

# Form CT-1120CR

## Combined Corporation Business Tax Return

# 2007

**Enter Income Year** Beginning  , 2007, and Ending  ,

Corporation Name

Address  Number and Street  PO Box

City or Town  State  ZIP Code

<b>Parent or Designated CT Parent</b>	
Connecticut Tax Registration Number <input type="text"/>	
DRS Use Only	- <input type="text"/> - 20
Federal Employer ID Number (FEIN) <input type="text"/>	

**Check Applicable Boxes**

1.  Address Change      2. Return Status:  Initial     Final     Short Period     Amended

3. If this is a final return, has the corporation:  Dissolved     Withdrawn     Merged/Reorganized (Enter survivor's CT Tax Reg. #)

4. Federal return was filed on:  Consolidated Basis: Parent Co. Name  Parent Co. FEIN

5. Is any corporation exchanging R & D tax credits?  Yes (Attach Form CT-1120 XCH.)     No

6. Is this corporation annualizing its income?  Yes (Attach Form CT-1120I.)     No

7. Does any corporation pay, accrue, or incur interest expenses or intangible expenses, costs, and related interest expenses to a related member?  Yes (Attach Form CT-1120AB.)     No

8. Is any corporation filing Form CT-1120 PIC?  Yes (Attach Form CT-1120 PIC.)     No

**PART I - Separate Taxes of Corporations Included in the Combined Return** - If additional lines are needed, attach a worksheet. Notice is hereby given to the Commissioner of Revenue Services that the affiliated corporations listed below have elected to be included in this Combined Corporation Business Tax Return according to the provisions of Conn. Gen. Stat. §12-223a(1). **Attach Forms CT-1120CC, if applicable.**

Corporation Name	* CT Tax Registration Number	Separate Tax (Form CT-1120, Sch. C, Line 1)
1. Common Parent or Designated Connecticut Parent	— 000	00
2.	— 000	00
3.	— 000	00
4.	— 000	00
5.	— 000	00
6.	— 000	00
7.	— 000	00
8. Total Separate Taxes: Add Lines 1 through 7. Enter total here and on Part IV, Line 1.		00

\* Tax registration numbers must be included for parent and all subsidiaries.  
**ENTER the total number of corporations, including the parent corporation, in this combined return**

Check here for:  Addition of Affiliates (Attach schedule showing Affiliate Name, Connecticut Tax Registration Number, and FEIN.)  
 Deletion of Affiliates (Attach schedule showing Affiliate Name, Connecticut Tax Registration Number, and FEIN.)

**PART IV - Computation of Amount Payable**

Complete Parts I, II, III, and Schedule KC before completing Part IV.

1. Total separate taxes (Part I, Line 8) .....			00
Combined tax computation:			
2a. Tax on combined net income from Part II, Line 25, <i>Combined Total</i> column .....	2a	00	
2b. Tax on combined minimum tax base from Part III, Line 7, <i>Combined Total</i> column .....	2b	00	
2c. Tax (largest of Line 2a, Line 2b, or \$250) .....	2c	00	
2d. Tax on companies included in the combined return less one, multiplied by \$250 .....	2d	00	
2. Combined tax: Add Line 2c and Line 2d. ....			00
3. <i>Reserved for future use</i> .....			
4. Recapture of tax credits: See instructions. ....			00
5. Total combined tax: Add Line 2 and Line 4. ....			00
6. Preference tax: Subtract Line 5 from Line 1. Enter amount not less than "0" or more than \$250,000. ....			00
7. Total tax: Add Line 5 and Line 6. ....			00
8. Multiply Line 7 by 30% (.30). ....	8.	00	
9. Multiply the number of companies included by \$250. ....	9.	00	
10. Enter the greater of Line 8 or Line 9. ....			00
11. Tax credit limitation: Subtract Line 10 from Line 7. ....			00
12. Tax credits from <i>Schedule KC</i> , Part II, Line 11: <b>Do not exceed amount on Line 11.</b> .....			00
13. Balance of tax payable: Subtract Line 12 from Line 7. ....			00
14a. Paid with application for extension from Form CT-1120 EXT ....	14a	00	
14b. Paid with estimates from Forms CT-1120 ESA, ESB, ESC, and ESD	14b	00	
14c. Overpayment from prior year .....	14c	00	
14. Tax payments: Add Lines 14a, 14b, and 14c. ....			00
15. Balance of tax due: Subtract Line 14 from Line 13. ....			00
16. Add: Penalty ▶ (16a) _____ Interest ▶ (16b) _____ <b>CT-1120I</b> Interest ▶ (16c) _____			00
17. Amount to be credited to 2008 estimated tax ▶ (17a) _____ Refunded ▶ (17b) _____			00
18. <b>Balance due with this return:</b> Add Line 15 and Line 16. ....			00

