Department of Revenue Services State of Connecticut

Form CT-1120 Corporation Business Tax Return

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Z	U		4

(Rev. 12/14)

Enter Incom	e Y	ear Beginning ►		, 2014, and En	ding ▶		
Total assets	00	Corporation name This return MUST	be	filed electronic	cally!	Federal Emplo	oyer ID Number (FEIN)
Amount from federal Form 1120, Line 11: See <i>Schedule C</i> , Line 1b below.	00	Number and street DO NOT MAIL p	ар	er return to DF	PO Box	DRS use o	- 20
NAICS code: See instructions.		City or town		State	ZIP code	CT Tax Regist	tration Number
heck and Complete All Ap	pli	cable Boxes			\ r \ ' 4		
3. If this is a final return, has the	cor	•	_	Vithdrawn	to file and return elec		Taxpayer Service Center
4. Federal return was filed on: ▶	- [112	20-REIT ► 112		Other:	
		nt co. name ► Yes (A					
6. Was this company included in If this is the first year electing	a (or r	CT combined or unitary business to revoking combined or unitary statu	ax re ıs, at	eturn for the previous ttach Form CT-1120C	year? ▶□	Yes ►[□ No
Yes (Attach Form CT-11200		ombined or unitary business tax retuor Form CT-1120U .)	um	or this year?			
Is the principal place of busine If No , enter state where princi Date of organization	oal	located in CT? ▶☐ Yes ▶☐ place of business is located Date qualified in CT _] N	State o	f incorporations	on ın in CT	
·		CT corporation business tax? 🔲 🗅		•		•	• ,
•	rue	ialized method to calculate its esting, or incur interest expenses or into			`		,
		-1120 PIC? ► Yes (Attach Fo	rm (CT-1120 PIC.) 🗖 No)		
Attach a complet	e c	opy of Form 1120 including all s				Revenue Serv	rice.
-		Complete Schedule C after co			dules.		
·		of Amount Payable (Minimu	ım ¯	Гах \$250)		For	a faster
		Schedule B, Line 6; or \$250▶	1a		00		ore secure
	la i	s \$250 enter "0."	1b	+	00		d choose : deposit.
•		ctions.		1	00		•
		1a through Line 1c. If no tax credits				1	00
						2	00
=						3	00
		3 from Line 1				4	00
		Part II, Line 9. Do not exceed amou			_	5	00
		ine 5 from Line 1.				6 /////////	00
• •		om Form CT-1120 EXT			00		
		120 ESA, ESB, ESC, & ESD ▶			00		
		>			00 /	//////////////////////////////////////	///////////////////////////////////////
		nes 7a, 7b, and 7c			_	7	00
		stract Line 7 from Line 6				8	00
•		>	9a		00		
		>	9b	+	00		
		>	9с		00 /	/////////	///////////////////////////////////////
-		e total of Lines 9a, 9b, and Line 9c				9	00
		mated tax			00		
					00 🖔	<u>/////////////////////////////////////</u>	///////////////////////////////////////
	Оер	posit by completing Lines 10c, 10c			•	Savings 🕨 🔲	
0d. Routing number ►				e. Account number			
10f. Will this refund go to a bank acco				g. Bank name 🕨		10	
		nter the total of Line 10a and Line 10			H-	10	00
11. Balance due with this return:	Add	ມ Line ୪ anα Line 9			🕨 📗	11	00

Schedule A – Computation of Tax on Net Income		
1. Net income: Enter amount from Schedule D, Line 22. If 100% Connecticut, enter also on Line 3▶	1	00
2. Apportionment fraction: Carry to six places. See instructions.	2	0.
3. Connecticut net income: Multiply Line 1 by Line 2.	3	00
4. Operating loss carryover from Form CT-1120 ATT, Schedule H, Line 16, Column D	4	00
5. Income subject to tax: Subtract Line 4 from Line 3	5	00
6. Tax: Multiply Line 5 by 7.5% (.075).	6	00

Schedule B – Computation of Minimum Tax on Capital		
1. Minimum tax base from Schedule E, Line 6, Column C. If 100% Connecticut, enter also on Line 3. ▶	1	00
2. Apportionment fraction: Carry to six places. See instructions▶	2	0.
3. Multiply Line 1 by Line 2	3	00
4. Number of months covered by this return	4	
5. Multiply Line 3 by Line 4, divide the result by 12.	5	00
6. Tax (3 and 1/10 mills per dollar): Multiply Line 5 by .0031. Maximum tax for Schedule B is \$1,000,000 ▶	6	00

