	Connecticut Nonresident and Resident Income Tax Return	i Part-Year	Use Only	- 20	CT-1040NR/PY				
	Complete return in blue or bla	ack ink only.	Taxpayers must sign declaration on reverse side.						
he	year January 1 - December 31, 2014, or	other taxable year beginning	:	, 2014 and ending:	,,				
l	Filing Status - Check only one box.	Married filing separately			Qualifying widow(er)				
	Single Married filing jointly	•		Head of household	with dependent child				
		Enter spouse's name here							
-	Your Social Security Number	Check if deceased	e's Social Security N	Check decea					
נו	Your first name		ne (If two last name	es, insert a space between names.)					
5	If joint return, spouse's first name	MI Last nan	ne (If two last name	s, insert a space between names.)) Suffix (Jr./S				
Ly C	Mailing address (number and street, apartmen	t number, suite number, PO Box)						
audiess, and city of town mere.					2014 Resident status				
o, al					Nonresident				
κή Π	City, town, or post office (If town is two words,	leave a space between the word	s.) State ZII	P code	Part-year resident				
aud	Enter city or town of residence if different from	above	ZIP code						
ck	if you filed Form CT-2210	ck here if you are filing Form	n CT-8379:	Check here if you are filing	Form CT-1040CRC:				
		ch to the front of the return.		Attach to the back of the re	eturn.				
	1. Federal adjusted gross income		, Line 37;	Whole	Dollars Only				
	Form 1040A, Line 21; or Form	1040EZ, Line 4		1,					
	2. Additions to federal adjusted gr	oss income from Schedu	ule 1, Line 41	2,					
	3. Add Line 1 and Line 2.			3.					
	4. Subtractions from federal adjus	ted gross income from S	Schedule 1, Lin	ne 52 4.					
	5. Connecticut adjusted gross in	ncome: Subtract Line 4	from Line 3.	5.					
	 Income from Connecticut source 			e 🗆 🗆 🗆					
				0					
0	 7. Enter the greater of Line 5 or I 8. Income tax on the amount on Lin 								
0	See instructions, Page 16.			8	. 0				
103	9. Divide Line 6 by Line 5. If Line 6	is equal to or greater that	an Line 5, ente	er 1.0000. 9.					
ō	10.Multiply Line 9 by Line 8.			10.					
	11. Credit for income taxes paid to	qualifying iurisdictions d	urina resident i	لحصار لحصا لحمي	· I				
	of taxable year — part-year res								
	12.Subtract Line 11 from Line 10. I	f Line 11 is greater than	Line 10, enter	"0." 12.	0				
DO 1101 SEITA W-2 01 1033 1011113.	13.Connecticut alternative minimur	13.							
	14.Add Line 12 and Line 13.			14.					
			l line 11						
	15. Total allowable credits from Sch			15.	. 0				
	16. Connecticut income tax: Subtra	ct Line 15 from Line 14. If	less than zero,	enter "0." 16.					
	17.Individual use tax from Schedul	e 3, Line 62: If no tax is	due, enter "0."	17.	. 0				
	18.Add Line 16 and Line 17.			18.	0				

For a faster refund, file your return electronically at www.ct.gov/DRS/TSC and choose direct deposit.