**Combined  
Total**  
Enter the sum of all affiliate amounts where applicable.

<b>PART II</b>	1. <b>Form CT-1120, Schedule D</b> , Line 1 (federal taxable income (loss) before net operating loss and special deductions) .....	1	00	
	2. Interest income wholly exempt from federal tax .....	2	00	
	3. Unallowable deduction for corporation tax from <b>Form CT-1120, Schedule F</b> , Line 8 .....	3	00	
	4. Interest expenses paid to a related member from <b>Form CT-1120AB</b> , Part I A, Line 1 .....	4	00	
	5. Intangible expenses and costs paid to a related member from <b>Form CT-1120AB</b> , Part I B, Line 1 .....	5	00	
	6. <i>Reserved for future use</i> .....	6	00	
	7. <b>Total:</b> Add Lines 1 through 5. ....	7	00	
<b>ADDED</b>	8. Dividends (a) Dividends from domestic companies less than 20% owned Limited to 70% deduction (less related expenses) .....	8a	00	
	(b) Other dividends (less related expenses) .....	8b	00	
	(c) Intercorporate dividends from corporations included in this combined return .....	8c	00	
	9. Capital loss carryover (if not deducted in computing federal capital gain) Attach schedule. ....	9	00	
	10. Capital gain from sale of preserved land .....	10	00	
	11. Federal bonus depreciation recovery from <b>Form CT-1120 ATT, Schedule J</b> , Line 7 .....	11	00	
	12. Exceptions to interest add back from <b>Form CT-1120AB</b> , Part II A, Line 1 .....	12	00	
	13. Exceptions to interest add back from <b>Form CT-1120AB</b> , Part II A, Line 2 .....	13	00	
	14. Exceptions to interest add back from <b>Form CT-1120AB</b> , Part II A, Line 3 .....	14	00	
	15. Exceptions to add back of intangible expenses paid to a related member from <b>Form CT-1120 AB</b> , Part II B, Line 1 .....	15	00	
	16. Other: Attach explanation. ....	16	00	
	17. <b>Total:</b> Add Lines 8 through 16. ....	17	00	
	<b>DEDUCT</b>	18. Net income (loss): Subtract Line 17 from Line 7. <b>If 100% Connecticut, enter also on Line 20.</b> .....	18	00
		19. Apportionment fraction from <b>Form CT-1120, Schedule A</b> , Line 2. Carry to six places. ....	19	00
		20. Connecticut net income: Line 18, or Line 18 multiplied by Line 19. ....	20	00
		21. Operating loss carryover from separate return year (cannot exceed amount on Line 20. Attach schedule.) .....	21	00
		22. Net income: Subtract Line 21 from Line 20. ....	22	00
23. Operating loss carryover from combined return year from Part V, Line 10, Column D. Cannot exceed amount on Line 22. ....		23	00	
24. Income subject to tax: Subtract Line 23 from Line 22. ....		24	00	
25. <b>Tax:</b> Multiply Line 24 by 7.5% (.075). Enter on Part IV, Line 2a. ....		25	00	
<b>COMPUTATION OF COMBINED NET INCOME</b>		1. <b>Form CT-1120, Schedule E</b> , Line 6, Column C. <b>If 100% Connecticut, enter also on Line 3.</b> (See instructions.) .....	1	00
	2. Apportionment fraction from <b>Form CT-1120, Schedule B</b> , Line 2. Carry to six places. ....	2	00	
	3. Line 1, or Line 1 multiplied by Line 2 .....	3	00	
	4. Number of months covered by this return .....	4	00	
	5. Line 3 multiplied by Line 4, divided by 12 .....	5	00	
	6. Combined minimum tax base: Add all amounts on Line 5. ....	6	00	
	7. <b>Tax:</b> Multiply Line 6 by .0031 (3 1/10 mills per dollar). Enter on Part IV, Line 2b. ....	7	00	

A Enter corporation names.  
 B Enter Connecticut Tax Registration Numbers.  
 C Enter Federal Employer ID Numbers.

