## Form CT-1040 Connecticut Resident Income Tax Return

For DRS Use Only

**2012** CT-1040

	Complete return in	n blue or black ink o	Tax	Taxpayers must sign declaration on reverse side.										
For t	he year January 1 - Decembe	er 31, 2012, or other tax	able year begin	ning:	, 2	012 and	ending:				,			
1	Filing Status - Check only Single Filing jointly for federal ar Connecticut	Filing jointly for	Filing separa federal and	Filing separat Connecticut of				Qualifying widow(er) with dependent child						
		,	Enter spou	se's name here	and SSN below									
<b>→</b>	Your Social Security Number		eck if eased	use Social Securi				Check if deceased						
aillin	Your first name		MI Last	name (If two last	names, insert a	space be	etween na	ames.)			Suffix	(Jr./Sr.)		
Print your SSN, name, mailing	If joint return, spouse's first nan	ne	MI Last	name (If two last	names, insert a	space be	etween na	ames.)			Suffix	(Jr./Sr.)		
nam or t														
ır SSN, r and citv	Mailing address (number and s	treet, apartment number, s	suite number, PO E	Box)										
ur St							1							
t you		n is two words, leave a spa	ace between the w	ords.) State	ZIP code									
Print you														
<b>→</b>	Enter city or town of residence	it different from above.		ZIP code										
	ck if you filed Form CT-2210	Check her	e if you are filing	these forms A	ttach the form	(s) to the	e front o	f the reti	urn.					
	checked any boxes on Part 1.		CT-8379	,		CT-104	IOCRC							
2	Federal adjusted gross			Line 37;		, $\vdash$		Whole	Dolla	rs Or	ıly	00		
	Form 1040A, Line 21	; or ⊢orm 1040EZ, L	ine 4			1.	,		<u> </u>			. 00		
	2. Additions to federal a		2.			Щ,			. 00					
	3. Add Line 1 and Line	2.				3.						. 00		
_	4. Subtractions from fee	deral adjusted gross	income from S	chedule 1, Lir	ne 50	4.						. 00		
<b>←</b>	5. Connecticut adjuste	ed gross income: S	ubtract Line 4	from Line 3.		5.			; 			00		
4; v;	•	Income tax from tax tables or Tax Calculation Schedule: See instructions, Page 18										00		
staple.	7. Condition in the control of the c													
ot sta 99 fo		Credit for income taxes paid to qualifying jurisdictions from <i>Schedule 2</i> , Line 59										. 00		
o not r 1099	0. 0000.000 =0	Subtract Line 7 from Line 6. If Line 7 is greater than Line 6, enter "0."										. 00		
e D	9. Connecticut alternativ	ve minimum tax from	Form CT-625	1		9.			Щ,			. 00		
her	10. Add Line 8 and Line	). Add Line 8 and Line 9.										. 00		
Clip check here. Do Do not send W-2 or '	Credit for property ta:     Complete and attach	. Credit for property taxes paid on your primary residence, motor vehicle, or both: Complete and attach <i>Schedule 3</i> on Page 4 or your credit will be disallowed.										. 00		
Clip Don	12. Subtract Line 11 from	Line 10. If less than	."		12.			]			. 00			
_	13. Total allowable credit	s from Schedule CT-	IT Credit, Part	I, Line 11		13.						. 00		
<b>←</b>	14. Connecticut income	. Connecticut income tax: Subtract Line 13 from Line 12. If less than zero,										. 00		
	15. Individual use tax from	. Individual use tax from Schedule 4, Line 69: If no tax is due, enter "0."										. 00		
	16. Add Line 14 and Line	e 15.				16.						00		

