DR 0021X (08/20/23)

COLORADO DEPARTMENT OF REVENUE

Denver CO 80261-0006

Tax. Colorado.gov

# 2023 Amended Colorado Oil and Gas Severance Tax Return

# Instructions

The Amended Colorado Oil and Gas Severance Tax Return (DR 0021X) is required to be used when correcting your Colorado Oil and Gas Severance Tax Return (DR 0021).

#### Statute of Limitations

The statute of limitations for filing a Colorado severance tax claim for refund is generally three years from the due date of the original return or three years from the date of last tax payment for the year involved, whichever is later.

# **Refund for Deceased Taxpayer**

To request a refund for a deceased taxpayer, write "deceased" across the top of the return and the date of death next to the deceased person's name. Additionally, you must sign the return and write "filling as surviving spouse" or "filling as legal representative" by your signature.

Any person other than the surviving spouse who files a return and requires a refund on behalf of a deceased person must include a copy of the death certificate and the DR 0102, Claim for Refund for Deceased Taxpayer.

# **Colorado Account Number**

For business accounts, enter your Colorado account number and your Federal Employer Identification Number (FEIN) in the spaces provided. For individuals, enter your Social Security number or ITIN.

#### Lines 11 through 17

Compute the amount owed to the state on the amended return. Any decrease in the amount of the overpayment (line 11) or increase in the amount owed (line 12) will indicate that an amount is owed with the amended return. To pay the amount you owe, write your Colorado account number or Federal Employer Identification Number (FEIN) on your check. Enclose but do not attach your payment with DR 0021X.

# Lines 18 through 21

Compute the amount of credit available on the amended return. Any increase in the amount of the overpayment (line 18) or decrease in the amount owed (line 19) will indicate that an overpayment is available with the amended return. The overpayment can be credited to estimated tax (line 21) for the tax year following the period on the amended return, or can be requested as a refund (line 20).

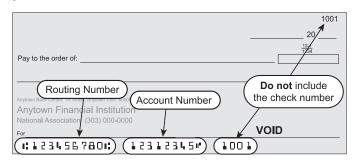
#### **Direct Deposit**

The department can deposit your refund directly into your account at a U.S. bank or other financial institution (such as

a mutual fund, brokerage firm, or credit union) in the United States.

## **How do I use Direct Deposit?**

The **routing number** must be nine digits. The **account number** can be up to 17 characters (both numbers and letters). Include hyphens but omit spaces and special symbols.



You should contact your financial institution to ensure your deposit will be accepted and to obtain the correct routing and account numbers. This is especially important if you want your refund deposited to a savings account at a credit union. The Department of Revenue is not responsible for a lost refund if you enter the wrong account information. Any refund claim that, for any reason, cannot be deposited into the account specified will be issued and mailed in check form instead.

#### Interest

If the return is amended after the original due date of the return, interest at the applicable statutory rate will accrue on any balance of tax due until paid. Interest rates are published on our web site at <u>Tax.Colorado.gov</u>

## **Penalty**

The penalty on any balance of tax due is \$30 or 30% of the balance of tax due, whichever is greater.

# Reason for amended return

Include an explanation and any documentation, including schedule DR 0021D, and DR 0021PD, if applicable, needed to substantiate the changes reported on the amended return.

# **Forms and Information**

If you have any questions you may call the Department of Revenue at (303) 238-SERV (7378) or see our web site at <u>Tax.Colorado.gov</u> for forms and information.



