

Department of Revenue Services State of Connecticut (Rev. 12/17) 1120 1217W 01 9999



Form CT-1120

Corporation Business Tax Return



Should you file Form CT-1120CU? (STOP) See instructions.

E	nter Income Year Beginning 🕨		and Ending 🕨		For DRS Use Only	
	Corporation name	M M - D D - Y Y Y Y		M M - D D - Y Y Y Y Federal Em	olover ID N	$\overline{M} \overline{M} - \overline{D} \overline{D} - \overline{Y} \overline{Y} \overline{Y} \overline{Y}$ Sumber (FEIN)
					-) -	
	Number and street		PO Box	Connecticut	Tax Regis	tration Number
				•		
	City, town, or post office	State	ZIP code			
	Total assets	NAICS code: See instrue	ctions. Amou	Int from federal Form 1120, Line 1	1	00
	.00	•	(See	Schedule C, Line 1b)		.00
ls	s this corporation exchangir	ng R & D tax credits?	Yes (File	Form CT-1120 XCH separat	ely)	
lf	Yes, enter the amount of cred	lit refund requested:		.00		
	hedule C – Computation			•		
1a.	Tax: Greater of Schedule A, Lin	e 6; <i>Schedule B</i> , Line 6; or \$2	50	1a. Þ	•	.00
1b.	Surtax: Line 1a multiplied by 20					.00
	Line 1a is \$250 enter zero ("0").					
	Recapture of tax credits: See in				•	.00
1.	Total tax: Enter the total of Line	0				.00
2.	Multiply Line 1 by 49.99% (0.49					.00
3.	Enter the greater of Line 2 or \$2					.00
4.	Tax credit limitation: Subtract Li					.00
5a.						.00
	Excess credit utilization from Fo				•	.00
5.	Total tax credits: Add Line 5a	and Line 5b		5.		.00
6.	Balance of tax payable: Subtra	act Line 5 from Line 1		6. Þ	•	.00
7a.	Paid with application for extension	ion from Form CT-1120 EXT			•	.00
7b.	Paid with estimates from Forms	s CT-1120 ESA, ESB, ESC, a	nd ESD		•	.00
7c.	Overpayment from prior year				•	.00
7.	Tax payments: Enter the total of	of Lines 7a, 7b, and 7c			•	.00
8.	Balance of tax due (overpaid)	: Subtract Line 7 from Line 6.		8. Þ	•	.00
9a.	Penalty				•	.00
9b.	Interest				•	.00
9c.	Form CT-1120I Interest			9c. Þ	•	.00
9.	Total penalty and interest: En	ter the total of Lines 9a, 9b, ar	nd Line 9c			.00
10a	a. Amount to be credited to 2018 e	estimated tax		10a. ▶	•	.00
10t	b. Amount to be refunded				•	.00
		e Direct Deposit by completi	ng Lines 10c, 1			
	c. Checking ► Savings ►	10d. Routing # ►		10e. Account # ►		
10f	. Will this refund go to a bank acc	ount outside the U.S.? ►	Yes 10g. Bar	ik name 🕨		
10.	Total to be credited or refund	ed: Enter the total of Line 10a	and Line 10b	10.		.00
11.	Balance due with this return:	Add Line 8 and Line 9		11. 🕨	•	.00

You must complete Schedules A, B, and D (Page 2) and Schedules E, F, and G (Page 3) BEFORE completing Schedule C. Attach a complete copy of Form 1120 including all schedules as filed with the Internal Revenue Service.





CT T	CT Tax Registration Number										

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	·
3.	Connecticut net income: Multiply Line 1 by Line 2 3. ►	.00
	Operating loss carryover from Form CT-1120 ATT, Schedule H, Line 21, Column E. Do not exceed 50% of Line 3	.00
5.	ncome subject to tax: Subtract Line 4 from Line 3 5. ►	.00
6. '	Tax: Multiply Line 5 by 7.5% (.075)6. ►	.00
Sc	hedule 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	_·	
3.	Multiply Line 1 by Line 2		.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 \$1,000,0006. ►		.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	e 3 5. 🕨	.00
6. Federal bonus depreciation: See instructions.	6. ►	.00
7. Reserved for future use		
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 26	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-1120/ Part II B, Line 1		.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 Schedule A, Line 1	22. ►	.00









