

Schedule CT-1041B Fiduciary Adjustment Allocation

2012

Complete this schedule in blue or black ink only.

Read the instructions on Page 22 in the **Form CT-1041 instruction booklet** before completing this schedule.

Name of trust or estate	Federal Employer Identification Number (FEIN) _____ : _____
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If you have a Connecticut fiduciary adjustment, complete Schedule CT-1041B, Part 1, to calculate the trust or estate's and each beneficiary's share of the Connecticut fiduciary adjustment. Schedule CT-1041B, Part 2, should only be completed by full-year or part-year resident inter vivos trusts with one or more nonresident, noncontingent beneficiaries to calculate the resident, noncontingent beneficiary percentage. Attach Schedule CT-1041B to the back of **Form CT-1041**, *Connecticut Income Tax Return for Trust and Estates*.

Part 1 – Shares of Connecticut Fiduciary Adjustment of a Resident or a Nonresident Estate or a Resident Trust, Part-Year Resident Trust, or Nonresident Trust

(1) Name and Address of Each Beneficiary Check box below if beneficiary is a nonresident of Connecticut.	(2) Identifying Number of Each Beneficiary (SSN or FEIN)	Shares of Federal Distributable Net Income: See instructions.		(5) Shares of Connecticut Fiduciary Adjustment	
		(3) Amount	(4) Percent		
a)					
<input type="checkbox"/>			00		00
b)					
<input type="checkbox"/>			00		00
c)					
<input type="checkbox"/>			00		00
d)					
<input type="checkbox"/>			00		00
e) Trust or estate Resident estate or full-year resident trust Carry the amount from Column 5 to Schedule CT-1041C, Line 5; or Nonresident estate or trust or a part-year resident trust Carry the amount from Column 5 to Schedule CT-1041FA, Part 1, Line 2.			00		00
f) Total The amount entered on Schedule CT-1041B, Part 1, Line f, Column 5, should be the same as the amount entered on Form CT-1041, <i>Schedule A</i> , Line 13. See instructions.			00		00

The fiduciary must provide each beneficiary with Schedule CT-1041 K-1, *Beneficiary's Share of Certain Connecticut Items*, for inclusion on the applicable income tax return.

Part 2 – Percentage of Resident Noncontingent Beneficiaries: See instructions.

1. Enter the number, if any, of resident , noncontingent beneficiaries.	1	
2. Enter the number of nonresident , noncontingent beneficiaries.	2	
3. Add Line 1 and Line 2.	3	
4. Divide Line 1 by Line 3 and enter as a decimal. Round to four decimal places. See instructions.	4	.

If a full-year resident inter vivos trust, enter the percentage from Line 4 above on Schedule CT-1041C, Line 11.

If a part-year resident inter vivos trust, enter the percentage from Line 4 above on Schedule CT-1041FA, Part 1, Line 5.

Schedule CT-1041 K-1
Beneficiary's Share of Certain Connecticut Items

For calendar year 2012 or other taxable year ▶ beginning _____, 2012, and ▶ ending _____, 20____.
 Complete this schedule in blue or black ink only.

Trust or Estate Information	Beneficiary Information
Federal Employer ID Number (FEIN) ▶	Beneficiary's Social Security Number (SSN) or FEIN ▶ <input type="checkbox"/> SSN ▶ <input type="checkbox"/> FEIN
Name of trust or estate ▶	Name ▶
Name and title of fiduciary ▶	Address Number and street PO Box ▶
Address of fiduciary Number and street PO Box ▶	City or town State ZIP code ▶
City or town State ZIP code ▶	Check one: ▶ <input type="checkbox"/> Resident, noncontingent ▶ <input type="checkbox"/> Nonresident, noncontingent ▶ <input type="checkbox"/> Resident, contingent ▶ <input type="checkbox"/> Nonresident, contingent ▶ <input type="checkbox"/> Part-year resident: See Instructions. Date: _____
Check one: ▶ <input type="checkbox"/> Amended Schedule CT-1041 K-1 ▶ <input type="checkbox"/> Final Schedule CT-1041 K-1	

Shares of federal distributable net income	▶ \$	00	▶	%
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Part I - Connecticut Fiduciary Adjustment

1. Connecticut fiduciary adjustment from Schedule CT-1041B, Part 1, Column 5	▶ 1.	00	▶	00
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Part II - Connecticut-Sourced Portion of Items

		From federal Schedule K-1		Connecticut-sourced portion
1. Interest income	1.	00	▶	00
2a. Ordinary dividends	2a.	00	▶	00
2b. Qualified dividends	2b.	00	▶	00
3. Net short-term capital gain	3.	00	▶	00
4a. Net long-term capital gain	4a.	00	▶	00
4b. 28% rate gain	4b.	00	▶	00
4c. Unrecaptured section 1250 gain	4c.	00	▶	00
5. Other portfolio and nonbusiness income	5.	00	▶	00
6. Ordinary business income	6.	00	▶	00
7. Net rental real estate income	7.	00	▶	00
8. Other rental income	8.	00	▶	00
9. Directly apportioned deductions (attach statement)	9.	00	▶	00

Part III - Schedule CT-IT Credit

1. Qualified small business tax credit	1.	00	▶	00
2. Job expansion tax credit	2.	00	▶	00
3. Angel investor tax credit	3.	00	▶	00
4. Insurance Reinvestment fund credit	4.	00	▶	00

Form CT-1041 K-1T

Transmittal of Schedule CT-1041 K-1, Beneficiary's Share of Certain Connecticut Items

2012

For DRS use only - - 20

For calendar year 2012 or other taxable year beginning _____, 2012, and ending _____, 20__.

Complete this form in blue or black ink only.

Trust and Estate Information

Name of trust or estate ▶	Federal Employer Identification Number (FEIN) ▶	
Name and title of fiduciary ▶		
Address of fiduciary ▶	Number and street address	PO Box
City or town ▶	State	ZIP code

Part 1 - Schedule CT-1041 K-1s Submitted

1. Total number of Schedule CT-1041 K-1s submitted with this Form CT-1041 K-1T ▶	1.	
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Part 2 - Number of Beneficiaries

1. Resident Individuals ▶	1.	
2. Nonresident individuals ▶	2.	
3. Resident trusts or estates ▶	3.	
4. Nonresident trusts or estates ▶	4.	

Part 3 - Summary of Schedule CT K-1 Information

1. Total Connecticut-sourced income (individuals) ▶	1.	00
2. Total Connecticut-sourced income (trusts or estates) ▶	2.	00

Attach **Schedule CT-1041 K-1, Beneficiary's Share of Certain Connecticut Items**, to Form CT-1041 K-1T and **mail to:**

Department of Revenue Services
 State of Connecticut
 PO Box 150440
 Hartford CT 06115-0440

Declaration: I declare under the penalty of law that I have examined this return (including any accompanying schedules and statements) 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.

Sign Here Keep a copy of this return for your records.	Signature	Date
	Title	Telephone number ()