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# 2023 Amended Colorado Oil and Gas Severance Tax Return (7102)

2. Impact assistance credit  • 2 \$  00  3. Net tax, line 1 minus line 2 but not less than zero  Prepayments  4. Severance tax withheld, include form(s) DR 0021W  • 4 \$  00  5. Estimated tax and extension payments  • 5 \$  00  6. Total Prepayments, sum of lines 4 and 5  Stop   Stop here to let the department calculate your refund or balance due. Otherwise, manually complete the return yourself and continue with line 7.  7. If line 6 is larger than line 3, enter your overpayment  • 7 \$  00  8. Enter the overpayment from your original return or as previously adjusted  • 8 \$  00	For Taxable Year (2023)	Fiscal Tax Year Beginning (MM/23)			Fiscal Tax Year Ending (MM/YY)						
Deceased Yes SSN or ITIN Colorado Account Number (if applicable)    First Name	2023										
Deceased Yes  If Joint, Spouse or Partner Last Name (see controlled group definition)    First Name	Last Name or Business Name				First Name	9				Middle	Initial
Deceased Yes  If Joint, Spouse or Partner Last Name (see controlled group definition)    First Name											
If Joint, Spouse or Partner Last Name (see controlled group definition)    First Name		SSN or ITIN			Colorado Ad	count Nu	ımber	(if applicable)			
Address    FEIN (if applicable)	Deceased Yes										
Deceased Yes  Address  Foreign Country  City  State ZIP  Phone Number  If this is a final return, check this box  Are you a producer of Colorado Oil or Gas?  Yes  No  Check one:  Cash Basis Filer  Tax and Credit – Complete schedule DR 0021D first. Include the DR 0021D with this form when you file  Round to the nearest dollar  1. Oil and gas tax, enter amount from line 5, DR 0021D  2. Impact assistance credit  2. \$ 00  3. Net tax, line 1 minus line 2 but not less than zero  3. \$ 00  Prepayments  4. Severance tax withheld, include form(s) DR 0021W  4. \$ 00  5. Estimated tax and extension payments  5. \$ 00  6. Total Prepayments, sum of lines 4 and 5  Stop  Stop Pophere to let the department calculate your refund or balance due. Otherwise, manually complete the return yourself and continue with line 7.  7. If line 6 is larger than line 3, enter your overpayment  7. \$ 00  8. Enter the overpayment from your original return or as previously adjusted  8. \$ 00  9. If line 3 is larger than line 6, enter the amount owed  9. 9. \$ 00	If Joint, Spouse or Partner Last I	Name (see contr	olled group	definition)	First Name	9				Middle	Initial
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COLORADO DEPARTMENT OF REVENUE
Denver CO 80261-0006
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Compute the am	ount you owe		
<b>11.</b> Line 8 minus line 7, but not less than zero	11	\$	00
12. Line 9 minus line 10, but not less than zero	\$	00	
<b>13.</b> Additional tax due, total of lines 11 and 12	\$	00	
14. Interest due on additional tax	\$	00	
15. Penalty due	\$	00	
16. Estimated tax penalty due	• 16	\$	00
17. Payment due with this return, sum of lines 13 through 16	Electronically • 17 paid	\$	
The State may convert your check to a one time electronic banking transaction. Your bank account not be returned. If your check is rejected due to insufficient or uncollected funds, the Department			
Compute yo	ur refund		
18. Line 7 minus line 8 but not less than zero	18	\$	00
19. Line 10 minus line 9, but not less than zero	\$	00	
<b>20.</b> Refund claimed with this return, sum of lines 18 and 19	• 20	\$	00
21. Overpayment credited to next year's estimated tax (Do not include this amount on line 20)	\$	00	
Direct Deposit Account Number Reason for Amendment	Type:	Checking Savings	
Last Name of parson proparing return	First Name		Middle Initial
Last Name of person preparing return	I list Name		Ivildule IIIItial
Address of person preparing return	Phone Nu	mber	
City		State	ZIP
Under penalty of perjury in the second degree, I declare that I knowledge and belief, it is true, correct and complete.	have examined this re	eturn and to the best of	f my
Signature of Individual Taxpayer	Date (MM/DD/YY)		
Spouse's Signature	Date (MM/DD/YY)		
Signature of Corporate Officer	Date (MM/DD/YY)		
Mail to and make checks payable to: Colorado D	epartment of Revenu	e, Denver, CO 80261-0	0006