1b
	c Tip income not reported on line 1a (see instructions)	1c
	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d
	e Taxable dependent care benefits from Form 2441, line 26	1e
	f Employer-provided adoption benefits from Form 8839, line 29	1f
	g Wages from Form 8919, line 6	1g
	h Other earned income (see instructions)	1h
	i Nontaxable combat pay election (see instructions)	1i
	z Add lines 1a through 1h	1z 12,484
	2a Tax-exempt interest	2a
	3a Qualified dividends	3a
	4a IRA distributions	4a
	5a Pensions and annuities	5a

b Taxable interest	2b
b Ordinary dividends	3b
b Taxable amount	4b
b Taxable amount	5b
b Taxable amount	6b
7 Capital gain or (loss). Attach Schedule D if required. If not required, check here	7
8 Other income from Schedule 1, line 10	8
9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income	9 12,484
10 Adjustments to income from Schedule 1, line 26	10
11 Subtract line 10 from line 9. This is your adjusted gross income	11 12,484
12 Standard deduction or itemized deductions (from Schedule A)	12 12,884
13 Qualified business income deduction from Form 8995 or Form 8995-A	13
14 Add lines 12 and 13	14 12,884
15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income	15 0

Tax and Credits	16 Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	16	0
	17 Amount from Schedule 2, line 3	17	
	18 Add lines 16 and 17	18	0
	19 Child tax credit or credit for other dependents from Schedule 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 zero or less, enter -0-	22	0
	23 Other taxes, including self-employment tax, from Schedule 2, line 21	23	
24 Add lines 22 and 23. This is your total tax	24	0	

Payments	25 Federal income tax withheld from:			
	a Form(s) W-2	25a	335	
	b Form(s) 1099	25b		
	c Other forms (see instructions)	25c		
	d Add lines 25a through 25c	25d	335	
	26 2022 estimated tax payments and amount applied from 2021 return	26		
	27 Earned income credit (EIC)	27		
	28 Additional child tax credit from Schedule 8812	28		
	29 American opportunity credit from Form 8863, line 8	29		
	30 Reserved for future use	30		
31 Amount from Schedule 3, line 15	31			
32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32			
33 Add lines 25d, 26, and 32. These are your total payments	33	335		

Refund	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	335
	35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	335

Direct deposit? See instructions. **b** Routing number 307070005 **c** Type: ☒ Checking ☐ Savings
d Account number 1000494086103

36 Amount of line 34 you want applied to your 2023 estimated tax	36	
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37 Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
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Third Party Designee	Do you want to allow another person to discuss this return with the IRS? See instructions <input type="checkbox"/> Yes. Complete below. <input checked="" type="checkbox"/> No		
Designee's name	Phone no.	Personal identification number (PIN)	

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.			
	Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
	Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
	Phone no. 719-281-7660	Email address jacobaarongarner@gmail.com		

Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> Self-employed
	Firm's name	Phone no.			
	Firm's address	Firm's EIN			

Go to www.irs.gov/Form1040 for instructions and the latest information.Form **1040** (2022)

2022 WAGES AND SALARIES SUMMARY ATTACHMENT

JACOB A GARNER
652-16-5129

Employer Name	Employer EIN	T or S	Wages	Federal Withholding	Social Security Tax Withheld	State	State Wages	State Tax Withheld	Local Tax Withheld
PIANO MARVEL LLC	26-1720869	T	12,484	335	774	CO	12,484	395	

CLIENT COPY

DO NOT FILE

Total			12,484	335	774		12,484	395	
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2022 FEDERAL TAX WITHHOLDINGS ATTACHMENT

JACOB A GARNER
652-16-5129

W-2

PIANO MARVEL LLC

335

CLIENT COPY

DO NOT FILE

Total to Form 1040/1040-SR line 25d

335

2022 SCHEDULE A – STATE AND LOCAL TAX ATTACHMENT

JACOB A GARNER
652-16-5129

CO STATE W2 W/H FROM PIANO MARVEL LLC

395

CLIENT COPY

DO NOT FILE

TOTAL TO SCHEDULE A LINE 5A

2022 STANDARD DEDUCTION WORKSHEET FOR DEPENDENTS – LINE 12

JACOB A GARNER
652-16-5129

Keep for Your Records

Use this worksheet **only** if someone can claim you, or your spouse if filing jointly, as a dependent.

