Department of Revenue Services State of Connecticut

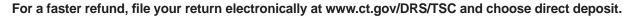
(Rev. 12/16) 1040 1216W 01 9999



Form CT-1040 Connecticut Resident Income Tax Return

	10	040 1216W 01 9999	ته صواها	For DRS			
Тахраує	ers mu	ust sign declaration on reverse side.		Use Only	M M - D D - Y Y Y	Com	plete return in blue or black ink only.
For Ja	anuai	ry 1 - December 31, 2016, or o	other taxable year Yea	r Beginning		and Ending	
1	Fili	ng Status - Check only one	box.		M M - D D - Y Y Y	Y	M M - D D - Y Y Y Y
		9	Head of household	n danaadaat ahil	Married filing separa		a's warms have and CON halow
_	You	Married filing jointly r Social Security Number	Qualifying widow(er) with	п аерепаеті спі	Spouse's Social Secu	•	e's name here and SSN below.
D 9	L			Check if deceased			Check if deceased
ame, mailing or town here	You	r first name	MI	Last nam	ne (If two last names, insert a	space between name	Suffix (Jr./Sr.)
SSN, name, mailing nd city or town here	If joi	int return, spouse's first name	MI	Last nam	ne (If two last names, insert a	space between name	es.) Suffix (Jr./Sr.)
	Mail	ling address (number and street, a	partment number, suite r	number, PO Box)		
Print your address, a	City	town, or post office (If town is two	words, leave a space be	etween the word	s.) State	ZIP code	
Pri adc	Ente	er city or town of residence if differ	ent from above.		ZIP code		
_	rk th	e appropriate box to identify	v if you: Filed	Form CT-104	OCRC (Attach to the back	of the return	Filed Form CT-AIT
Cile	, K (III	Filed Form CT-2210 and ch			Filed Form CT-8379 (,	
			, , , , , , , , , , , , , , , , , , , ,		,		le Dollars Only
2	1.	Federal adjusted gross inc Form 1040A, Line 21; or F		orm 1040, Lin	e 37;	1.	.00
	2.	Additions to federal adjuste	ed gross income fror	n <i>Schedule 1</i>	, Line 38	2.	.00
←	3.	Add Line 1 and Line 2.				3.	.00
	4.						
		Subtractions from federal a	adjusted gross incom	ne from Sche	dule 1, Line 50	4.	.00
-: 10	5.	Subtractions from federal a Connecticut adjusted gro				4.5.	.00
staple. forms.	5. 6.		oss income: Subtra	ct Line 4 from	n Line 3.	5.	
٠,		Connecticut adjusted gro	oss income: Subtra	ct Line 4 from	n Line 3. e instructions, Page 18.	5.	.00
Do not s or 1099	6.	Connecticut adjusted gro	oss income: Subtra or Tax Calculation S d to qualifying jurisdic	ct Line 4 from Schedule: See ctions from So	n Line 3. e instructions, Page 18. chedule 2, Line 59	5.6.	.00
Do not s or 1099	6. 7.	Connecticut adjusted gro Income tax from tax tables Credit for income taxes paid	oss income: Subtration States or Tax Calculation States dualifying jurisdicts. If Line 7 is greater	ct Line 4 from Schedule: See ctions from So than Line 6,	n Line 3. e instructions, Page 18. chedule 2, Line 59	5.6.7.	.00
Do not s or 1099	6. 7. 8. 9.	Connecticut adjusted ground income tax from tax tables. Credit for income taxes paid. Subtract Line 7 from Line 6. Connecticut alternative mir. Add Line 8 and Line 9.	oss income: Subtra or Tax Calculation S d to qualifying jurisdic 6. If Line 7 is greater nimum tax from Forn	ct Line 4 from Schedule: Sections from Schedule: Sections from Schedule: Sections from Schedule:	n Line 3. e instructions, Page 18. chedule 2, Line 59 enter "0."	5.6.7.8.	.00 .00 .00
