

Form  
**1040EZ****Income Tax Return for Single and  
Joint Filers With No Dependents** (99)**2017**

OMB No. 1545-0074

Your first name and initial Rahul		Last name Vishvakarma		Your social security number 729 34 3752	
If a joint return, spouse's first name and initial		Last name		Spouse's social security number	
Home address (number and street). If you have a P.O. box, see instructions. 17030 Carlson Dr				Apt. no. 1416	▲ Make sure the SSN(s) above are correct.
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). Parker CO 80134					
Foreign country name		Foreign province/state/county		Foreign postal code	

<b>Income</b>  Attach Form(s) W-2 here.  Enclose, but do not attach, any payment.	<b>1</b>	Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. Attach your Form(s) W-2.	<b>1</b>	71,676.
	<b>2</b>	Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ.	<b>2</b>	
	<b>3</b>	Unemployment compensation and Alaska Permanent Fund dividends (see instructions).	<b>3</b>	
	<b>4</b>	Add lines 1, 2, and 3. This is your <b>adjusted gross income</b> .	<b>4</b>	71,676.
	<b>5</b>	If someone can claim you (or your spouse if a joint return) as a dependent, check the applicable box(es) below and enter the amount from the worksheet on back. <input type="checkbox"/> You <input type="checkbox"/> Spouse If no one can claim you (or your spouse if a joint return), enter \$10,400 if <b>single</b> ; \$20,800 if <b>married filing jointly</b> . See back for explanation.	<b>5</b>	10,400.
	<b>6</b>	Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your <b>taxable income</b> .	<b>6</b>	61,276.
<b>Payments, Credits, and Tax</b>	<b>7</b>	Federal income tax withheld from Form(s) W-2 and 1099.	<b>7</b>	11,727.
	<b>8a</b>	<b>Earned income credit (EIC)</b> (see instructions) No	<b>8a</b>	
	<b>b</b>	Nontaxable combat pay election. 8b		
	<b>9</b>	Add lines 7 and 8a. These are your <b>total payments and credits</b> .	<b>9</b>	11,727.
	<b>10</b>	<b>Tax.</b> Use the amount on <b>line 6 above</b> to find your tax in the tax table in the instructions. Then, enter the tax from the table on this line.	<b>10</b>	11,058.
	<b>11</b>	Health care: individual responsibility (see instructions) Full-year coverage <input checked="" type="checkbox"/>	<b>11</b>	0.
<b>12</b>	Add lines 10 and 11. This is your <b>total tax</b> .	<b>12</b>	11,058.	
<b>Refund</b>  Have it directly deposited! See instructions and fill in 13b, 13c, and 13d, or Form 8888.	<b>13a</b>	If line 9 is larger than line 12, subtract line 12 from line 9. This is your <b>refund</b> . If Form 8888 is attached, check here <input type="checkbox"/>	<b>13a</b>	669.
	<b>b</b>	Routing number 1 0 2 0 0 0 7 6	<b>c</b>	Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings
	<b>d</b>	Account number 9 1 5 4 8 2 7 8 0 3		
<b>Amount You Owe</b>	<b>14</b>	If line 12 is larger than line 9, subtract line 9 from line 12. This is the <b>amount you owe</b> . For details on how to pay, see instructions.	<b>14</b>	

<b>Third Party Designee</b>	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)	

<b>Sign Here</b>  Joint return? See instructions.  Keep a copy for your records.	Under penalties of perjury, I declare that I have examined this return and, to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.			
	Your signature	Date	Your occupation Software Engineer	Daytime phone number (571) 524-9520
	Spouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

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

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

BAA

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Form **1040EZ** (2017)



178453 11555

DR 8453 (10/12/17)  
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	
729-34-3752					
Taxpayer Last Name	VISHVAKARMA		Taxpayer First Name	RAHUL	
Middle Initial					
Spouse Last Name (If Joint Return)		Spouse First Name (If Joint Return)			
Street Address			Phone Number		
17030 CARLSON DR APT 1416			(571) 524-9520		
City			State	Zip	
PARKER			CO	80134	

**Part I — Tax Return Information**

1. Total Income, line 22 from your federal form 1040, line 15 on form 1040A, or line 4 on form 1040EZ	1	\$	71676
2. Taxable Income, line 43 on federal form 1040, line 27 on form 1040A, line 6 on form 1040EZ	2	\$	61276
3. Colorado Tax, Line 15 on Colorado form 104	3	\$	2837
4. Colorado Tax Withheld, Line 16 on Colorado form 104	4	\$	2995
5. Refund, Line 30 Colorado form 104	5	\$	158
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 2017 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 2017 Federal/Colorado income tax returns. If I am the preparer, under penalties of perjury I declare that I have reviewed the above taxpayer's 2017 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	
SELF-PREPARED			