Schedule D – Computation of Net Income		
1. Federal taxable income (loss) before net operating loss and special deductions▶	1	00
2. Interest income wholly exempt from federal tax	2	00
3. Unallowable deduction for corporation tax from Schedule F, Line 8	3	00
4. Interest expenses paid to a related member from Form CT-1120AB, Part I A, Line 1	4	00
5. Intangible expenses and costs paid to a related member from Form CT-1120AB, Part I B, Line 3 ▶	5	00
6. Federal bonus depreciation: See instructions. ▶	6	00
7. Reserved for future use	7	
8. IRC §199 domestic production activities deduction from federal Form 1120, Line 25	8	00
9. Other: Attach explanation.	9	00
10. Total: Add Lines 1 through 9.	10	00
11. Dividend deduction from Form CT-1120 ATT, Schedule I, Line 5	11	00
12. Capital loss carryover (if not deducted in computing federal capital gain)	12	00
13. Capital gain from sale of preserved land	13	00
14. Federal bonus depreciation recovery from Form CT-1120 ATT, Schedule J, Line 15 ▶	14	00
15. Exceptions to interest add back from Form CT-1120AB , Part II A, Line 1	15	00
16. Exceptions to interest add back from Form CT-1120AB , Part II A, Line 2	16	00
17. Exceptions to interest add back from Form CT-1120AB , Part II A, Line 3	17	00
18. Exceptions to add back of intangible expenses paid to a related member from Form CT-1120AB, Part II B, Line 1▶	18	00
19. Deferred cancellation of debt income. See instructions.	19	00
20. Other: See instructions.	20	00
21. Total: Add Lines 11 through 20.	21	00
22. Net income: Subtract Line 21 from Line 10. Enter here and on <i>Schedule A</i> , Line 1	22	00

	Column A Beginning of Year	Column B End of Year	Column C	
1. Capital stock from federal Schedule L, Line 22a and Line 22b	00	00	(Column A plus	
Surplus and undivided profits from federal Schedule L, Lines 23, 24, and 25	00	00	Column B) Divided by 2	
3. Surplus reserves: Attach schedule	00	00	Divided by 2	
4. Total: Add Lines 1, 2, and 3. Enter average in Column C	00	00	(
Holdings of stock of private corporations: Attach schedule. Enter average in Column C.	00	00	(
6. Balance: Subtract Line 5, Column C, from Line 4, Column C. Enter here and on Schedule B, Line 1				

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Schedu	le F – Taxes		Column A		Column B	
1. Payroll		1.		00		
2. Real p	roperty	2.		00		
3. Persor	nal property	3.		00		
4. Sales a	and use	4.		00		
5. Other:	See instructions.	5.		00		
6. Conne	cticut corporation business tax deducted in the con	00				
7. Tax on or measured by income or profits imposed by other states or political subdivisions deducted in the computation of federal taxable income: Attach schedule						
	nallowable deduction for corporation business tax pun B. Enter here and on <i>Schedule D</i> , Line 3			8.	00	
Schedule	G - Additional Required Information - Attac	h a schedi	ule of corporate officers' nan	nes, t	itles, and addresses. See instructions.	
1. In whice	ch CT town(s) does the corporation own or lease	, as lessee	e, real or tangible personal pr	opert	y, or perform services?	
	I this corporation directly or indirectly transfer a c	_				
If Yes,	enter: Entity name ▶		Federal Employer	ID Nu	umber ▶	
	s there a direct or indirect transfer of a controllin					
If Yes,	enter: Transferor name ▶		Federal Employer	ID Nu	umber ▶	
	ne answer to either 2(a) or 2(b) is Yes , enter: Tra					
Date of	of transfer , and	attach a lis	st of addresses for all Conne	cticut	real property transferred.	
3. Did an	y corporation at any time during the year own a	majority of	the voting stock of this corpo	ratio	n? ► ☐ Yes ► ☐ No	
If Yes , enter: Corporation name Federal Employer ID Number						
4. Last ta	exable year this corporation was audited by the In	nternal Rev	venue Service ►			
Were a	adjustments reported to CT? ▶ ☐ Yes ▶ ☐	No (If No	, attach explanation.)			
my knowle of Revenu	on: I declare under penalty of law that I have examinedge and belief, it is true, complete, and correct. I urue Services (DRS) is a fine of not more than \$5,000 the taxpayer is based on all information of which the	nderstand the, imprisonm	ne penalty for willfully delivering nent for not more than five yea	g a fa	lse return or document to the Department	
	Corporate officer's name (print) Corporate Cor	e officer's si			Date	
<u>.</u>	Corporate officer's email address (print) ▶ DO NOT MAIL pa	ner ref	turn to DRS		Telephone number	
Sign Here	Title	er shown below about this return?				
Keep a copy		See instructions.				
of this return for Paid preparer's name (print) Date						
your records.	Paid preparer's signature				Preparer's SSN or PTIN	
Firm's name and address FEIN				Telephone number		

Schedule F - Taxes

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