Department of Taxation and Finance Claim for Alternative Fuels Credit

						st enter ta	x periou.	onding	
egal r	name of corpora	ation		peg	ginning		Employer identif	ending ication nu	mber (EIN)
ach	this form to	your tax return (See Form CT-40-1 1	nstructions for Form	CT-40 fo	r assistanc	e)		
				complete Sections 1				na this si	ummarv.)
				'S (see instructions).					
				(see instructions)					
				(add lines 1 and 2)					
				see instructions)					
			•	act line 4 from line 3					
			•	7)					
	•		•	ee instructions)					
				e instructions)				-	
	-			tax period (see instr.)				-	
	•								
			ion (subtract line 11						
			•		• 12				
		• ' '						13	
		'		e 13 from line 7)					
cti	on 1 – Co	mputation of	credit recaptu	re on alternativ	ve fuel	vehicle	refueling pro	perty	(see instructions)
	Α	_ B	C	_ D		-	F		G
	ax year credit	Total recovery period of	Years in service prior to	Recapture years (column B - column C)		ture % ÷ column B)	Original credit		Credit recapture
	llowed	property	recapture year	(column 6 - column C)	(colullil D	- COIUIIIII B)	allowed		(column E × column F)
								•	
								•	
_								•	
R	ecaptured a	Iternative fuel vel	nicle refueling pro	perty credit <i>(add c</i> o	olumn G a	mounts)	•	15	
	-			e recapture of the					
		•	•	here and on line 6; S			,	17	
-						,			
:ti	on 2 – Ele	ection to trans	fer credits (Ar	ticle 9-A taxpa	vers or	ılv) (see	instructions)		
				affiliates (see in				ts if nec	essarv)
	Tax year		nsferor corporatio			.,	EIN		Credit received
3	,		•					•	
)								•	
<u> </u>								•	
_	Total credit	received from a	iffiliates (add lines	: 18, 19, and 20; incl	ude total f	rom attach	ed sheets	-	
			·					21	
	,, 0,110		y						
tif	ication of tr	ransferor cornor	ation (for line 18)	· I certify that I am	an auth	nrized ner	son for the tran	sferor n	amed above. On bel
				the amount of cre			con for the trail	SICIOI I	iamou above. On bei
	ure of authorize		Official title				corporation name		Date
							•		
						1			
f١	/ou are clair	ming this credit as	s a corporate parti	ner, mark an X in t	he box				



	Official title	Transferor corporation name	Date
alf of that corporation, I elect	oration (for line 20): I certify that I to transfer to the taxpayer the amo	am an authorized person for the transfe ount of credit shown on page 1.	eror named on page 1. C
nature of authorized person	Official title	Transferor corporation name	Date
		am an authorized person for the taxpayed on page 1 the amount of credit showr	
nature of authorized person	Official title	Transferee corporation name	
			I
		e instructions; attach additional sheets if nece	
-	Transferee corporation name	EIN	Credit transferred
22			
23			
24			
25 Total credit transferred to	affiliates (add lines 22, 23, and 24;	include total from attached sheets	
if any; enter here and on line	9 4)		5
ertification of transferee cor	rporation (for line 22): I certify that	at I am an authorized person for the trans	sferee corporation name
ertification of transferee cor	rporation (for line 22): I certify that	25	sferee corporation name
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