

FORM CT-19IT

Title 19 Status Release Form

General Instructions

If you are a Title 19 recipient, you are required to file a Connecticut income tax return if you meet any of the following conditions:

1. You had Connecticut income taxes withheld; or
2. You made estimated tax payments to Connecticut; or
3. You meet the Gross Income Test (See instructions for Form CT-1040EZ, Form CT-1040 or Form CT-1040NR/PY);
4. You had a federal alternative minimum tax liability.

Complete **Form CT-19IT** and attach it to the front of your Connecticut income tax return. By completing this form you authorize the Department of Revenue Services to verify your Title 19 status for 1999 with the Department of Social Services.

Who may file Form CT-19IT?

If you meet the conditions listed below, you may file **Form CT-19IT, Title 19 Status Release Form**, to give permission to the Department of Revenue Services to verify your Title 19 status for the taxable year with the Department of Social Services:

1. You were a Title 19 recipient during the taxable year; and
2. Medicaid assisted in the payment of your long-term care in a nursing or convalescent home or under the Connecticut Home Care for Elders; and
3. You do not have the funds to pay your Connecticut income tax, or income available from future earnings to pay the tax.

First Name	Middle Initial	Last Name	Social Security Number
			____ : ____ : ____ - ____ : : :
Home Address	Number and Street	Apt. No.	PO Box
			Telephone
			()
City, Town or Post Office		State	ZIP Code
Taxable year for which I am claiming Title 19 status:			

If the recipient has given power of attorney to another person to file Connecticut income tax returns or other Connecticut tax forms on behalf of the recipient, attach a copy of the Power of Attorney form.

Signature of Recipient Named Above	Date
Signature of Person with Power of Attorney	Date
Name of Person with Power of Attorney (<i>Print or Type</i>)	