	20	12 F	orm	CT-	1040 -	Page	2 of 4		,	Your Social Securit	y Number —	•		• Ш					
17. Enter	amoun	t from	ı Lir	ne 16	6.						17.	,		,		].			
Column A Employer's federal ID No. from Box b of W-2, or payer's federal ID No. from Form 1099										lumn B wages, tips, etc.	Column C Connecticut income tax withheld								
18a								•	. 00	18a.					٦.				
-2 and 1099 formation 18b.						•	. 00	18b.					Ī.						
ormation 18c							•	. 00	18c.					Ť					
your W-2 1099 forms	18d.		Ī-					П	•	. 00	18d.					Ŧ.			
nnecticut ne tax	18e.		<b>1</b> –					П	•	. 00	18e.					Ť.			
withheld.	18f.		ī_					П	•	. 00		, ,		,		Ŧ.			
	18g.		_					П	•	. 00		] ]				Ŧ.			
		A 1 1'''						السال				J∟, 1□□				٦٠			
<ul><li>18h. Additional CT withholding from Supplemental Schedule CT-1040WH</li><li>18. Total Connecticut income tax withheld: Add amounts in Column C and enter here.</li></ul>								18h.					╡.						
You	ou <b>must complete Columns A, B, and C</b> or your with						r withholding v	will be disallowed	. 18. _	JL,L		L, L		╛.					
19. All 20	)12 esti	mated	d ta	x pay	yments	and a	any ov	erpay	ments applied	from a prior year	19.			, ,					
20. Payn	nents m	nade v	vith	Forr	n CT-1	040 E	XT (R	eques	t for extensior	of time to file)	20.					٦.			
20a. Conr	ecticut	earne	ed ir	ncom	ne tax o	credit:	From	Sche	dule CT-EITC,	Line 16.	20a.					Ī			
21. <b>Tota</b>									,		21.				Π'n	╡.			
									troot Line 17 f	rom Lino 21		1 7				÷			
									tract Line 17 f		22.	, 		,,		╡.			
					•		-	-	•	estimated tax	23.	<u> </u>		,		╡.			
						•			from Schedul or faster refun		24.	,		,					
depo		omple	eting	g Lin	es 25a	, 25b,	and 2	5c. If	you do not ele	ct direct deposit,	25.					7			
25a. Checl		25b. R			will be	issue	u by u	ebit G	25c. Acc	ount	25.					÷			
Savin	gs 🗌	n	umb	oer _			4-:-			nber									
25d. Will t									.?	ine 17	26.					7			
27. If late										C 17.	27.	] 		7		╡.			
28. If late	: Enter	inter	est.	Mult			•	• •		action of a month		] , 		,		۲.			
late,	then by	1% (	.01)	).							28.	,			닏닏	╡.			
	est on un					mated	d tax fr	om Fo	orm CT-2210:	-	29.	,		,	Щ	₫.			
30. <b>Tota</b>			_			3 thro	ugh 29	).			30.	J,		,					
Declaration: statements) a ring a false r	I declare and, to the eturn or c a paid po	e under e best d locume	r pen of my ont to	nalty o	of law that vledge are	at I hav nd belie of not m	re exami ef, it is tru nore than	ned thi	plete, and correct. , or imprisonment	any accompanying s I understand the pens for not more than five the preparer has any Date	schedules a alty for willfu years, or bo	illy th.	time teleph	one number					
Your email	address																		
Spouse's s	ignature (	if joint re	eturn	)						Date		1 7	time teleph	one number					
Paid prepa	rer's signa	ature							Date	Telephone number		● (	) parer's SSN	N or PTIN					
Firm's nan	e addres	s and a	7IP cc	nde					•	• ( )		FEIN	J						
•	.5, addie5	o, unu 2	((									' ' ' '	-						
	rty Desi	gnee	- Co	mplet	te the fo	ollowing	g to aut		DRS to contact	another person ab			dentification	on number	(DINI)				
Designed																			

