



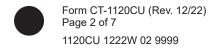
Form CT-1120CU

Combined Unitary Corporation Business Tax Return

Er	nter Income Year Beginnin	_		022	and E	Ending ►				-			
	Name of Connecticut des		ble member				M M -	DD-	Connec		Registra	ation Number	
>	Name of Cormodicat doc	ngriatod taxa						•		iout rux	togiotic		
	Number and street				F	PO Box			Federal	Employe	r ID Nu	mber (FEIN)	
>								•	-				
	City, town, or post office			State	7	ZIP code							
	only, termi, or poor emice												
Ch	eck All Applicable I	Boxes:	1. ▶	Addres	s char	nge							
2.	Unitary return status:	•	Initial retu	ırn 🕨		Final	•	Shor	t period	•	An	nended	
	Is any member request Amount of credit to be is the form of a refund req	ssued in		udent Lo	oan Pay		x credit?	>	Yes (Fil	e Form C	T-RSL	P separately.)	
	Is any member exchang Amount of credit to be is		tax credits	?				•	Yes (Fil	e Form C	T-1120	XCH separatel	y.)
	the form of a refund req	uested:				.(00						
	Did the unitary group a	nnualize its	estimated	tax payr	ments?			•	tach Forr	n CT-11	•	No	
	Filing Method: See instructions.		ter's Edge fault)	!	•		Affiliated Election)	Group		•		orldwide ection)	
Pa	rt III – Computation	of Amoun	t Payable	- Comp	olete Pa	'	,	hedule	KU before	e comple	,	,	
1.	Combined Unitary Tax	: Enter amo	unt from Pa	art I, Line	9, Con	nbined G	roup Total	l columi	n	1. ▶			.00
2.	Combined Unitary Tax	Credits: Er	nter amoun	t from Pa	art II, Lir	ne 8				2. ▶			.00
3.	Balance of tax before	PE credit: S	Subtract Lin	e 2 from	Line 1.					3. ▶			.00
4.	Total PE credit applied	from all mem	nbers. See	nstructio	ns					4. ▶			.00
5.	Balance of tax payable	e: Subtract L	ine 4 from	Line 3, b	ut not l	ess than :	zero ("0").			5. ▶			.00
6a.	Amount paid with Form	CT-1120 EX	ΚΤ		6a	. ▶			.(00			
6b.	Amount paid with Forms	S CT-1120 ES	SA, ESB, ES	SC, and I	ESD . 6b	o. ▶			.(00			
6c.	Overpayment from prior	r year			6c	. •			.(00			
6.	Tax payments: Add Li	nes 6a, 6b, a	and 6c							6.			.00
7.	Balance of tax due (ov	/erpaid): Su	btract Line	6 from	Line 5.					7. ▶			.00
8a.	Penalty								8	3a. ▶			.00
8b.	Interest.								8	3b. ▶			.00
8c.	Form CT-1120I Interes	t							8	3c. ▶			.00
8.	Total penalty and inte	rest: Enter t	the total of	Lines 8a	a, 8b, a	nd Line	8c			8. ▶			.00
	. Amount to be credited												.00
	. Amount to be refunde												.00
Fo	or a faster refund, choose	Direct Depos	sit by compl	eting Line	es 9c th	rough 9e.	90	o. ▶	Chec	king	•	Savings	.00
9d	. Routing number ▶			96	e. Acco	ount numl	ber ►						
9f	. Will this refund go to a l	bank accoun	nt outside th	e U.S.?	•	Yes	9g. Ban	k name	· •				
10	. Total to be credited or	refunded:	Enter the t	otal of L	ine 9a	and Line	9b		1	I0. ▶			.00
11	. Balance due with this	return: Add	I Line 7 an	d Line 8.					<i>'</i>	11. ▶			.00

Please note that each form is year specific. To prevent any delay in processing your return and/or refund, the correct year's form must be submitted to the Department of Revenue Services (DRS).





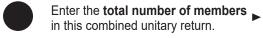


(Connecticut Tax Registration Number											
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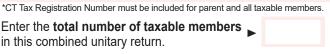
For more than 50 members, attach replicas of this page as needed, with the same

Schedule of Members Included in the Combined Unitary Return. (Enter taxable members first.)

