

# Electronic Filing Instructions for your 2021 Federal Tax Return

Important: Your taxes are not finished until all required steps are completed.



Harry S Mills  
601 24th Ave  
Lewiston, ID 83501-3829

<b>Balance Due/Refund</b>	You've chosen to pay for your federal balance due of \$258.00 by credit card. Double-check your credit card statement to make sure your payment was received by the IRS. This will help you avoid any possible interest and/or penalties. And since you paid by credit card, you don't need to mail a payment to the Internal Revenue Service.		
<b>What You Need to Keep</b>	Your Electronic Filing Instructions (this form) A copy of your federal return		
<b>2021 Federal Tax Return Summary</b>	Adjusted Gross Income	\$	78,801.00
	Taxable Income	\$	66,251.00
	Total Tax	\$	10,329.00
	Total Payments/Credits	\$	10,071.00
	Payment Due	\$	258.00
	Effective Tax Rate		13.11%



Hi Harry,

We just want to thank you for using TurboTax this year! It's our goal to make your taxes easy and accurate, year after year.

With TurboTax Premier:

Your Head Start On Next Year:

When you come back next year, taxes will be so easy! All your information will be saved and ready to transfer in to your new return. We'll ask you questions about what changed since we last talked, and we'll be ready to get you the credits and deductions you deserve, no matter what life throws at you.

Here's the final wrap up for your 2021 taxes:

Your federal balance due is:                   \$ 258.00

Your Guarantee of Accuracy:

Breathe easy. The calculations on your return are backed with our 100% Accuracy Guarantee.

- We double checked your return for errors along the way.
- We helped with step-by-step guidance to get your answers on the right IRS forms.
- If you sold investments, our Cost Basis Lookup calculated cost basis for those sales.
- We helped you out with extra guidance for rental property income, expenses, and refinancing.
- We made sure you didn't miss a deduction even if something in your life changed, like a new job, new house - or more kids!

Also included:

- We provide the Audit Support Center free of charge, in the unlikely event you get audited.

Many happy returns from TurboTax.

Filing Status [X] Single [ ] Married filing jointly [ ] Married filing separately (MFS) [ ] Head of household (HOH) [ ] Qualifying widow(er) (QW)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent

Your first name and middle initial: Harry S
Last name: Mills
Your social security number: 205-56-6228
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.
601 24th Ave
Apt. no.
City, town, or post office. If you have a foreign address, also complete spaces below.
Lewiston
State ID
ZIP code 835013829
Foreign country name
Foreign province/state/county
Foreign postal code
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.
[ ] You [ ] Spouse

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? [ ] Yes [X] 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, 1957 [ ] Are blind Spouse: [ ] Was born before January 2, 1957 [ ] Is blind

Table with 5 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) if qualifies for (Child tax credit, Credit for other dependents). Includes instructions for dependents.

Main tax calculation table with 15 rows. Includes sections for Attach Sch. B if required, Standard Deduction for (with bullet points for filing status), and Taxable income calculation. Total taxable income: 66,251.