Do not s or 1099	6. 7. 8. 9.	Connecticut adjusted ground income tax from tax tables. Credit for income taxes paid. Subtract Line 7 from Line 6. Connecticut alternative min	oss income: Subtra or Tax Calculation S d to qualifying jurisdic 6. If Line 7 is greater nimum tax from Forn	ct Line 4 from Schedule: See ctions from So than Line 6, on CT-6251	n Line 3. e instructions, Page 18. chedule 2, Line 59 enter "0."	5.6.7.8.9.	.00 .00 .00 .00
٠,	6. 7. 8. 9. 10.	Connecticut adjusted ground income tax from tax tables. Credit for income taxes paid. Subtract Line 7 from Line 6. Connecticut alternative min. Add Line 8 and Line 9. Credit for property taxes paid.	oss income: Subtration State or Tax Calculation State of the qualifying jurisdicts. If Line 7 is greater nimum tax from Formation on your primary redule 3 on Page 4 or	ct Line 4 from Schedule: See ctions from So than Line 6, on CT-6251 residence, mo your credit w	n Line 3. e instructions, Page 18. chedule 2, Line 59 enter "0." otor vehicle, or both: vill be disallowed.	5.6.7.8.9.10.	.00 .00 .00 .00
Do not s or 1099	6. 7. 8. 9. 10. 11.	Connecticut adjusted ground income tax from tax tables. Credit for income taxes paid Subtract Line 7 from Line 6 Connecticut alternative min Add Line 8 and Line 9. Credit for property taxes part Complete and attach Sche	oss income: Subtration State or Tax Calculation State of the qualifying jurisdicts. If Line 7 is greater nimum tax from Formation on your primary redule 3 on Page 4 or 10. If less than zero	ct Line 4 from Schedule: See ctions from So than Line 6, on CT-6251 residence, mo your credit w , enter "0."	n Line 3. e instructions, Page 18. chedule 2, Line 59 enter "0." otor vehicle, or both: rill be disallowed.	 5. 6. 7. 8. 9. 10. 11. 	.00 .00 .00 .00 .00
Clip check here. Do not s Do not send W-2 or 1099	6. 7. 8. 9. 10. 11.	Connecticut adjusted ground income tax from tax tables. Credit for income taxes paid Subtract Line 7 from Line 6 Connecticut alternative min Add Line 8 and Line 9. Credit for property taxes part Complete and attach Sche	oss income: Subtration State or Tax Calculation State of the qualifying jurisdicts. If Line 7 is greater nimum tax from Formation on your primary redule 3 on Page 4 or 10. If less than zero in Schedule CT-IT Creations.	ct Line 4 from Schedule: See ctions from So than Line 6, n CT-6251 residence, mo your credit w , enter "0."	n Line 3. e instructions, Page 18. chedule 2, Line 59 enter "0." otor vehicle, or both: rill be disallowed.	 5. 6. 7. 8. 9. 10. 11. 12. 	.00 .00 .00 .00 .00 .00
Do not s or 1099	6. 7. 8. 9. 10. 11. 12. 13.	Connecticut adjusted ground income tax from tax tables. Credit for income taxes paid Subtract Line 7 from Line 6 Connecticut alternative min Add Line 8 and Line 9. Credit for property taxes part Complete and attach Scheller Subtract Line 11 from Line Total allowable credits from	oss income: Subtration State or Tax Calculation State of the qualifying jurisdicts. If Line 7 is greater nimum tax from Formation on your primary redule 3 on Page 4 or 10. If less than zero in Schedule CT-IT Cr. Subtract Line 13 from	ct Line 4 from Schedule: See ctions from So than Line 6, n CT-6251 residence, mo your credit w , enter "0." edit, Part I, Li Line 12. If less	e instructions, Page 18. chedule 2, Line 59 enter "0." otor vehicle, or both: fill be disallowed.	 5. 6. 7. 8. 9. 10. 11. 12. 13. 	.00 .00 .00 .00 .00 .00