Check if also Preparer ☐

Date (MM/DD/YY)



170104 11555

DR 0104 (06/30/17)

COLORADO DEPARTMENT OF REVENUE

Colorado.gov/Tax

(0013)



## 2017 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
VISHVAKARMA		RAHUL		
Deceased <input type="checkbox"/>		Date of Birth (MM/DD/YYYY)	SSN	
<input type="checkbox"/> If checked and claiming a refund, you must submit the DR 0102 with your return.		08/02/1989	729-34-3752	
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	0308	05/17/16
If Joint, Spouse's Last Name		Spouse's First Name		Middle Initial
Deceased <input type="checkbox"/>		Spouse's Date of Birth (MM/DD/YYYY)	Spouse's SSN	
<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	
17030 CARLSON DR APT 1416			(571) 524-9520	
City	State	Zip Code	Foreign Country (if applicable)	
PARKER	CO	80134		
<b>Round To The Next Dollar</b>				
1. Enter Federal Taxable Income from your federal income tax form: 1040EZ line 6, 1040A line 27, 1040 line 43			• 1	61276 00
Staple W-2s and 1099s with CO withholding here. ◀				
<b>Additions to Federal Taxable Income</b>				
2. State Addback, enter the state income tax deduction from your federal form 1040 schedule A, line 5 (see instructions)			• 2	00
3. Other Additions, explain (see instructions)			• 3	00
Explain:				



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DR 0104 (06/30/17)  
COLORADO DEPARTMENT OF REVENUE  
Colorado.gov/Tax

Name	SSN
RAHUL VISHVAKARMA	729-34-3752
4. Subtotal, sum of lines 1 through 3	4 61276 00
5. Subtractions from the DR 0104AD Schedule, line 18, you must submit the DR 0104AD schedule with your return.	• 5 00
6. Colorado Taxable Income, subtract line 5 from line 4	• 6 61276 00
<b>Tax, Prepayments and Credits: full-year residents use DR 0104CR and part-year and nonresidents use DR 0104PN</b>	
7. Colorado Tax from tax table or the DR 0104PN line 36, you must submit the DR 0104PN with your return if applicable.	• 7 2837 00
8. Alternative Minimum Tax from the DR 0104AMT, you must submit the DR 0104AMT with your return.	• 8 00
9. Recapture of prior year credits	• 9 00
10. Subtotal, sum of lines 7 through 9	10 2837 00
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.	• 11 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.	• 12 00
13. Net Income Tax, sum of lines 11 and 12. Subtract that sum from line 10.	13 2837 00
14. Use Tax reported on the DR 0104US schedule line 7, you must submit the DR 0104US with your return.	• 14 00
15. Net Colorado Tax, sum of lines 13 and 14	15 2837 00
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.	• 16 2995 00
17. Prior-year Estimated Tax Carryforward	• 17 00
18. Estimated Tax Payments, enter the sum of the quarterly payments remitted for this tax year	• 18 00
19. Extension Payment remitted with the DR 0158-I	• 19 00
20. Other Prepayments: <input type="checkbox"/> • DR 0104BEP <input type="checkbox"/> • DR 0108 <input type="checkbox"/> • DR 1079 • 20	00
21. Gross Conservation Easement Credit from the DR 1305G line 33, you must submit the DR 1305G with your return.	• 21 00
22. Innovative Motor Vehicle Credit from the DR 0617, you must submit each DR 0617 with your return.	• 22 0 00
23. Refundable Credits from the DR 0104CR line 8, you must submit the DR 0104CR with your return.	• 23 00
24. Subtotal, sum of lines 16 through 23	24 2995 00
25. Federal Adjusted Gross Income from your federal income tax form: 1040EZ line 4; 1040A line 21; 1040 line 37	• 25 71676 00
26. Overpayment, if line 24 is greater than line 15 then subtract line 15 from line 24	26 158 00
27. Estimated Tax Credit Carryforward to 2018 first quarter, if any	• 27 00



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DR 0104 (06/30/17)  
COLORADO DEPARTMENT OF REVENUE  
Colorado.gov/Tax

Name		SSN
RAHUL VISHVAKARMA		729-34-3752
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	158 00
<b>Direct Deposit</b> Routing Number 1 0 2 0 0 0 0 7 6 Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> CollegeInvest 529 Account Number 9 1 5 4 8 2 7 8 0 3 For questions regarding CollegeInvest direct deposit or to open an account, visit <a href="http://CollegeInvest.org">CollegeInvest.org</a> 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.		
<b>Third Party Designee</b> 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? • <input type="checkbox"/> No • <input type="checkbox"/> Yes. Complete the following: Designee's Name Phone Number • •		
<b>Sign Below</b> 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
SELF PREPARED		
Paid Preparer's Address		City State Zip

REV 12/15/17 INTUIT.CG.CFP.SP

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.