

**Form CT-1120X**  
**Amended Corporation Business Tax Return**

**2014**

Enter Income Year Beginning ► \_\_\_\_\_, 2014, and Ending ► \_\_\_\_\_,

Corporation name			Connecticut Tax Registration Number	
Address	Number and street	PO Box	DRS use only — — 20	
City or town	State	ZIP code	Federal Employer ID Number (FEIN)	

**Check and Complete All Applicable Boxes** Is this return currently under Connecticut audit? ☐ Yes ☐ No

**Connecticut return being amended:** ► ☐ CT-1120 ► ☐ CT-1120U

**Reason for amended return:** (Check one)

► ☐ IRS adjustments or federal Form 1120X. Attach a copy of IRS notification or federal Form 1120X.

Enter date of final determination: \_\_\_\_\_.

► ☐ Connecticut corporation business tax credits ► ☐ Connecticut apportionment change ► ☐ Connecticut net operating loss

► ☐ Other: Specify \_\_\_\_\_

		Column A Amount as Originally Reported or Adjusted	Column B Net Change Increase or (Decrease)	Column C Correct Amount
<b>Schedule A – Computation of Tax on Net Income</b>				
1. Net income from <i>Schedule D</i> , Line 22 If 100% Connecticut, also enter on Line 3. ....	1.	00	00	00
2. Apportionment fraction: Carry to six places. See instructions. ....	2.	0.	0.	0.
3. Connecticut net income: Multiply Line 1 by Line 2. ....	3.	00	00	00
4. Operating loss carryover from <b>Form CT-1120 ATT</b> , <i>Schedule H</i> , Line 16, Column D.....	4.	00	00	00
5. Income subject to tax: Subtract Line 4 from Line 3. ....	5.	00	00	00
6. Tax: Multiply Line 5 by 7.5% (.075). ....	6.	00	00	00
<b>Schedule B – Computation of Minimum Tax on Capital</b>				
1. Minimum tax base from <b>Form CT-1120</b> or <b>CT-1120U</b> , <i>Schedule E</i> , Line 6, Column C. If 100% Connecticut, also enter on Line 3. ....	1.	00	00	00
2. Apportionment fraction: Carry to six places. See instructions. ....	2.	0.	0.	0.
3. Multiply Line 1 by Line 2. ....	3.	00	00	00
4. Number of months covered by this return .....	4.			
5. Multiply Line 3 by Line 4, divide the result by 12. ....	5.	00	00	00
6. Tax (3 and 1/10 mills per dollar): Multiply Line 5 by .0031. ....	6.	00	00	00
<b>Schedule C – Computation of Amount Payable</b>				
1a. Tax: Greater of <i>Schedule A</i> , Line 6; <i>Schedule B</i> , Line 6; or minimum tax .....	1a.	00	00	00
1b. Enter the amount of surtax due: See instructions. ....	1b.	00	00	00
1c. Recapture of tax credits: See instructions. ....	1c.	00	00	00
1. <b>Total tax:</b> Enter the total of Lines 1a through 1c. If no tax credits claimed, enter also on Line 6. ....	1.	00	00	00
2. Multiply Line 1 by 30% (0.30). ....	2.	00	00	00
3. Enter the greater of Line 2 or \$250. ....	3.	00	00	00
4. Tax credit limitation: Subtract Line 3 from Line 1. ....	4.	00	00	00
5. Tax credits from <b>Form CT-1120K</b> , Part II, Line 9 <b>Do not exceed amount on Line 4.</b> .....	5.	00	00	00
6. Balance of tax payable: Subtract Line 5 from Line 1. ....	6.	00	00	00
7a. Paid with application for extension from <b>Form CT-1120 EXT</b> .....	7a.	00	00	00
7b. Paid with estimates from <b>Forms CT-1120 ESA, ESB, ESC, &amp; ESD</b> .....	7b.	00	00	00
7c. Overpayment from prior year .....	7c.	00	00	00
7d. Tax paid with original return plus additional tax paid after original return was filed .....	7d.	00	00	00
7. <b>Tax payments:</b> Enter the total of Lines 7a through 7d. ....	7.	00	00	00
8. Overpayment on original return or as last adjusted .....	8.			00
9. Net payments to date: Subtract Line 8 from Line 7. ....	9.			00
10a. Amount to be credited to estimated tax: If Line 9 is greater than Line 6, enter amount to be credited to estimated tax. ....	10a.			00
10b. Amount to be refunded: If Line 9 is greater than Line 6, enter amount to be refunded. ....	10b.			00
11. <b>Tax due:</b> If Line 6 is greater than Line 9, enter amount of tax due. ....	11.			00
12. Interest: See instructions. ....	12.			00
13. <b>Balance due:</b> Add Line 11 and Line 12. ....	13.			00

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

Explain any changes below. Show any computation in detail. Attach additional schedules, if necessary. If amending to claim a tax credit, attach **Form CT-1120K**, *Business Tax Credit Summary*.

Schedule or Line Number	

Mail return with payment to: Department of Revenue Services PO Box 2974, Hartford CT 06104-2974	Mail return without payment to: Department of Revenue Services PO Box 150406, Hartford CT 06115-0406	Make check payable to: <b>Commissioner of Revenue Services</b> Attach check to return with paper clip. Do not staple.
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**Declaration:** I declare under penalty of law that I have examined this return (including any accompanying schedules and statements) and, to the best of my knowledge and belief, it is true, complete, and correct. I understand that the penalty for willfully delivering a false return or document to the Department of Revenue Services (DRS) is a fine of not more than \$5,000, imprisonment for not more than five years, or both. The declaration of a paid preparer other than the taxpayer is based on all information of which the preparer has any knowledge.

<b>Sign Here</b>  Keep a copy of this return for your records.	Corporate officer's name ( <i>print</i> )		Corporate officer's signature		Date
	Corporate officer's email address ( <i>print</i> )		Title		Telephone number ( )
	Paid preparer's name ( <i>print</i> )		Preparer's SSN or PTIN		Date
	Paid preparer's signature				FEIN
	Firm's name and address				Telephone number ( )