Schedule E – Computation of Minimum Tax Base

Schedule E – Computation of Minimum Tax Base See instructions.		Column B End of Year	Column C	
1. Capital stock from federal Schedule L, Line 22a and Line 22b	.00	.00		
 Surplus and undivided profits from federal Schedule L, Lines 23, 24, and 25 	.00	.00	(Column A plus Column B)	
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		.00
 Holdings of stock of private corporations: Attach schedule. Enter average in Column C. 	.00	.00		.00
6. Balance: Subtract Line 5, Column C, from Line 4, Column C. E	Enter here and on Schedule B, Lir	ne 1.		.00

Schedule F – Taxes

		Column A		Column B	
1. Payroll	1.		.00		
2. Real property	2.		.00		
3. Personal property	3.		.00		
4. Sales and use	4.		.00		
5. Other: See instructions.	5.		.00		
6. Connecticut Corporation Business Tax deducted in the computation of federal taxable in	incor	ne	6.		.00
7. Tax on or measured by income or profits imposed by other states or political subdivision computation of federal taxable income: Attach schedule.			7.		.00
8. Total unallowable deduction for Corporation Business Tax purposes: Add Line 6 a Enter here and on <i>Schedule D</i> , Line 3.			8.		00

Schedule G – Additional Required Information

Attach a schedule of corporate officers' names, titles, and addresses. See instructions.

1. In which Connecticut (CT) town(s) does the corporation own or lease, as lessee, real or tangible personal property, or perform services?

2.	(a) Did this corporation directly or indirectly transfer a controlling interest in an entity owning CT real property? Yes No							
	If Yes , enter: Entity name ►	Federal Employer ID Number ►						
	(b) Was there a direct or indirect transfer of a controlling inte	erest in your company owning CT real property? Yes No						
	If Yes, enter: Transferor name ►	Federal Employer ID Number ►						
	(c) If the answer to either 2(a) or 2(b) is Yes, enter: Transferee(s) name							
	Date of transfer	, and attach a list of addresses for all Connecticut real property transferred.						
3.	Did any corporation at any time during the year own a majo	rity of the voting stock of this corporation? Yes No						
	If Yes, enter: Corporation name	Federal Employer ID Number						
4.	 Last taxable year this corporation was audited by the Internal Revenue Service ► 							
	Were adjustments reported to CT? ► Yes ►	No (If No , attach explanation.)						







CT Tax Regi	istration Nu	Imber		

Check All Applicable Boxes:							
1. Address change							
2. Return status: Initial Final Short period							
3. If this is a final return, has the corporation: Corporatio: Corporation: Corporation: Corporation: Corpora							
Merged/reorganized: Enter survivor's Connecticut (CT) Tax Registration Number:							
4. Federal return was filed on:							
▶ 1120 ▶ 1120-H ▶ 1120-REIT ▶ 1120-RIC ▶ Other:							
Consolidated basis: Parent co. name Parent co. FEIN							
5. Did this company file as part of a Form CT-1120CU for the previous year?							
6. Does this company file as part of a Form CT-1120CU and is filing this return to report non-unitary business income?							
► Yes ► No							
If Yes, enter the CT Tax Registration Number of the group's designated taxable member:							
7. Is the principal place of business located in CT? ► Yes ► No							
If No, enter state where principal place of business is located State of incorporation:							
Date of organization: Date qualified in CT: Date business began in CT:							
8. Is this corporation exempt from CT Corporation Business Tax?							
Yes (Attach explanation of exemption including statutory cite.) No							
9. Did this corporation use the annualized method to calculate its estimated tax installments?							
► Yes (Attach Form CT-1120I.) No							
10. Does this corporation pay, accrue, or incur interest expenses or intangible expenses, costs, and related interest expenses to a related member? ► Yes (Attach Form CT-1120AB.) No							

DECLARATION: I declare under the penalty of law that I have examined this return and, to the best of my knowledge and belief, it is true, complete, and correct. I understand 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.

	Corporate officer's name (print)	Corporate officer's si	gnature	Date (MMDDYYYY)
Sign	Corporate officer's email address (print	t)		
Here	DO NOT			
Keep a	Title	Telephone number		
copy of this			May DRS contact the p shown below about this	s return?
return	Paid preparer's name (print)	Paid preparer's signature	Date (MMDDYYYY) Prepa	arer's SSN or PTIN
for your records.				
1000100.	Firm's name and address	Firm's FEIN	Telephone nur	mber