<b>16</b>	<b>Tax</b> (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	<b>16</b>	10,329.																				
<b>17</b>	Amount from Schedule 2, line 3	<b>17</b>																					
<b>18</b>	Add lines 16 and 17	<b>18</b>	10,329.																				
<b>19</b>	Nonrefundable child tax credit or credit for other dependents from Schedule 8812	<b>19</b>																					
<b>20</b>	Amount from Schedule 3, line 8	<b>20</b>																					
<b>21</b>	Add lines 19 and 20	<b>21</b>																					
<b>22</b>	Subtract line 21 from line 18. If zero or less, enter -0-	<b>22</b>	10,329.																				
<b>23</b>	Other taxes, including self-employment tax, from Schedule 2, line 21	<b>23</b>	0.																				
<b>24</b>	Add lines 22 and 23. This is your <b>total tax</b>	<b>24</b>	10,329.																				
<b>25</b>	Federal income tax withheld from:																						
<b>a</b>	Form(s) W-2	<b>25a</b>	9,735.																				
<b>b</b>	Form(s) 1099	<b>25b</b>																					
<b>c</b>	Other forms (see instructions)	<b>25c</b>																					
<b>d</b>	Add lines 25a through 25c	<b>25d</b>	9,735.																				
<b>26</b>	2021 estimated tax payments and amount applied from 2020 return	<b>26</b>																					
<b>27a</b>	Earned income credit (EIC) <span style="float:right">No</span>	<b>27a</b>																					
	Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instructions <input type="checkbox"/>																						
<b>b</b>	Nontaxable combat pay election	<b>27b</b>																					
<b>c</b>	Prior year (2019) earned income	<b>27c</b>																					
<b>28</b>	Refundable child tax credit or additional child tax credit from Schedule 8812	<b>28</b>																					
<b>29</b>	American opportunity credit from Form 8863, line 8	<b>29</b>																					
<b>30</b>	Recovery rebate credit. See instructions	<b>30</b>	336.																				
<b>31</b>	Amount from Schedule 3, line 15	<b>31</b>																					
<b>32</b>	Add lines 27a and 28 through 31. These are your <b>total other payments and refundable credits</b>	<b>32</b>	336.																				
<b>33</b>	Add lines 25d, 26, and 32. These are your <b>total payments</b>	<b>33</b>	10,071.																				
<b>Refund</b>	<b>34</b> If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	<b>34</b>																					
	<b>35a</b> Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input type="checkbox"/>	<b>35a</b>																					
Direct deposit? See instructions.	<b>b</b> Routing number <table border="1"><tr><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td></tr></table> <b>c</b> Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	X	X	X	X	X	X	X	X	X	X												
X	X	X	X	X	X	X	X	X	X														
	<b>d</b> Account number <table border="1"><tr><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td></tr></table>	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X		
X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X				
	<b>36</b> Amount of line 34 you want <b>applied to your 2022 estimated tax</b>	<b>36</b>																					
<b>Amount You Owe</b>	<b>37</b> <b>Amount you owe</b> . Subtract line 33 from line 24. For details on how to pay, see instructions	<b>37</b>	258.																				
	<b>38</b> Estimated tax penalty (see instructions)	<b>38</b>																					

If you have a qualifying child, attach Sch. EIC.

**Third Party Designee** Do you want to allow another person to discuss this return with the IRS? See instructions  **Yes**. Complete below.  **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.)										
<i>[Signature]</i>		Educator	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										
Spouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)										
			<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>										

Phone no. (970) 290-0550 Email address \_\_\_\_\_

**Paid Preparer Use Only**

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

# Electronic Filing Instructions for your 2021 Colorado Tax Return

Important: Your taxes are not finished until all required steps are completed.