		4	2014 F	orm [:]	CT-10)40NR	:/PY - P	age 2	2 of 4			Ye Securit	our Soo y Numl]-[-		
19. En	ter am	ount fr	om Li	ne 18									19.					1			00
-	Emp	loyer's	federal	Colum ID No.	nn A . from l		of W-2 or K-1 or 10		Connectic	lumn B ut wages etc.	, tips,	Schedu CT K-1	le			ticut i		e tax v	withheld ule CT K		
and 1099 rmation	20a.		7-Г					7	•		. 00	•	20a.								0
enter mation	20b.		1-F						•		. 00	•	20b.							٦.	0
your Schedule	20c.		ī-r					1	•		. 00	•	20c.							1	0
K-1, and forms if	20d.		1-F					1	•		. 00	•	20d.					1		٦.	0
necticut me tax withheld.	20e.		1-F						•		. 00	•	20e.							٦.	0
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Savin d. Will t	0	nd ao	numb		CCOUR		de the l	152	Yes	numbe	r 🛄										
		-							ect deposit		card, a r	efund ch	neck wil	l be iss	sued	land	oroces	sing n	nay be (delay	/ed
28. Ta	due:	lf Line	9 19 is	more	than	Line 2	23, subt	tract L	ine 23 fro	om Line	19.				,],[0
. If late	e: Ente	pena	alty. M	ultiply	Line	28 by	10% (.	10).					29.		,],			0
a mo	nth late	e, ther	n by 1י	% (.0	1).	•			nonths or t				30.		,],			0
. Intere Page		nderpa	aymen	it of es	stimate	ed tax	from Fo	orm C	T-2210: S	See instr	uctions	,	31.								0
. Total	amou	nt du	e: Add	d Line	s 28 t	hroug	h 31.						32.		,			,			0
and, to false re	the best turn or c	of my locume	knowle ent to D	edge an DRS is a	d belie a fine o	ef, it is t of not m	rue, com	plete, a \$5,000	eturn (inclue and correct.), or imprise all informat	I underst	and the r not mo	penalty for than the second	for willfo five yea	ully del rs, or b	liveri both.	ng a The					
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	2014 Form CT-1040NR/PY - Page 3 of 4 You Security	ur Soc Numb] - 🗌	- [
See	hedule 1 - Modifications to Federal Adjusted Gross Income Instructions, Page 20.	33.	Enter a	ll items	as posit	ive numt		00
	Interest on state and local government obligations other than Connecticut Mutual fund exempt-interest dividends from non-Connecticut state or municipal			」, ∟] Г	,			00
1	government obligations	34.		_,	, //////			////
	Reserved for future use	/???/,	/////		//////	//////	/////	////
	adjusted gross income	36.		_,	,		<u> </u>	00
37.	Beneficiary's share of Connecticut fiduciary adjustment: Enter only if greater than zero.	37.			,		<u> </u>	00
38.	Loss on sale of Connecticut state and local government bonds	38.		7	,		 .	00
39.	Domestic production activity deduction from federal form 1040, Line 35	39.					Π.	00
40.	Other - specify •	40.					Π.	00
41.	Total additions: Add Lines 33 through 40. Enter here and on Line 2.	41.					\square	00
42.	Interest on U.S. government obligations	42.					Ē.	00
43.	Exempt dividends from certain qualifying mutual funds derived from U.S. government obligations	43.					Ē.	00
44.	Social Security benefit adjustment: See Social Security Benefit Adjustment Worksheet, Page 22.	44.					ГÌ	00
45.	Refunds of state and local income taxes	45.						00
46.	Tier 1 and Tier 2 railroad retirement benefits and supplemental annuities	46.			Π.		Ē.	00
47.	50% of military retirement pay	47.					Ē.	00
48.	Beneficiary's share of Connecticut fiduciary adjustment: Enter only if less than zero.	48.],			\Box .	00
49.	Gain on sale of Connecticut state and local government bonds	49.], 🗌 [,			00
50.	Connecticut Higher Education Trust (CHET) contributions	50.		,				00
	Enter CHET account number: Do not add spaces or dashes.	r						
51.	Other - specify: Do not include out of state income. •	51.			,		 .	00
52.	Total subtractions: Add Lines 42 through 51. Enter here and on Line 4.	52.					_	00
	hedule 2 - Credit for Income Taxes Paid to Qualifying Jurisdictions a must attach a copy of your return filed with the qualifying jurisdiction(s) or your credit wi				sident	s Only	1	
53.	Connecticut adjusted gross income during the residency portion of taxable year.	53.					\Box .	00
54.	See instructions, Page 26. Column A Enter qualifying jurisdiction's name and two-letter code. See instructions, Page 26. 54.	de			Colum Name	n B	Co	de
55.	Non-Connecticut income included on Line 53 and							
	reported on a qualifying jurisdiction's income tax return: Complete <i>Schedule 2 Worksheet</i> , Page 25. 55.	00], 🗌 [,			00
56.	Divide Line 55 by Line 53. May not exceed 1.0000. 56.	,		ļЩ			,	
57.	Apportioned income tax: See instructions, Page 26. 57.	00					<u> </u>	00
58.	Multiply Line 56 by Line 57. 58,	00			,		L.	00

59.	Income tax paid to a qualifying jurisdiction
	See instructions, Page 26.

60.	Enter	the	lesser	of	Line	58	or	Line	59.	

61. Total credit: Add Line 60, all columns. Enter here and on Line 11.

59.

60.

Complete applicable schedules on Page 4 and send all four pages of the return to DRS.

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62c

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Schedule 3 - Individual Use Tax

Do you owe use tax for on-line or other purchases where you paid no sales tax? See instructions, Page 36.

Failure to report and pay use tax is subject to as much as a \$5,000 fine, imprisonment for as much as 5 years, or both.

Complete the Connecticut Individual Use Tax Worksheet on Page 37 to calculate your use tax liability.

62a. Total use tax due at 1%: From Connecticut Individual Use Tax Worksheet, Section A, Column 7. 63	2a.
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62b. Total use tax due at 6.35%: From Connecticut Individual Use Tax Worksheet, Section B, Column 7 62b.

62c. Total use tax due at 7%: From Connecticut Individual Use Tax Worksheet, Section C, Column 7

62. Individual use tax: Add Lines 62a through 62c. If no use tax is due, you must enter "0" here and on Line 17.

Schedule 4 - Contributions to Designated Charities - See more information on Page 53.

63a.	AIDS Research	63a,		. 00	
63b.	Organ Transplant	63b		. 00	
63c.	Endangered Species/Wildlife	63c,		. 00	
63d.	Breast Cancer Research	63d,		. 00	
63e.	Safety Net Services	63e,		. 00	
63f.	Military Relief	63f.		. 00	
63g.	CHET Baby Scholar	63g	,	. 00	
63.	Total contributions: Add Lines 63a through 63g, enter	er amount here and on L	ine 26a.	63	. , , , , , , 00

Complete and send all four pages of the return to DRS.

Use the correct mailing address for returns with a payment or requesting a refund.						
For all tax forms with payment: For refunds and all other tax forms without payment:						
Department of Revenue Services PO Box 2969 Hartford CT 06104-2969	Department of Revenue Services PO Box 2968 Hartford CT 06104-2968					

Make your check payable to Commissioner of Revenue Services

To ensure proper posting, write your SSN(s) (optional) and "2014 Form CT-1040NR/PY" on your check.