Due date: April 15, 2017 - Attach a copy of all applicable schedules and forms to this return.



Form CT-1040 Page 2 of 4 (Rev. 12/16) 1040 1216W 02 9999



Your Social Security Number •

		1040	121000 02 9	999											
	17.	En	ter amount f	rom Line 16.							17.				.00
3			Column A of W-2, or	- Employer's federal I	eral ID No. from Box b D No. from Form 1099		Connec	Column ticut wag		etc.			olumn C - income tax v	vithheld	
	and 10		18a			•					18a.				.00
Only	enter		18b.			•					18b.				.00
from	mation your V 1099 fo	V-2	18c.			•					18c.				.00
if Co	nnection ne tax	cut	18d.			•					18d.				.00
	withhe		18e.			•					18e.				.00
					ng from Supplemental				Н		18f.				.00
	18.				neld: Add amounts in Col , B, and C or your with				ved.		18.				.00
	19.	All :	2016 estimate	ed tax payments	and any overpayments	ap	plied from	n a prior y	ear ear		19.				.00
	20.	Pay	ments made	with Form CT-10	040 EXT (Request for e	exte	ension of t	ime to file))		20.				.00
					redit: From Schedule C			e 16.			20a.				.00
	20D.		0	the back of this	CT-1040CRC, Line 6. A return.	Mac	cn Form				20b.				.00
	21.	Tot	al payments	: Add Lines 18, 1	19, 20, 20a, and 20b.						21.				.00
4	22.	Ove	erpayment: If	Line 21 is more	than Line 17, subtract l	_ine	e 17 from	Line 21.			22.				.00
7	23.	Am	ount of Line 2	22 overpayment	you want applied to yo	our	2017 est	imated ta	ıx		23.				.00
	24.		ET contribution he back of this		e CT-CHET, Line 4. Atta	ach	Schedule	CT-CHE	T		24.				.00
	24a				signated charities from	Sch	hedule 5	l ine 70			24a.				.00
		Ref	iund: Subtrac	ct Lines 23, 24, a	and 24a from Line 22. F c. Direct deposit is not	or c	direct dep	osit,	ilers.		25.				.00
	25a.	Che	ecking	Savings	25c. Account	nun	mber								
			uting number	act denosit a ref	und check will be issue	d ar			_		ank acc	count outside th	ne U.S.?	Ye	es
5	26.				Line 21, subtract Line 2		•	0 ,	DC GCI	aycu.	26.				.00
_	27.	If la	ite: Enter pen	alty. Multiply Lin	e 26 by 10% (.10).						27.				.00
	28.		ite: Enter inte , then by 1%		e 26 by number of mon	ths	or fractio	n of a mo	nth		28.				.00
	20				mated tax from Form C	T-2'	210.				29.				.00
	23.		e instructions		nated tax nom rom c	1-24	.210.				29.				
				ue: Add Lines 26	9						30.				.00
6	repo pen	ortin alty	g and payme for willfully	ent of any use ta delivering a fals	of law that I have ex ax due, and, to the bes e return or document aid preparer other than	st of to E	of my kno DRS is a	wledge a	nd beli	ef, it is than \$	true, c 5,000,	complete, and or imprisonm	correct. I ur	nderstar nore tha	nd the
S	ign		Your signatur	е				Date (MM	IDDYY	YY)		Home/cell t	elephone nu	mber	
	ere		Your email ac	ddress											
	ep a				,			D (/ / / / / / / / / / / / / / / / / /	100,00	0.0		5			
this	py of return		Spouse's sigi	nature (if joint ret	urn)			Date (MM •	יץץטטוי	(Y)		Daytime tel	ephone num	ber	
	your ords.		Paid prepare	r's signature				Date (MM	IDDYY	YY)		Telephone	number		
		•	Preparer's S	SN or PTIN				Firm's Fe	deral E	mploye	r Identi	fication Number	er (FEIN)		
			Firm's name,	address, and ZI	P code										
		•	Third Party I	Designee - Com	plete the following to a	ıtho	orize DRS	to conta	ct anoth	er nere	on abo	out this return			
			Designee's nar	•			ephone nun			J. P010		Personal identifica	ation number (I	PIN)	
		•			•						•				

Complete applicable schedules on Pages 3 and 4 and send all four pages of the return to DRS.



Schedule 1 - Modifications to Federal Adjusted Gross Income Enter all items as positive numbers. See instructions, Page 23. 31. .00 31. Interest on state and local government obligations other than Connecticut 32. Mutual fund exempt-interest dividends from non-Connecticut state or municipal .00 32. government obligations 33. Taxable amount of lump-sum distributions from qualified plans not included in federal .00 adjusted gross income 33. .00 34. Beneficiary's share of Connecticut fiduciary adjustment: Enter only if greater than zero. 34. .00 35. Loss on sale of Connecticut state and local government bonds 35. .00 36. Domestic production activity deduction from federal Form 1040, Line 35 36. .00 37. 37. Other - specify • .00 38. Total additions: Add Lines 31 through 37. Enter here and on Line 2. 38. 39. .00 39. Interest on U.S. government obligations 40. .00 40. Exempt dividends from certain qualifying mutual funds derived from U.S. government obligations .00 41. Social Security benefit adjustment: See Social Security Benefit Adjustment Worksheet, Page 25. 41. 42. Refunds of state and local income taxes 42. .00 .00 43. Tier 1 and Tier 2 railroad retirement benefits and supplemental annuities 43. .00 44. Military retirement pay 44. .00 45. 25% of income received from the Connecticut teacher's retirement system 45. .00 46. Beneficiary's share of Connecticut fiduciary adjustment: Enter only if less than zero. 46. .00 47. 47. Gain on sale of Connecticut state and local government bonds .00 48. Connecticut Higher Education Trust (CHET) contributions 48. Enter CHET account number: Do not add spaces or dashes. .00 49. Other - specify: Do not include out of state income. • 49. .00 50. Total subtractions: Add Lines 39 through 49. Enter here and on Line 4. 50.