Harry S Mills  
601 24th Ave  
Lewiston, ID 83501-3829

<b>Balance Due/Refund</b>	Your Colorado state tax return (Form 104) shows a refund due to you in the amount of \$449.00. Your tax refund will be direct deposited into your account. The account information you entered - Account Number: 0850438789 Routing Transit Number: 102000076.												
<b>Where's My Refund?</b>	Before you call the Colorado Department of Revenue with questions about your refund, give them 21 days processing time from the date your return is accepted. If then you have not received your refund, or the amount is not what you expected, contact the Colorado Department of Revenue directly at 1-303-238-7378. From outside of Colorado use 1-303-238-3278. You can also visit the Colorado Department of Revenue web site at <a href="http://www.colorado.gov/revenueonline">www.colorado.gov/revenueonline</a> .												
<b>What You Need to Sign</b>	Sign and date Form DR 8453 within 1 day of acceptance.												
<b>Do Not Mail</b>	Do not mail a paper copy of your tax return. Since you filed electronically, the Colorado Department of Revenue already has your return.												
<b>What You Need to Keep</b>	Your Electronic Filing Instructions (this form) - Form DR 8453 A copy of your state and federal returns All W-2's, W-2G's and 1099's that report Colorado withholding												
<b>2021 Colorado Tax Return Summary</b>	<table><tr><td>Taxable Income</td><td>\$</td><td>66,251.00</td></tr><tr><td>Total Tax</td><td>\$</td><td>2,981.00</td></tr><tr><td>Total Payments/Credits</td><td>\$</td><td>3,381.00</td></tr><tr><td>Amount to be Refunded</td><td>\$</td><td>449.00</td></tr></table>	Taxable Income	\$	66,251.00	Total Tax	\$	2,981.00	Total Payments/Credits	\$	3,381.00	Amount to be Refunded	\$	449.00
Taxable Income	\$	66,251.00											
Total Tax	\$	2,981.00											
Total Payments/Credits	\$	3,381.00											
Amount to be Refunded	\$	449.00											



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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.

Form with fields for Taxpayer SSN or ITIN, Spouse SSN or ITIN, Submission ID, Taxpayer Last Name, Taxpayer First Name, Middle Initial, Spouse Last Name, Spouse First Name, Street Address, Phone Number, City, State, ZIP, and ID.

Part I — Tax Return Information

Table with 6 rows showing tax return information: Total Income, Taxable Income, Colorado Tax, Colorado Tax Withheld, Refund, and Amount You Owe.

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 2021 Federal/Colorado income tax returns...

Signature and Date fields for Taxpayer and Spouse's Signature (If Joint Return, Both Must Sign).

Part III — Declaration of ERO/Preparer/Transmitter

If the transmitter did not prepare the tax return, check here [X]

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 2021 Federal/Colorado income tax returns. If I am the preparer, under penalties of perjury I declare that I have reviewed the above taxpayer's 2021 Federal/Colorado income tax returns...

ERO's Signature and Preparer Identification Number or Your SSN fields.

Check if also Preparer [ ]

Date (MM/DD/YY)



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DR 0104 (12/07/21)  
COLORADO DEPARTMENT OF REVENUE  
Tax.Colorado.gov  
Page 1 of 4  
(0013)

### 2021 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
MILLS		HARRY		S
Date of Birth (MM/DD/YYYY)	SSN or ITIN	Deceased <input type="checkbox"/>		
05/16/1962	205-56-6228	<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 current driver license or state identification card.		State of Issue	Last 4 characters of ID number	Date of Issuance
		CO	0712	11/10/20
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"/>		
		<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	
601 24TH AVE			(970) 290-0550	
City	State	ZIP Code	Foreign Country (if applicable)	
LEWISTON	ID	83501-3829		
<input checked="" type="checkbox"/>	To see if you or members of your household qualify for free or reduced-cost health coverage, check this box if: <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 <b>AND</b></li> <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.</li> </ul>			
<b>Round To The Nearest Dollar</b>				
1. Enter Federal Taxable Income from your federal income tax form: 1040, 1040 SR, or 1040 SP line 15.			• 1	66251 00
Include W-2s and 1099s with CO withholding.				
<b>Additions to Federal Taxable Income</b>				
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	00
3. Qualified Business Income Deduction Addback (see instructions)			• 3	00