1. Check if: ☐ You were born before January 2, 1958.
☐ You are blind.
☐ Spouse was born before January 2, 1958.
☐ Spouse is blind. } Total number of boxes checked 1. _____
2. Is your **earned income** * more than \$750?
☒ **Yes.** Add \$400 to your earned income. Enter the total. 2. 12,884
☐ **No.** Enter \$1,150.
3. Enter the amount shown below for your filing status.
● Single or married filing separately – \$12,950
● Married filing jointly – \$25,900
● Head of household – \$19,400 } 3. 12,950
4. **Standard deduction.**
a. Enter the **smaller** of line 2 or line 3. If born after January 1, 1958, and not blind, **stop here** and enter this amount on Form 1040 or 1040–SR, line 12. Otherwise, go to line 4b 4a. 12,884
b. If born before January 2, 1958, or blind, multiply the number on line 1 by \$1,400 (\$1,750 if single or head of household) 4b. _____
c. Add lines 4a and 4b. Enter the total here and on Form 1040 or 1040–SR, line 12 4c. 12,884

* **Earned income** includes wages, salaries, tips, professional fees, and other compensation received for personal services you performed. It also includes any taxable scholarship or fellowship grant. Generally, your earned income is the total of the amount(s) you reported on Form 1040 or 1040–SR, line 1z, and Schedule 1, lines 3, 6, 8r, 8t, and 8u minus the amount, if any, on Schedule 1, line 15.

DO NOT FILE



220104 11729

DR 0104 (11/18/22)

COLORADO DEPARTMENT OF REVENUE

Tax.Colorado.gov

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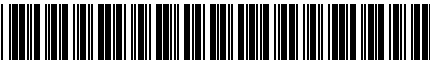
(0013)



2022 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
GARNER		Jacob		A
Date of Birth (MM/DD/YYYY)	SSN or ITIN	Deceased <input type="checkbox"/>		
12/14/2000	652-16-5129	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
If Joint, Spouse's Last Name	Spouse's First Name		Middle Initial	
Spouse's Date of Birth (MM/DD/YYYY)	Spouse's SSN or ITIN	Deceased <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
Mailing Address		Phone Number		
8212 PARK RD		719 281 7660		
City	State	ZIP Code	Foreign Country (if applicable)	
Rye	CO	810698700		
<p>To see if you or members of your household qualify for free or reduced-cost health coverage, check this box if:</p> <p><input type="checkbox"/> • You are a Colorado resident and at least one person in your household does not have health coverage AND • 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.</p>				
Round To The Nearest Dollar				
1. Enter Federal Taxable Income from your federal income tax form: 1040, 1040 SR, or 1040 SP line 15.		• 1	0	00
Include W-2s and 1099s with CO withholding.				
Additions to Federal Taxable Income				
2. State Addback, enter the state income tax deduction from your federal form 1040, 1040 SR, or 1040 SP schedule A, line 5a (see instructions)		• 2	0	00
3. Qualified Business Income Deduction Addback (see instructions)		• 3	0	00



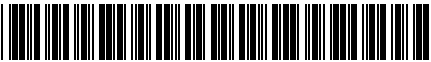
220104 21729

Name	JACOB A GARNER		SSN or ITIN	652-16-5129
4. Itemized Deduction addback (see instructions)	• 4		00	
5. CollegeInvest Recapture Prior Year - Non-qualifying Tuition Program Contribution (see instructions)	• 5		00	
6. Other Additions, explain (see instructions)	• 6	0	00	
Explain:				
7. Subtotal, sum of lines 1 through 6	7	0	00	
Colorado Subtractions				
8. Subtractions from the DR 0104AD Schedule, line 22, you must submit the DR 0104AD schedule with your return.	• 8	0	00	
9. Colorado Taxable Income, subtract line 8 from line 7	• 9	0	00	
Tax, Prepayments and Credits: see 104 Book for full-year tax table and part-year DR 0104PN Schedule				
10. Colorado Tax from tax table or the DR 0104PN line 36, you must submit the DR 0104PN with your return if applicable.	• 10	0	00	
11. Alternative Minimum Tax from the DR 0104AMT line 8, you must submit the DR 0104AMT with your return.	• 11	0	00	
12. Recapture of prior year credits	• 12	0	00	
13. Subtotal, sum of lines 10 through 12	13	0	00	
14. Nonrefundable Credits from the DR 0104CR line 48, the sum of lines 14, 15, and 16 cannot exceed line 13, you must submit the DR 0104CR with your return.	• 14	0	00	
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	0	00	
16. Strategic Capital Tax Credit from DR 1330, the sum of lines 14, 15, and 16 cannot exceed line 13, you must submit the DR 1330 with your return.	• 16	0	00	
17. Net Income Tax, sum of lines 14, 15, and 16. Subtract that sum from line 13.	17	0	00	
18. Use Tax reported on the DR 0104US schedule line 7, you must submit the DR 0104US with your return.	• 18	0	00	
19. Net Colorado Tax, sum of lines 17 and 18	19	0	00	
20. CO Income Tax Withheld from W-2s and 1099s, you must submit the W-2s and/or 1099s claiming Colorado withholding with your return.	• 20	395	00	
21. Prior-year Estimated Tax Carryforward	• 21	0	00	
22. Estimated Tax Payments, enter the sum of the quarterly payments remitted for this tax year	• 22	0	00	
23. Extension Payment remitted with the DR 0158-I	• 23	0	00	



