



230104EZ19999

DR 0104EZ (06/02/23)  
COLORADO DEPARTMENT OF REVENUE  
Tax.Colorado.gov  
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## 2023 Colorado Simplified Individual Income Tax Return

- You may use this form if:
- You are a full-year Colorado resident, **and**
  - You do not have any Colorado additions, subtractions, or credits.

Your Last Name				Your First Name				Middle Initial	
Date of Birth (MM/DD/YYYY)				SSN or ITIN					
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					
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		
City							State	ZIP Code	
<p>To see if you or members of your household qualify for free or reduced-cost health coverage, check this box if:</p> <ul style="list-style-type: none"> <li>• You are a Colorado resident and at least one person in your household does not have health coverage</li> </ul> <p><input type="checkbox"/> <b>AND</b></p> <ul style="list-style-type: none"> <li>• 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 &amp; Financing. You must submit the DR 0104EE with your return.</li> </ul>									



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Name SSN or ITIN

Round To The Nearest Dollar

- 1. Federal Taxable Income from your federal income tax form: 1040, 1040 SR, or 1040 SP line 15.
2. Colorado Tax from tax table.
3. CO Income Tax Withheld from W-2s and 1099s, you must submit the W-2s and/or 1099s claiming Colorado withholding with your return.

Modified AGI for TABOR

Lines 4 through 6 are only used to calculate your TABOR Credit, they do not affect your Colorado tax liability.

- 4. Federal Adjusted Gross Income from your federal income tax form: 1040 line 11, 1040 SR line 11, or 1040 SP line 11
5. Nontaxable Social Security Income
6. Sum of lines 4 and 5: Modified AGI for TABOR

Modified AGI Tiers for State Sales Tax Refund

Table with 7 columns: If line 6 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. Rows for Single Filers Enter and Joint Filers Enter.

- 7. State Sales Tax Refund: For full-year Colorado residents, born before 2005, or full-year Colorado residents who are under the age of eighteen but are required to file a return. Use the amount on line 6 and reference the table above. See instructions if you are filing an extension.
8. Sum of lines 3 and 7

If you have an overpayment on line 9 below and would like to donate all or a portion of your overpayment to a qualified Colorado charity, include Form DR 0104CH to contribute.

- 9. Refund, if line 8 is greater than line 2, subtract line 2 from line 8

Direct Deposit Routing Number, Account Number, Type: Checking, Savings, CollegenInvest 529

For questions regarding CollegenInvest direct deposit or to open an account, visit CollegenInvest.org or call 800-448-2424.

- 10. Net Tax Due, if line 8 is less than line 2, subtract line 8 from line 2. Please pay this amount when you file. If applicable, the Department will issue a bill for delinquent payment penalty and interest.



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Name		SSN or ITIN	
<b>Third Party Designee</b>			
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 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	
Paid Preparer's Address		City	State    ZIP Code

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(06/02/23)

File and pay at: [Colorado.gov/RevenueOnline](https://colorado.gov/revenueonline)

<p>If you are filing this return <b>with</b> a check or payment, please mail the return to:</p> <p>COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-0006</p>	<p>If you are filing this return <b>without</b> a check or payment, please mail the return to:</p> <p>COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-0005</p>
<p>These addresses and ZIP codes are exclusive to the Colorado Department of Revenue, so a street address is not required.</p>	