Form CT-1040X

2003

AMENDED CONNECTICUT INCOME TAX RETURN FOR INDIVIDUALS

(Rev. 12/03) For the year January 1 - December 31, 2003, or other taxable year ▶ beginning _ _ , 2003, ending Your First Name and Middle Initial Last Name Social Security Number If a JOINT Return, Spouse's First Name and Middle Initial Last Name Spouse's Social Security Number Please Print or Home Address (number and street), Apartment Number, PO Box Your Telephone Number Type City. Town. or Post Office State ZIP Code DRS USE ONLY -20On original return: ▶ ☐ Single ► Married filing jointly/qualifying widow(er) Filing Status: ► Single ► Married filing jointly/qualifying widow(er) ► Married filing separately ► Head of household Are you amending your return as a result of federal or another state's changes? (See instructions) ► ☐ YES OR enter the date of other state's change If YES, enter the date of federal change / / You must attach a copy of the IRS audit results, federal Form 1040X, the other state's audit results or amended returns, and supporting documentation. Enter in the space below the line number for each item you are changing and give the reason for each change. Attach supporting forms and schedules for items changed. Write your name and Social Security Number on all attachments. B. Net change increase | C. Correct amount A. Original amount or as previously adjusted or (decrease) 1. Federal Adjusted Gross Income (from federal Form 1040, Line 34; Form 1040A, Line 21; Form 1040EZ, Line 4; or federal TeleFile Tax Record, Line I) 00 00 Income 00 4. Subtractions, if any (See instructions) 4 00 5. Connecticut Adjusted Gross Income (Subtract Line 4 from Line 3) 5 Residents go to Line 10; Nonresidents and Part-Year Residents go to Line 6 00 6. Enter your income from Connecticut sources from 00 Nonresidents 7. Enter the greater of Line 5 or Line 6 (If zero, go to Line 10 and and enter "0.") 00 Part-Year 8. Income Tax (From Tax Calculation Schedule, see instructions) 8 00 Residents 9. Divide Line 6 by Line 5 (If Line 6 is equal to or greater than Only Line 5, enter 1.0000.) 10. Income Tax (See instructions)......10 00 11. Credit for income taxes paid to qualifying jurisdictions (See instructions) Residents and Part-Year Residents only 11 00 00 00 13. Connecticut Alternative Minimum Tax (from Form CT-6251) 13 00 14. Add Line 12 and Line 1314 Tax 15. Credit for property tax paid on your primary residence and/or 00 00 16. Subtract Line 15 from Line 14 (If less than or equal to zero, enter "0.") ... 16 00 17. Adjusted Net Connecticut Minimum Tax Credit (from Form CT-8801) 17 00 18. Connecticut Income Tax (Subtract Line 17 from Line 16) 18 00 00 20. Total Tax (Add Line 18 and Line 19)20 00 21. Connecticut tax withheld (See instructions)21 22. All 2003 estimated Connecticut income tax payments (including any 00 overpayments applied from a prior year) and extension payments 22 Payments 23. Amounts paid with original return, plus additional tax paid 00 00 24. Total Payments (Add Lines 21, 22, and 23)24 00 00 Refund 00 27. If Line 26, Column C, is greater than Line 20, Column C, enter the amount overpaid 27 00 Amount 00 You Owe 00 30. Amount you owe with this return (Add Line 28, Column C, and Line 29, Column C) AMOUNT YOU OWE 30