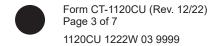
Sched	dule of Men	nbers Included in the Combined Unitary F	Return. (Enter tax	cable members first.) information	ation and begin numbering with 51.
Line	Member #	Corporation Name	Taxable (Y/N)	CT Tax Registration Number	* FEIN
1.	1.	Designated Taxable Member	Υ		
2.			>		>
3.			>		>
4.			>		>
5.			>		>
6.			>		>
7.			>		>
8.			>		>
9.			>		>
10.			>		>
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25.			>		>
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27.			>		•
28.			>		•
29.			>		•
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32.			>		•
33.					•
34.					•
35.					•
36.					<u> </u>
37.					<u> </u>
38.					<u> </u>
39. 40.					
41.					
41.					
42.					
44.					
44. 45.					
46.					
47.			> >		>
48.					
49.					
50.					
50.			>		•



Enter the total number of taxable members in this combined unitary return.









Connecticut Tax Registration Number											
				_			_	_	_	_	

	Column A	Column B	Column C		
PART I – Combined Group Total Tax	ĸ	Taxable Member #:	Taxable Member #:	Taxable Member #:	
	Corporation na Combined Group				
Tax on combined group net income from Form CT-1120CU-NI, Part III, Line 14.	•	.00			
2. Tax on combined group minimum tax base from Form CT-1120CU-MTB , Line 14.	•	.00			
3. Enter the larger of Line 1 or Line 2.lf greater than \$2,500,000, complete Form CT-1120CU-NCB .	•	.00			
4. Aggregate maximum tax: If Line 3 exceeds \$2,500,000, enter the amount from Form CT-1120CU-NCB, Part III, Line 5.					
Otherwise, enter zero ("0").	•	.00			
5. If Line 4 is zero ("0"), enter the amount from Line 3. Otherwise, enter the lesser of Line 3	•	.00			

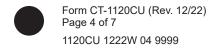
On Lines 6a, 6b, and 6c, enter each taxable member's share of amount shown on Line 5, as applicable:

6a. If amount on Line 5 is based on combined group net income from Line 1, enter the corresponding amounts in each column as reported on Form CT-1120CU-NI, Part III, Line 13. Otherwise leave Line 6a blank.

or Line 4.

- 6b. If amount on Line 5 is based on combined group minimum tax base from Line 2, enter the corresponding amounts in each column as reported on Form CT-1120CU-MTB, Line 10 (or Line 12, if applicable). Otherwise leave Line 6b blank.
- 6c. If amount on Line 5 is based on the aggregate maximum tax from Line 4, enter the corresponding amounts in each column as reported on Form CT-1120CU-NCB, Part III, Line 9. Otherwise leave Line 6c blank.
- 7. Surtax: Multiply each applicable tax amount on Line 6a, Line 6b, or Line 6c, by 10% (.10). If the tax amount in any column is \$250, enter zero ("0"). Enter the total of all columns on Line 7 in Combined Group Total column.
- 8. Recapture of tax credits: Enter the total of all columns on Line 8 in Combined Group Total column.
- 9. Total tax: Add Lines 6a, 6b, or 6c, and Lines 7 and 8. Enter the amount in each column on Part II, Line 1, and enter the total of all columns on Line 9 in Combined Group Total column. Enter the Combined Group Total on Part III, Line 1.

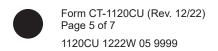
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	.00	.00	.00
.00	.00	.00	.00
.00	.00	.00	.00
.00	.00	.00	.00





Connecticut Tax Registration Number	

	Column D	Column E	Column F	Column G	Column H	
	Taxable Member #:					
	1.					
2	2.					
3	3.					
2	4.					
Ę	5.					
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6k	0.	.00	.00	.00	.00	.00
60	c.	.00	.00	.00	.00	.00
7	7.	.00	.00	.00	.00	.00
8	В.	.00	.00	.00	.00	.00
ç	9.	.00	.00	.00	.00	.00