2012 Form CT-1040 - Pa	nge 3 of 4	S	Your Socia ecurity Numbe		-	-		Τ
Schedule 1 - Modifications to Feder	al Adjusted G		<u> </u>	_	ns as positive	numbers.		
See instructions, Page 22.  31. Interest on state and local government obligations	other than Connec	cticut	31.				].	00
<ol> <li>Mutual fund exempt-interest dividends from non-C government obligations</li> </ol>	32.	, ,	,		].	00		
53/746\$644691464/44449644\$4!//////////////////////////////////	///////////////////////////////////////	///////////////////////////////////////	///////////////////////////////////////	//////	////////	//////	///	///
<ol> <li>Taxable amount of lump-sum distributions from quadjusted gross income</li> </ol>	ualified plans not in	cluded in federal	34.		,		].	00
85. Beneficiary's share of Connecticut fiduciary adjust	tment: Enter only if	greater than zero.	. 35.				].	00
36. Loss on sale of Connecticut state and local gover	nment bonds		36.					00
37. Domestic production activity deduction from feder	al Form 1040, Line	35	37.					00
88. Other - specify •			38.					00
89. <b>Total additions:</b> Add Lines 31 through 38. Enter	here and on Line 2	•	39.					00
0. Interest on U.S. government obligations			40.					00
1. Exempt dividends from certain qualifying mutual fund	ds derived from U.S.	government obliga	ations 41.				].	00
12. Social Security benefit adjustment: See Social Secu	ırity Benefit Adjustm	ent Worksheet, Pa	ge 24. 42.				].	00
13. Refunds of state and local income taxes			43.				].	00
14. Tier 1 and Tier 2 railroad retirement benefits and s	supplemental annui	ties	44.					00
15. 50% of military retirement pay			45.					00
l6. Beneficiary's share of Connecticut fiduciary adjust	tment: Enter only if	less than zero.	46.					00
17. Gain on sale of Connecticut state and local gover	nment bonds		47.				].	00
18. Connecticut Higher Education Trust (CHET) contr	ibutions		48.				].	00
Enter CHET account number: Do not add spaces or dashes.								
19. Other - specify: Do not include out of state income	e. •		_ 49.					00
50. <b>Total subtractions:</b> Add Lines 40 through 49. Er	nter here and on Lir	ne 4.	50.				].	00
Schedule 2 - Credit for Income Taxes F You must attach a copy of your return filed with the				sallowed.				
51. Modified Connecticut adjusted gross income			51.					00
See instructions, Page 28.		7	В	0-				
<ol> <li>Enter qualifying jurisdiction's name and two-letter code: See instructions, Page 28.</li> </ol>	Code		<ul><li>Name</li></ul>		Co	ae		
33. Non-Connecticut income included on Line 51 and								
reported on a qualifying jurisdiction's income tax return: Complete <i>Schedule 2 Worksheet</i> , Page 28.	53.		. 00				].	00
54. Divide Line 53 by Line 51. May not exceed 1.0000	54.							
55. Income tax liability: Subtract Line 11 from Line 6.	55.		. 00					00
56. Multiply Line 54 by Line 55.	56		. 00				].	00
7. Income tax paid to a qualifying jurisdiction	F7		00				]	00
See instructions, Page 29.	57.		00				<b> </b>	00
58. Enter the lesser of Line 56 or Line 57.	58					0	4:	00

	2012 Form CT-1040 - Page 4 of	4	Your Social Security Number														
Schedule 3 - Prope	erty Tax Credit See instructions Primary Residence	s, Page	29.	Aut	to 1			Auto 2									
Name of Connecticut Tax Town or District	•	•						•		, ,	(-	,, , ,	,				
Description of Property If primary residence, enter street address. If motor vehicle, enter year, make, and model.	•							•									
Date(s) Paid	• / / 2012	•				/ 2012		•		/	/ 20	012					
	• / 2012	•	_	_ /		/ <b>2012</b>		•	- — ,			/ 2012					
Amount Paic		00 6	1.				00	62.					00				
	id: Add Lines 60, 61, and 62.				7			63.		],		Ī.	00				
64. Maximum property ta	ax credit allowed							64.	•	3	0	0 .	. 00				
65. Enter the lesser of Lin	e 63 or Line 64.							65.	•				. 00				
	ount for your filing status and Conne s it appears on Page 30. If zero, enter							66.	•								
67. Multiply Line 65 by Lin	e 66.							67.	•				. 00				
	Line 65. Enter here and on Line 11. our return or your credit will be disall	owed.						68.					. 00				
	dual Use Tax - Do you owe Individual Use Tax Worksheet on Pa																
69a. Total use tax due at	1%: From Connecticut Individual Use	Tax W	orksheet,	Section	on A, (	Column	7.	69a.		,			. 00				
69b. Total use tax due at	6.35%: From Connecticut Individual U	Jse Tax	Workshee	et, Sed	ction B	, Colum	n 7	69b.		,			. 00				
69c. Total use tax due at	7%: From Connecticut Individual Use	Tax W	orksheet,	Section	on C, (	Column	7	69c.				<u> </u>	. 00				
69. <b>Individual use tax:</b> Enter here and on L	Add Lines 69a through 69c. If no ι ine 15.	ıse tax	is due, e	nter "	0."		•	69.		7			. 00				
Schedule 5 - Contr	ibutions to Designated Cha	arities	<b>s</b> - See r	nore i	nform	ation on	Page	e 6.									
70a. AIDS Research	7	0a.			,		. 00										
70b. Organ Transplant	7	0b.					. 00										
70c. Endangered Species	/Wildlife 7	0c.					. 00										
70d. Breast Cancer Resea	arch 7	0d.					. 00										
70e. Safety Net Services	7	0e.					. 00										
70f. Military Family Relief	Fund 7	70f.	,		, ,		. 00					,					
70. Total Contributions: A	dd Lines 70a through 70f. Enter amo	unt her	e and on	Line 2	24.		70.			, ,		Ш	. 00				
	entered on Page 3 or 4, attach si										_	DRS.					

PO Box 2976
Hartford CT 06104-2976

Make your check payable to Commissioner of Revenue Services

For all tax forms with payment:

Department of Revenue Services

For refunds and all other tax forms without payment:

Department of Revenue Services