DR 0020C (07/28/21)
COLORADO DEPARTMENT OF REVENUE
Denver CO 80261-0006
Tax. Colorado, gov

Instructions for Coal Severance Tax Return DR 0020C

Definitions

Coal—coal which has been processed into the form in which it is sold or otherwise used. Such processing includes, but is not limited to, cleaning and washing.

Taxpayer—any person engaged in the severance of coal.

Filing Requirements

Every individual, corporation, business trust, partner in a partnership, association, estate, trust or any other legal entity liable for the payment of Colorado severance tax must file a severance tax return. This return must be made for the same tax year used for federal income tax purposes and is due on or before the 15th day of the fourth month following the end of the taxable year.

Controlled Group

In case of a controlled group of corporations as defined in section 613A of the Internal Revenue Code or of a family (an individual, the individual's spouse, and their minor children) where more than one member of the group or family are subject to the severance tax, the tax must be jointly computed and the severance tax return must be jointly filed under the name of the principal taxpaying corporation, the married couple or the single adult. The DR 0021AS, available upon request from the Department, must be attached in the case of a controlled group of corporations.

Taxable Quarters

The coal severance tax liability for the year is the sum of the tax computed for each of four quarters. Divide your tax year into four quarters.

Production

Report on lines 2 through 5, your total tonnage of coal production per quarter in accordance with the classifications given. Report your total quarterly coal production on line 6.

Computation of Tax

Severance coal tax rate charts are available in the Tax Index under Severance Tax, Coal Tax Rates at Tax. Colorado.gov

Impact Assistance Credit

A credit against the severance tax is allowed with respect to contributions of property or money to units of local government. The amount of the credit must be certified by the executive director of the Department of Local Affairs.

Estimated Tax

Every corporation subject to Colorado severance tax must file a declaration of estimated tax (DR 0021PC) if its severance tax liability for the current tax year can reasonably be expected to exceed its Colorado severance tax credits by \$5,000 or more.

Interest and penalty

If the return is filed after the due date, interest at the current statutory rate is due on any balance of tax due until paid. A penalty of the larger of \$30 or 30% of the balance of tax due is due on any delinquently filed return. A corporation that underpays its estimated tax may owe an estimated tax penalty.

Extension of Time for Filing

An automatic six-month extension of time for filing the severance tax return is allowed. This is an extension of time for filing your severance tax return, not an extension of time for paying your tax. If you owe additional tax, use the DR 0021SC to submit an extension payment.

Amended Return

If you find it necessary to amend your Colorado severance tax return, you are required to file the DR 0020CX.

Information

Forms and additional information can be accessed on the Web site at *Tax.Colorado.gov* or by telephone at 303-238-SERV (7378).



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Colorado Coal Severance Tax Return

				Tax Period Beginning (MM/DD/YY)				Tax Period Ending (MM/DD/YY)					
Last Name or Business Name Fir						First Name	rirst Name			nitial Colo	Colorado Account Number		
Addı	ess						City			FEIN	l		
State ZIP Foreign C				ountry			Phor	Phone Number					
If th	is is a fin	al ret	urn, check	this box	. • [I			
Ro	und all am	nounts	to the neare	st dollar		1 ST		2 ND	3	RD		4 TH	_
			F										
1.	Taxable		From (MM	I/DD/YY)									_
	Quarters	3	Through (N	MM/DD/YY)									
	I I - I		1.1		1	P	roduc	ction			1		
2.	Undergre Producti								•		•		
3.			Nonlignitic		•								_
	Producti	on –	(tons)		•		•		•		•		
4.		Lignit	ic Production	on –									
5	(tons) Surface	Nonli	anitic		•		•		•		•		
٥.	Producti				•				•		•		
6.	Total Pro												
	add lines	s 2 th	rough 5		•		•		•		•		
					I		Tax	(1		
7.	Tax Exe	mpt T	onnage			300,0	00	300,000		300,000		300,00	00
	Taxable							000,000					
	line 6 mi	inus li	ne 7										
۵	Tax Rate	o for (Juantan				%	%		%			%
	Tax for C						70	70		70			70
	times lin		,,		•\$.(00 \$.00	•\$.00	•\$.0	00
						Т	ax Cre	edits					
11.			ound Produ	ıction,									
12	line 2 plu		Production,										_
12.	line 2 plu												
13.	Average	of lin	es 11 and 1	12									
4.4	[(lines 11			In									
14.	Credit % line 6	, iine	13 divided	Dy			%	%		%			%
	iiie o	-					/0	/0					/0
15. Credit, line 14 times line 10			10	•\$.(00 •\$.00	•\$.00	•\$.0	00	
16.	Net Tax,	line 1	10 minus lir	ne 15	•\$		00 \$.00	•\$.00	•\$.0	00
	17 To	ntal ta	x add all a	mounts	on lin	e 16			a 17	7		0.0	



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18. Impact assistance credit				• 18		00	
19. Net tax, line 17 minus line 18	but not less th	an zero		19		0 0	
Ter rectax, me ir imiae mie re	2411011000 111	<u> </u>					
20. Estimated tax and extension	payments			• 20		0.0	
21. If line 20 is larger than line 19 22. Enter the amount from line 27			direct deposit	21		00	
information below	i, ii aiiy, you wa	ant refunded. Provide	ullect deposit	• 22		00	
Direct Deposit	Routing Number Account Number		Ту	rpe:	Checking	Savings	
23. Enter amount from line 21, if	any, you want o	credited to estimated t	ax for next year	• 23		0.0	
24. If line 19 is larger than line 20	24		0.0				
25. Interest on balance of tax due	• 25		0.0				
26. Penalty on balance of tax due)			• 26		0.0	
27. Estimated tax penalty due—:	see instructions	S		• 27		0.0	
28. Payment due with this return,	add lines 24 th	hrough 27	Paid by EFT	• 28	\$.00	
The State may convert your check to a one time electivity in the returned. If your check is rejected due to it.							
Under penalty of perjury in the se and belief it is true, correct, and c		declare that I have ex	amined this return	and to th	ne best of my kn	owledge	
Signature of Taxpayer or Corporate Office		Date (MM/DD/YY)					
Last Name (Preparer of return)	me (Preparer of return) First Name (Preparer of return) Middle				Phone Number		
Address					1		
City				State	ZIP		
Mail to and make check payal		o Department of Reve , CO 80261-0006	nue		1		