

Schedule CT-1040AW

Part-Year Resident Income Allocation

2014

Part-year residents must complete this schedule before completing Schedule CT-SI and attach it to Form CT-1040NR/PY. Complete in blue or black ink only.

Your first name and middle initial	Last name	Your Social Security Number ____ : ____ : ____
If joint return, spouse's first name and middle initial	Last name	Spouse's Social Security Number ____ : ____ : ____

Part 1 – Adjusted Gross Income		Federal Income as Modified See instructions.	Connecticut Resident Period	Connecticut Nonresident Period	
		Column A Income from federal return	Column B Income from Column A for this period	Column C Income from Column A for this period	Column D Income from Column C from Connecticut sources
1. Wages, salaries, tips, etc.	1				
2. Taxable interest.....	2				
3. Ordinary dividends.....	3				
4. Alimony received	4				
5. Business income or (loss).....	5				
6. Capital gain or (loss).....	6				
7. Other gains or (losses)	7				
8. Taxable amount of IRA distributions	8				
9. Taxable amount of pensions and annuities.....	9				
10. Rental real estate, royalties, partnerships, S corporations, trusts, etc.	10				
11. Farm income or (loss).....	11				
12. Unemployment compensation	12				
13. Taxable amount of social security benefits	13				
14. Other income: See instructions.	14				
15. Add Lines 1 through 14.	15	00	00	00	00

Part 2 – Adjustments to Income							
16. Educator expenses	16						
17. Certain business expenses of reservists, performing artists, and fee-basis government officials.....	17						
18. Health savings account deduction.....	18						
19. Moving expenses.....	19						
20. Deductible part of self-employment tax	20						
21. Self-employed SEP, SIMPLE, and qualified plans..	21						
22. Self-employed health insurance deduction.....	22						
23. Penalty on early withdrawal of savings.....	23						
24. Alimony paid	24						
25. IRA deduction	25						
26. Student loan interest deduction	26						
27. Tuition and fees	27						
28. <i>Reserved for future use</i>	28						
29. Total adjustments: Add Lines 16 through 27.	29						
30. Subtract Line 29 from Line 15.	30	00	00	00	00		

Line 30, Column A, must equal the amount on Form CT-1040NR/PY, Line 5.
Add Columns B and D for each line and enter the totals on Lines 1 through 30 on Schedule CT-SI.

Part 3 – Part-Year Resident Information

Moved Into Connecticut

1. Date **you** moved into Connecticut ____ / ____ / ____ and state of **prior** residence: _____
2. Date **your spouse** moved into Connecticut ____ / ____ / ____ and state of **prior** residence: _____

Moved Out of Connecticut

1. Date **you** moved out of Connecticut ____ / ____ / ____ and state of **new** residence: _____
2. Date **your spouse** moved out of Connecticut ____ / ____ / ____ and state of **new** residence: _____

Income From Connecticut Sources During Nonresident Period

1. Did **you** receive income from Connecticut sources during your nonresident period? ☐ Yes ☐ No
2. Did **your spouse** receive income from Connecticut sources during his or her nonresident period? ☐ Yes ☐ No