



DR 0104CN (11/09/22)
COLORADO DEPARTMENT OF REVENUE
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2022 Colorado Child Tax Credit

Last Name	First Name	Midd	lle Initial	SSN or ITIN	
a	a			490-54	-9999
Section A: Eligible Child Information		•		•	
Eligible Child's Last Name	Eligible Child's First Name	Year of Birth	SSN or I	TIN	Deceased
a •	a ●	2017	490-	-54-8888	•
•	•	•	•		•
•	•	•	•		•
•	•	•	•		•
Section B: All Filers Complete This Sect	ion				
1. Enter your federal adjusted gross incom 1040, 1040 NR, 1040 SR, or 1040 SP,	line 11	•	1		0,000
If the amount on line 1 is greater than \$7 the Colorado child tax credit.	75,000 (\$85,000 for joint filers),	do not complete this	s form. Y	ou are not e	ligible for
2. Enter the number of eligible children list	ted in the table in Section A of thi	s form •	2		1
3. Multiply line 2 by \$2,000			3	2	2,000 00
4. Enter your federal tax amount from you 1040 SR, or 1040 SP, line 18	r federal income tax return: 1040		4		61 00

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Last Name		First Name			Middle	Initial	SSN or ITIN		
a		a					490-54-	-9999	
5. Enter the	e following amounts (if applicable) from your fede	ral income tax	return:	:			1		
	a. Schedule 3, line 1		•		0.0				
				6	1				
	b. Schedule 3, line 2		•	C	00				
	c. Schedule 3, line 3		•		0.0				
	d. Schedule 3, line 4		•		0.0				
	e. Schedule 3, line 6L		•		0.0				
	£ 5 0040 line 45		_						
	f. Form 8910, line 15		•		0.0				
	g. Form 8936, line 23				0.0				
	y. Form 6930, line 23		•		00				
	h. Schedule R, line 22				00				
	n. Genedale IX, iiile 22				00				П
Total, su	m of lines 5a through 5h				5			61	00
1 2 3 3 1 7 3 1									
6. Subtract	line 5 from line 4				6				00
7. Enter the	e smaller of the amount on line 6 and the amount	on line 3			• 7				00
If the amou	nt on line 6 is more than the amount on I	ine 3, contir	nue to	Section E of this form.	If the a	amount	on line 3 is		
more than t	he amount on line 6, complete Section C	of this form	to de	etermine if you are eligi	ble for	any ad	ditional child		
tax credit.									
Section C:	Additional Child Tax Credit								
							2	,000	
8. Subtract	line 7 from line 3 in Section B of this form				8			,	00
					_		1	,500	
9. Multiply	the amount on line 2 in Section B of this form by	\$1,500			9			-	00
40 5-4	a constitution of the constitution line O and the constitution	- li 0			a 40		1	,500	00
10. Enter the	e smaller of the amount on line 8 or the amount of	n line 9			● 10				00
44 Formadi	ncome (see instructions)				• 11		20	,000	00
II. Earneur	ricome (see instructions)				• 11				00
12 Is the an	nount on line 11 more than \$2,500?								
12. 13 (1) 0 (1)	iount of fine 11 more than \$2,000:								
• X Y	es: Subtract \$2,500 from the	• No:	Leave	this line blank and					
	mount on line 11 and enter the			ero) on line 13					
re	esult on this line 12		`	,	• 12		17	,500	00
							•	605	
13. Multiply l	ine 12 by 15% (0.15)				13		2	,625	00
Section D:	Certain Filers Who Have Three or Mor	e Eligible C	hildr	en					
14. Social se	ecurity and Medicare taxes (see instructions)				• 14				00
15. Other tax	xes (see instructions)				• 15				00
16. Sum of I	ines 14 and 15				16				00

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	t Name		First N	ame	Middle Initial SSN or ITIN					
Las	n maine		FIISUN	aille	Middle Ir			JOIN OF FEITH		
a			a					490-54-999	9	
17.	a. Earne	ed income credit (see instructions)		•		0	0			
	_									
	b. Exces	ss social security and RRTA (see instruction	ons)	•		[0	0			
	0	Page 47a thorough 47b				- 41	_			
	Sum of	lines 17a through 17b				● 17	<u> </u>		00	
18	Subtract	t line 17 from line 16. If the result is zero or	·less enter 0 (zero)		18	3		00	
	Cubirdo	time in home me in the resear is 2010 or	1000, ornor o (20.0)						
19.	Enter th	e larger of line 13 or line 18				• 19	9		00	
Ent	er the s	maller of the amount on line 19 or th	ne amount oi	n line 10 i	n Section C	of this form on lin	ne 21 in	Section E of		
this	form									
Sec	ction E:	Colorado Child Tax Credit								
		e amount on line 7 in Section B of this form				● 20)		0.0	
21.		e result from Sections C and D (enter 0 (ze	ero) if you skipp	ed Section	C as			1,500)	
	instructe	ed after line 7)				● 2	1		00	
22	Cum of	lines 20 and 24				24		1,500		
22.	Sum or	lines 20 and 21	Applicable	Dorcont	age Table	2:	2		00	
								T		
	If filing signle and line 1 in Section B is: \$25,000 or less \$2				\$25,001 to \$5	0,000	0 \$50,001 to \$75,000			
If filing signle and line 1 in Section E			ion B is:	is: \$35,000 or less \$35,001 to \$60			0,000 \$60,001 to \$85,000			
	<u> </u>									
		Applicat	ole % is:	60%	(0.60)	30% (0.30)		10% (0.10)		
23	Enter th	e applicable % from the table above				• 2:		60000) %	
		line 22 by the percentage on line 23. This is	s vour Colorad	o child tax	credit.	₹ 2.	•		/0	
		is amount on line 1 of DR 0104CR if you a	-					900		
		s, continue to line 25.	, oa. 10	u	. ,	24	4	300	00	
25.		ar residents only, enter the percentage from	line 34 of DR	0104PN. If						
	percentage is more than 100%, enter 100%					5 0.0	00000	%		
26.	Part-yea	ar residents only, multiply line 24 by the per	centage on line	25. Enter	this					