210104 21555

Name	SSN or ITIN
HARRY S MILLS	205-56-6228
<b>4. Other Additions, explain (see instructions)</b>	<b>• 4</b>
Explain:	
<b>5. Subtotal, sum of lines 1 through 4</b>	<b>5</b> 66251 00
<b>Colorado Subtractions</b>	
<b>6. Subtractions from the DR 0104AD Schedule, line 20, you must submit the DR 0104AD schedule with your return.</b>	<b>• 6</b> 0 00
<b>7. Colorado Taxable Income, subtract line 6 from line 5</b>	<b>• 7</b> 66251 00
<b>Tax, Prepayments and Credits: see 104 Book for full-year tax table and part-year DR 0104PN Schedule</b>	
<b>8. Colorado Tax from tax table or the DR 0104PN line 36, you must submit the DR 0104PN with your return if applicable.</b>	<b>• 8</b> 2981 00
<b>9. Alternative Minimum Tax from the DR 0104AMT line 8, you must submit the DR 0104AMT with your return.</b>	<b>• 9</b> 00
<b>10. Recapture of prior year credits</b>	<b>• 10</b> 00
<b>11. Subtotal, sum of lines 8 through 10</b>	<b>11</b> 2981 00
<b>12. Nonrefundable Credits from the DR 0104CR line 43, the sum of lines 12, 13, and 14 cannot exceed line 11, you must submit the DR 0104CR with your return.</b>	<b>• 12</b> 00
<b>13. Total Nonrefundable Enterprise Zone credits used – as calculated, or from the DR 1366 line 84, the sum of lines 12, 13, and 14 cannot exceed line 11, you must submit the DR 1366 with your return.</b>	<b>• 13</b> 00
<b>14. Strategic Capital Tax Credit from DR 1330, the sum of lines 12, 13, and 14 cannot exceed line 11, you must submit the DR 1330 with your return.</b>	<b>• 14</b> 00
<b>15. Net Income Tax, sum of lines 12, 13, and 14. Subtract that sum from line 11.</b>	<b>15</b> 2981 00
<b>16. Use Tax reported on the DR 0104US schedule line 7, you must submit the DR 0104US with your return.</b>	<b>• 16</b> 00
<b>17. Net Colorado Tax, sum of lines 15 and 16</b>	<b>17</b> 2981 00
<b>18. CO Income Tax Withheld from W-2s and 1099s, you must submit the W-2s and/or 1099s claiming Colorado withholding with your return.</b>	<b>• 18</b> 3381 00
<b>19. Prior-year Estimated Tax Carryforward</b>	<b>• 19</b> 00
<b>20. Estimated Tax Payments, enter the sum of the quarterly payments remitted for this tax year</b>	<b>• 20</b> 00
<b>21. Extension Payment remitted with the DR 0158-I</b>	<b>• 21</b> 00
<b>22. Other Prepayments:</b> <input type="checkbox"/> • DR 0104BEP <input type="checkbox"/> • DR 0108 <input type="checkbox"/> • DR 1079 <b>• 22</b>	00
<b>23. Gross Conservation Easement Credit from the DR 1305G line 33, you must submit the DR 1305G with your return.</b>	<b>• 23</b> 00
<b>24. Innovative Motor Vehicle Credit from the DR 0617, you must submit each DR 0617 with your return.</b>	<b>• 24</b> 0 00



210104 31555

Name: HARRY S MILLS
SSN or ITIN: 205-56-6228

25. Refundable Credits from the DR 0104CR line 9, you must submit the DR 0104CR with your return. 25 00
26. Subtotal, sum of lines 18 through 25 26 3381 00

Modified AGI for TABOR

Lines 28 through 30 are only used to calculate your TABOR Credit, they do not affect your Colorado tax liability.

27. Federal Adjusted Gross Income from your federal income tax form: 1040 line 11, 1040 SR line 11, or 1040 SP line 11 27 78801 00
28. Nontaxable Social Security Income 28 00
29. Nontaxable Lump-sum Distribution from pension and profit sharing plans. 29 00
30. Nontaxable interest income from state and local bonds 30 00
31. Sum of lines 27 through 30: Modified AGI for TABOR 31 78801 00

Modified AGI Tiers for State Sales Tax Refund

Table with 7 columns: If line 31 is: \$44,000 or less, \$44,001 - \$88,000, \$88,001 - \$139,000, \$139,001 - \$193,000, \$193,001 - \$246,000, \$246,001 - or more. Rows: Single Filers Enter, Joint Filers Enter.