Schedule 2 - Credit for Income Taxes Paid to Qualifying Jurisdictions

You must attach a copy of your return filed with the qualifying jurisdiction(s) or your credit will be disallowed. See instructions, Page 27.

51. Modified Connecticut adjusted gross income.	.00			
	Column A	A Code	Column B Name	Code
52. Enter qualifying jurisdiction's name and two-letter code				
53. Non-Connecticut income included on Line 51 and reported on a qualifying jurisdiction's income tax return from Schedule 2 Worksheet 53.	i.	.00		.00
54. Divide Line 53 by Line 51. May not exceed 1.0000			_ •	
55. Income tax liability. Subtract Line 11 from Line 6	i.	.00		.00
56. Multiply Line 54 by Line 55	i.	.00		.00
57. Income tax paid to a qualifying jurisdiction	·	.00		.00
58. Enter the lesser of Line 56 or Line 57	i.	.00		.00
59. Total credit: Add Line 58, all columns. Enter here and on Line 7	59.		.00	



Your Social Security Number •

Schedule 3 - Property Tax Credit See instructions, Page 30.

		, 0					
Qualifying Property	Name of Connecticut Tax Town or District	Description of Pro If primary residence, enter st motor vehicle, enter year, ma	reet address. If	Date(s) Paid (MMDDYYYY)		Amount Paid	
60. Primary Residence	•	•			60.		.00
61. Auto 1	•	•	:		61.		.00
62. Auto 2 - Married filing of jointly or qualifying wido		•			62.		.00
63. Total property tax p	oaid: Add Lines 60), 61, and 62.			63.		.00
64. Maximum property	tax credit allowe	ed.			64.	200	.00
65. Enter the lesser of L	ine 63 or Line 64.				65. •		.00
	•	ng status and Connecticut AG o, enter the amount from Lir		ax Credit Table	66.		
67. Multiply Line 65 by L	ine 66.				67. •		.00
68. Subtract Line 67 from your credit will be dis		nere and on Line 11. Attach	Schedule 3 to your re	turn or	68.		.00
		Failure to report and pay	use tax is subject to	as much as a			

Schedule 4 - Individual Use Tax

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.

Do you owe use tax for online or other purchases where you paid no sales tax? See instructions, Page 33.

Complete the Connecticut Individual Use Tax Worksheet on Page 32 to calculate your use tax liability.

001 T to 1 to 1 to 1 0 000 T to 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
69b. Total use tax due at 6.35%: From Connecticut Individual Use Tax Worksheet, Section B, Column 7 69b.	.00
69c. Total use tax due at 7.75%: From Connecticut Individual Use Tax Worksheet, Section C, Column 7 69c.	.00
69. Individual use tax: Add Lines 69a through 69c. If no use tax is due, you must enter "0." Enter here and on Line 15.	00

Schedule 5 - Contributions to Designated Charities - See more information on Page 6.

70a. AIDS Research	70a.	.00
70b. Organ Transplant	70b.	.00
70c. Endangered Species/Wildlife	70c.	.00
70d. Breast Cancer Research	70d.	.00
70e. Safety Net Services	70e.	.00
70f. Military Relief	70f.	.00
70g. CHET Baby Scholar	70g.	.00
70. Total Contributions: Add Lines 70a through 70g. Enter amount here and on Line 24a.	70.	.00

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

Use the correct mailing address for			
For all tax forms with payment:	For refunds and all other tax forms without payment:	Commissioner of Revenue Services	
Department of Revenue Services PO Box 2977 Hartford CT 06104-2977	Department of Revenue Services PO Box 2976 Hartford CT 06104-2976	To ensure proper posting, write your SSN(s) (optional) and "2016 Form CT-1040" on your check.	