

Form CT-1120CC-R

Revocation of Election and Consent to File Combined Corporation Business Tax Return

Purpose

Use **Form CT-1120CC-R, Revocation of Election and Consent to File Combined Corporation Business Tax Return**, to revoke a prior election to be included in a Combined Corporation Business Tax Return or a Unitary Corporation Business Tax Return.

General Instructions

Complete and attach this form to **Form CT-1120, Corporation Business Tax Return**, for the initial income year in which an affiliated corporation revokes its election to file a Combined Corporation Business Tax Return or a Unitary Corporation Business Tax Return.

For Income Year Beginning _____, _____, **and Ending** _____, _____.

Common Parent Corporation (or Designated Connecticut Parent)

The common parent corporation (or designated Connecticut parent) named below hereby revokes the election to file a Combined Corporation Business Tax Return or a Unitary Corporation Business Tax Return, which was submitted on behalf of itself and its Connecticut taxpayer affiliates for the **income year** _____. This revocation is irrevocable for the five succeeding income years.

| | | | |
|--|-------------------------------------|-------------------------------------|----------------------------|
| Name of common parent corporation (or designated Connecticut parent) | | Connecticut Tax Registration Number | |
| Print name of authorized officer | Signature of authorized officer | | Federal Employer ID Number |
| Title | Daytime telephone number () | Date | |

Affiliated Corporation

The affiliated corporation named below revokes its election to file a Combined Corporation Business Tax Return or a Unitary Corporation Business Tax Return with the common parent corporation (or designated Connecticut parent) named above. This revocation is irrevocable for the five succeeding income years.

| | | | |
|---|-------------------------------------|---------------------------------|-------------------------------------|
| Name of affiliate | | | Connecticut Tax Registration Number |
| Address (number, street, city or town, state, and ZIP code) | | | Federal Employer ID Number |
| State of incorporation | Date incorporated | Type of business | Current status (active/inactive) |
| Print name of authorized officer | | Signature of authorized officer | |
| Title | Daytime telephone number () | Date | |

Complete a separate revocation of election for each affiliate revoking its election to file as part of a combined or unitary Connecticut corporation business tax return.

Mail Form CT-1120CC-R to:

**Department of Revenue Services
PO Box 2937
Hartford CT 06104-2937**