SCHEDULE	1 MO	DIFICATIONS T	TO FEDERAL ADJUSTED GR	OSS INC	OME (En	ter all	amoun	ts as positi	ive numl	bers)					
	31. Interest on state and local government obligations other than Connecticut									31			00		
Additions to Federal	32. I	32. Mutual fund exempt-interest dividends from non-Connecticut state or municipal government obligations other than Connecticut											00		
		33. Special depreciation allowance for qualified property placed in service during this year									 				
Adjusted Gross Income	34. Taxable amount of lump-sum distributions from qualified plans not included in federal adjusted gross income									34			00		
(See instruction										35			00		
Page 3)	oo. Beneficiary a share of commenced hadden, adjustment (Enter only if greater than 2019)												00		
,	36. Loss on sale of Connecticut state and local government bonds									36 37					
		37. Other - specify											00		
		38. TOTAL ADDITIONS (Add Lines 31 through 37); Enter here and on Line 2, Column C, on the front of this form.								38			00		
Subtractions From Federal Adjusted Gross Income	39. Interest on U.S. government obligations								⊢	39			00		
	40. Exempt dividends from certain qualifying mutual funds derived from U.S. government obligations								⊢	40			00		
	41. Social Security benefit adjustment (See Social Security Benefit Adjustment Worksheet, Page 4)									41			00		
	42. I	42. Refunds of state and local income taxes									42				
		43. Tier 1 and Tier 2 railroad retirement benefits and supplemental annuities									43				
(See instruction	144 5	44. Special depreciation allowance for qualified property placed in service during the preceding year											00		
Page 3)		45. Beneficiary's share of Connecticut fiduciary adjustment (Enter only if less than zero)											00		
	46. (46. Gain on sale of Connecticut state and local government bonds								46			00		
	47. (47. Other - specify (Do not include out-of-state income)								47 (00		
	48. T	48. TOTAL SUBTRACTIONS (Add Lines 39 through 47); Enter here and on Line 4, Column C, on the front of this form.											00		
SCHEDULE	2 CRE	EDIT FOR INCO	ME TAXES PAID TO QUALIFYIN	NG JURISI	DICTIONS	S (See	e instruc	tions for For	m CT-10	40 or	Form (CT-1040NR/	PY)		
		CREDIT FOR INCOME TAXES PAID TO QUALIFYING JURISDICTIONS (See instructions for Form CT 49. MODIFIED CONNECTICUT ADJUSTED GROSS INCOME													
	49.	MODIFIED COI	NNECTICUT ADJUSTED GROS	SSINCON	/IE	г		49	. 1		00				
Important:		FOR EACH CO	LUMN, ENTER THE FOLLOWI	ING:		H	Name	COLUMN A	Code	Name	COL	LUMN B	de		
You must	50 5		·			-	rame		Oode	IVAITIC					
attach a copy of your return filed with the qualifying jurisdiction(s) or your credit	۱, ۱		urisdiction's name and two-letter co		au alifuina	50							1		
	''I :		ncome included on Line 49 and repo e tax return (from <i>Schedule 2 Works</i>		qualifyirig	51			00				00		
	1 1	52. Divide Line 51 by Line 49 (may not exceed 1.0000) 52 •													
) 53. 1	-	n Line 10, Column C) 53					00				00			
	ι	Multiply Line 52 I	•	54				00				00			
will be disallowed.			to a qualifying jurisdiction	55					00				00		
		•	. , , , ,	56											
		56. Enter the lesser of Line 54 or Line 55 57. TOTAL CREDIT (Add Line 56, all columns)							00				00		
		Enter here and on Line 11, Column C, on the front of this form.											00		
SCHEDULE	(Co	nnecticut Resid	ents Only) - CREDIT FOR PROP	ERTY TAX	(ES PAID	ON Y	OUR P	RIMARYR	ESIDEN	CE					
	ANI	D/OR MOTOR V	EHICLE - Failure to complete	this sch	edule co	ould	result i	in the disa	allowar	ice o	f this	credit.			
	•	COLUMN A	COLUMN B		СО	LUMN	I C	COL	UMN D		(COLUMN E			
QUALIFY	ING	NAME OF	DESCRIPTION OF PROPERT	, enter street address	LIST OR BI NUMBEF (if availab							AMOUNT PAID			
PROPER	TY	CONNECTICUT TAX TOWN OR	If primary residence, enter street If motor vehicle, enter year, make,				, , , , , , , , , , , , , , , , , , , ,		ter date(s) aid property		(Enter amount of property tax paid.)				
		DISTRICT			,				ax.)	,	P. 0 P		,		
PRIMARY Residence											58		00		
AUTO 1											59		00		
Married Filing											00				
Jointly Only -		•									60		00		
		61. TOTAL PROPERTY TAX PAID (Add all amounts for Column E)								-	61		00		
Property		62. MAXIMUM PROPERTY TAX CREDIT ALLOWED								L	62	350	00		
Tax Credit		63. Enter the Lesser of Line 61 or Line 62.									63		00		
Calculation	1 64.	64. Limitation - Enter the result from the Property Tax Credit Limitation Worksheet (See Page 5)								L	64		00		
	65.	65. Subtract Line 64 from Line 63. Enter here and on Line 15, Column C, on the front of this form.									65		00		
To ensure proper posting of your payment, write your Social Security Number(s) and											f Rev	enue Servi	ces		
										ox 2978 ord CT 06104-2978					
2003 1 01111 (71-10-1	ox on your chec	k of money order.					Н	artford (C 1 06	104-2	978			
			ve examined this return (including an												
it is true, complete, and correct. I understand that the penalty for willfully delivering a false return to DRS is a fine of not more than \$5, 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 other than the taxpayer is based on all information of which the preparer other than the taxpayer is based on all information of which the preparer other than the taxpayer is based on all information of which the preparer other than the taxpayer is based on all information of which the preparer other than the taxpayer is based on all information of which the preparer other than the taxpayer is based on the preparer other than the taxpayer is based on the preparer other than the taxpayer is based on the preparer other than the taxpayer is based on the preparer other than the taxpayer is based on the preparer other than the taxpayer is based on the preparer other than the taxpayer is based on the preparer other than the taxpayer is based on the preparer other than the taxpayer is based on the preparer other than the taxpayer is based on the preparer other than the taxpayer is based on the preparer other than the taxpayer is based on the preparer other than the taxpayer is based on the preparer other than t															
	Signati	-	Date	ar are taxpe					11011 1110	ropart	Dat		90.		
Sign Your	g. iuli	Spouse's Signature (if joint return)									Date				
	Prepare	eparer's Signature Date Telephone Number Prep					Preparer's	parer's SSN or PTIN							
copy for	()														
	irm's Name, Address, and ZIP Code														
records.															

CT-1040X Back (Rev. 12/03)