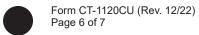


Connecticut Tax Registration Number									

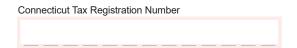
	Column A	Column B	Column C	Column D				
PART II – Combined Group Unitary Tax Credit Computation	Taxable Member #:	Taxable Member #:	Taxable Member #:	Taxable Member #:				
Corporation name:								
Enter each member's separate tax liability as reported on Part I, Line 9.		.00	.00	.00	.00			
2. Enter the lesser of Line 1 multiplied by 50.01% (.5001) or Line 1 minus \$250. If negative, enter zero ("0").		.00	.00	.00	.00			
Tax credits applied. Do not exceed the amount reported on Line 2 in any column.		.00	.00	.00	.00			
4. Subtract Line 3 from Line 1.		.00	.00	.00	.00			
5. Enter the lesser of Line 1 multiplied by 9.99% (.0999) or Line 4 minus \$250. If negative, enter zero ("0").		.00	.00	.00	.00			
Excess credit utilization. Do not exceed the amount reported on Line 5 in any column.		.00	.00					
7. Add Line 3 and Line 6 in each column.	7. Add Line 3 and Line 6 in each column.							
8. Combined unitary tax credits: Add the amounts	s in each column on Line	e 7 and enter the total her	re and on Part III, Line 2.	>	.00			
Combined Unitary Group Net Operating	ng Loss Summary	/						
1. Total apportioned net operating loss applied by comb	ined unitary group membe	ers in 2022 from Form CT-1	120CU-NI, Part III, Line 11.	1. ▶	.00			
2. Total apportioned net operating loss carryover ava	ilable for use in 2023 by	all combined unitary grou	p members.	2. ▶	.00			
Combined Unitary Group Pass-Through	gh Entity (PE) Tax	Credit Summary						
PE credit carryforward from 2021.				1.	.00			
2. Enter the sum of 2022 PE credits reported in each	column on 2022 Form C	CT-1120CU-MI, Part I, Line	e 10.	2. ▶	.00			
3. Total 2022 PE credit available. Add Line 1 and Line	e 2.			3.	.00			
4. PE credit applied in 2022 from Form CT-1120CU,	Part III, Line 4.			4.	.00			
5. PE credit carryforward: Subtract Line 4 from Line		5.	.00					
DECLARATION: I declare under the penalty of law I understand the penalty for willfully delivering a false reference to the penalty for willfully delivering a false reference to the penalty for will fall to the penalty for will fall to the penalty of the penalty	turn or document to the D	epartment of Revenue Se	ervices (DRS) is a fine of no	t more than \$5,000, impriso				

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	signature		Date		
Sign								
Here	Title		Telephone number	er		W W D D 1 1	YY	
Keep a copy of			-	May DRS contact the p shown below about this				
this return	Paid preparer's name (print)	Paid preparer's sig	gnature	Date	– Prepa	arer's SSN or PTIN		
for your				-	-			
records.	Firm's name and address		Firm's FEIN	M M - D	Telep	hone number		

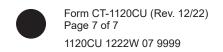


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Column E	Column F	Column G	Column H	Column I	
Taxable Member #:					
1.	.00	.00	.00	.00	.00
2.	.00	.00	.00	.00	.00
3.	.00	.00	.00	.00	.00
4.	.00	.00	.00	.00	.00
5.	.00	.00	.00	.00	.00
6.	.00	.00	.00	.00	.00
7.	.00	.00	.00	.00	.00





Connecticut Tax Registration Number											

Schedule KU – Combined Unitary Tax Credits

Attach 2022 Form CT-1120K for each member claiming, using, or sharing a business tax credit and enter the combined credit totals.

Tax Credits With Carryback Provisions		Column A Carryback Amount	Column B Amount Applied	Column C Carryforward Amount
1. Neighborhood Assistance.	1.	.00 ▶	.00	
2. Housing Program Contribution.	2. 1	.00 ►	.00	
Tax Credits Without Carryback or Carryforward Provisions		J		
3. Apprenticeship Training.	3.	•	.00	
 Manufacturing Facility Credit for Facilities located in a Targeted Investment Community/Enterprise Zone. 	4.	•	.00	
5. Machinery and Equipment.	5.	•	.00	
6. Service Facility.	6.	•	.00	
7. Student Loan Payment.	7.	•	.00	
8. Film Production.	8.	•	.00	
9. Digital Animation.	9.	•	.00	
10. Film Production Infrastructure.	10.	•	.00	
Tax Credits With Carryforward Provision	าร			
11. Housing Program Contribution.	11.	•	.00	.00
12. Research and Experimental Expenditures.	12.	•	.00	.00
13. Research and Development.	13.	•	.00	.00
14. Fixed Capital Investment.	14.	•	.00	.00
15. Human Capital Investment.	15.	•	.00	.00
16. Insurance Reinvestment Fund.	16.	•	.00	.00
17. Reserved for future use.	17.			
18. Historic Homes Rehabilitation.	18.	•	.00	.00
19. Donation of Land.	19.	•	.00	.00
20. Historic Structures Rehabilitation.	20.	•	.00	.00
21. Historic Preservation.	21.	•	.00	.00
22. Urban and Industrial Site Reinvestment.	22.	•	.00	.00
23. Green Buildings.	23.	•	.00	.00
24. Historic Rehabilitation.	24.	•	.00	.00
 Electronic Data Processing Equipment Property Tax Credit. 	25.	>	.00	.00
26. Add the amounts in Column A, Column B, and Column C.	26.	.00 ▶	.00	.00