220104 31729

Name		SSN or ITIN				
JACOB A GARNER		652-16-5129				
24. Other Prepayments: <input type="checkbox"/> • DR 0104BEP <input type="checkbox"/> • DR 0108 <input type="checkbox"/> • DR 1079 • 24		0	00			
25. Gross Conservation Easement Credit from the DR 1305G line 33, you must submit the DR 1305G with your return. • 25		0	00			
26. Innovative Motor Vehicle and Innovative Truck Credit from form DR 0617, you must submit each DR 0617 with your return. • 26		0	00			
27. Refundable Credits from the DR 0104CR line 14, you must submit the DR 0104CR with your return. • 27		0	00			
28. Subtotal, sum of lines 20 through 27 28		395	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.						
29. Federal Adjusted Gross Income from your federal income tax form: 1040 line 11, 1040 SR line 11, or 1040 SP line 11 • 29		12484	00			
30. Nontaxable Social Security Income • 30			00			
31. Nontaxable interest income from state and local bonds • 31			00			
32. Sum of lines 29 through 31: Modified AGI for TABOR 32		12484	00			
Modified AGI Tiers for State Sales Tax Refund						
If line 32 is:	\$48,000 or less	\$48,001 - \$95,000	\$95,001 - \$151,000	\$151,001 - \$209,000	\$209,001 - \$268,000	\$268,001 - or more
Single Filers Enter	\$153	\$208	\$234	\$285	\$300	\$486
Joint Filers Enter	\$306	\$416	\$468	\$570	\$600	\$972
33. State Sales Tax Refund: For full-year Colorado residents, born before 2004, or full-year Colorado residents who are under the age of eighteen but are required to file a return. Use the amount on line 32 and reference the table above. See instructions if you are filing an extension. • 33		153				00
34. Sum of lines 28 and 33 34		548				00
35. Overpayment, if line 34 is greater than line 19 then subtract line 19 from line 34 35		548				00
36. Estimated Tax Credit Carryforward to 2023 first quarter, if any. • 36						00
If you have an overpayment on line 37 below and would like to donate all or a portion of your overpayment to a qualified Colorado charity, include Form DR 0104CH to contribute.						
37. Refund, subtract line 36 from line 35 (see instructions) • 37		548				00
Direct Routing Number <input type="text" value="3"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/> Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> CollegeInvest 529						
Deposit Account Number <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="4"/> <input type="text" value="9"/> <input type="text" value="4"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="6"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="3"/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>						
For questions regarding CollegeInvest direct deposit or to open an account, visit CollegeInvest.org or call 800-448-2424.						



220104 41729

Name				SSN or ITIN		
JACOB A GARNER				652-16-5129		
38. Net Tax Due, subtract line 34 from line 19				38	00	
39. Delinquent Payment Penalty (see instructions)				• 39	00	
40. Delinquent Payment Interest (see instructions)				• 40	00	
41. Estimated Tax Penalty, you must submit the DR 0204 with your return. (see instructions)				• 41	0 00	
42. Amount You Owe, sum of lines 38 through 41				• 42		
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		
Paid Preparer's Address				City	State ZIP Code	

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.



228454 11729

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)	or Fiscal Year beginning (MM/DD/YY)
01/01/22	

Tax Type				
<input checked="" type="checkbox"/> Individual Income (DR 0104)	<input type="checkbox"/> Corporate Income (DR 0112)	<input type="checkbox"/> Partnership/S-Corp Income (DR 0106)	<input type="checkbox"/> Fiduciary Income (DR 0105)	
Taxpayer Last Name or Business Name		First Name or Business DBA if different from Business Name		Middle Initial
GARNER		Jacob		A
Spouse's Last Name (if applicable)		First Name		Middle Initial
Taxpayer SSN or ITIN		Spouse SSN or ITIN (if applicable)		FEIN
652-16-5129				
Taxpayer or Business Address		City	State	ZIP
8212 Park Rd		Rye	CO	810698700

Part I -- Tax Return Information

1. Total Income from your federal return (see instructions for more information)	1	\$	12484
2. Taxable Income (or allowable deduction) from your federal return (see instructions for more information)	2	\$	0
3. Colorado Tax from your Colorado return (see instructions for more information)	3	\$	0
4. Colorado Tax Withheld or Payments, from your Colorado return (see instructions or more information)	4	\$	395

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. 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 (MM/DD/YY)
Spouse's Signature (If Joint Return, Both Must Sign)	Date (MM/DD/YY)

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. 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 8454) 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, Your SSN, or ITIN
Check if also Preparer <input type="checkbox"/>	Date (MM/DD/YY)