32. State Sales Tax Refund: For full-year Colorado residents, born before 2003, or full-year Colorado residents who are under the age of eighteen but are required to file a return. Use the amount on line 31 and reference the table above. See instructions if you are filing an extension. 32 49 00
33. Sum of lines 26 and 32 33 3430 00
34. Overpayment, if line 33 is greater than line 17 then subtract line 17 from line 33 34 449 00
35. Estimated Tax Credit Carryforward to 2022 first quarter, if any. 35 00

If you have an overpayment on line 36 below and would like to donate all or a portion of your overpayment to a qualified Colorado charity, include Form DR 0104CH to contribute.

36. Refund, subtract line 35 from line 34 (see instructions) 36 449 00

Direct Deposit

Routing Number: 102000076 Type: [X] Checking [ ] Savings [ ] CollegeInvest 529
Account Number: 0850438789

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



210104 41555

Name: HARRY S MILLS
SSN or ITIN: 205-56-6228

Table with 3 columns: Description, Amount, and Balance. Rows include Net Tax Due, Delinquent Payment Penalty, Delinquent Payment Interest, Estimated Tax Penalty, and Amount You Owe.

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.

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.

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, Spouse's Signature, Date, Paid Preparer's Name, Phone, Address, City, State, ZIP Code

File and pay at: Colorado.gov/RevenueOnline

Instructions for filing and payment: 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.



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DR 0104EE (06/03/21)  
COLORADO DEPARTMENT OF REVENUE  
Tax.Colorado.gov  
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## Colorado Easy Enrollment Information Form

Colorado taxpayers can now share certain information from their tax return with the Colorado Health Benefit Exchange (Connect for Health Colorado) and the Colorado Department of Health Care Policy & Financing to find out if they qualify for free or reduced-cost health coverage (Colorado Law: 39-21-113(25) C.R.S).

By submitting this form (DR 0104EE) and checking the corresponding checkbox with my income tax return (form DR 0104), I give permission for the Colorado Department of Revenue to share the information included on this form with the Colorado Health Benefit Exchange (Connect for Health Colorado) and the Department of Health Care Policy & Financing

Note: If you agree to share this information, please complete (or verify) this form to the best of your ability and include it with your tax return. If filing by paper, ensure that it is mailed with your return. If filing electronically through your tax preparer or a using a software program, this form may be completed using the software. If you do not agree to share this information, please do not complete this form and do not include it with your return.

### Section A: Household Contact Information

● Last Name		● First Name		● Middle Initial	
MILLS		HARRY		S	
● Phone Number		● Email Address			
(970) 290-0550		HARRYZAIMS@GMAIL.COM			
● Mailing Address (Line 1)					
601 24TH AVE					
● Mailing Address (Line 2)					
● City			● State	● ZIP Code	
LEWISTON			ID	83501-3829	



210104EE21555



**Section B: Household Member and Income Information**

Complete this section with information for all members of your tax household. For purposes of obtaining health coverage, your tax household typically consists of yourself, your spouse, and any person that you claim as a tax dependent on your federal income tax return. For more information about who may be claimed as a tax dependent on your federal income tax return and would be considered a part of you tax household, review IRS Publication 501.

1. Enter your tax household size here. Include yourself, your spouse, and all individuals that you claim as a dependent on your federal income tax return (i.e. a household with spouses filing jointly and one tax dependent child = household size of 3; enter "3" in this field). ● 1	1
2. Enter your adjusted gross income from line 11 on your federal form 1040, 1040-SR, 1040(SP), or 1040-NR. ● 2	78801 00
3. Enter information about <b>yourself</b> , your spouse, and all individuals that you claim as a dependent on your federal income tax return in the table below.	

● Last Name	● First Name	● Middle Initial	● Date of Birth	● SSN or ITIN (optional)
MILLS	HARRY	S	05/16/1962	205-56-6228