1. Parent or Designated CT Parent Corporation	2. Affiliate	3. Affiliate	4. Affiliate	5. Affiliate	6. Affiliate	7. Affiliate	
A							
B	- 000	- 000	- 000	- 000	- 000	- 000	- 000
C							
1.							1
2.							2
3.							3
4.							4
5.							5
6.							6
7.							7
8a.							8a
8b.							8b
8c.							8c
9.							9
10.							10
11.							11
12.							12
13.							13
14.							14
15.							15
16.							16
17.							17
18.							18
19.	0.	0.	0.	0.	0.	0.	19
20.							20
21.							21
22.							22
23.							23
24.							24
25.							25
1.							1
2.	0.	0.	0.	0.	0.	0.	2
3.							3
4.							4
5.							5
6.							6
7.							7

**Part V – Connecticut Combined Operating Loss Carryover**

	<b>Column A</b> Connecticut Apportioned Income (Loss)	<b>Column B</b> Connecticut Apportioned Loss Carryover Applied 2001 to 2006	<b>Column C</b> Carryover to 2007 Subtract Column B from Column A.	<b>Column D</b> Connecticut Apportioned Loss Carryover Applied to 2007	<b>Column E</b> Remaining Apportioned Carryover Available for 2008
1. <b>2000</b>				00	00
2. <b>2001</b>				00	00
3. <b>2002</b>				00	00
4. <b>2003</b>				00	00
5. <b>2004</b>				00	00
6. <b>2005</b>				00	00
7. <b>2006</b>				00	00
8. <b>2007</b>	<i>Reserved for future use.</i>				
9. <b>2008</b>	<i>Reserved for future use.</i>				
10. <b>Total:</b>	Add Lines 1 through 7 in Column D and Column E. Enter the result from Column D here and on Form CT-1120CR, Part II, Line 23, <i>Combined Total</i> Column. ....			00	00

**Declaration:** I declare under 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, or 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.

<b>Sign Here</b>  Keep a copy of this return for your records.	Corporate Officer's Name <i>(Print)</i>		Corporate Officer's Signature		Date	May DRS contact the preparer shown below about this return?  <input type="checkbox"/> Yes <input type="checkbox"/> No  See instructions, Page 4.
	Title		Telephone Number (    )			
	Paid Preparer's Name <i>(Print)</i>		Paid Preparer's Signature		Date	Preparer's SSN or PTIN
	Firm's Name and Address		FEIN			Telephone Number (    )

## Schedule KC — Combined Tax Credits

Attach 2007 **Form CT-1120K** for each affiliate claiming a business tax credit and enter the combined credit totals on *Schedule KC*.

### Part I - Tax Credits From 2007 Income Year

#### Part I-A Financial Institutions Tax Credit

		A Amount Applied
1.	Financial Institutions	00

#### Part I-B Tax Credits With Carryback Provisions

		A Amount Applied	B Carryback Amount
2.	Neighborhood Assistance	00	00
3.	Housing Program Contribution	00	00
4.	<i>Reserved for future use.</i>	/	/
5.	<b>Total Part I-B:</b> Add Lines 2 through 4.	00	00

#### Part I-C Tax Credits Without Carryback or Carryforward Provisions

		A Amount Applied
6.	Apprenticeship Training	00
7.	Manufacturing Facility Credit for Facilities Located in a Targeted Investment Community/Enterprise Zone	00
8.	Computer Donation	00
9.	Grants to Institutions of Higher Education	00
10.	Machinery and Equipment	00
11.	Traffic Reduction	00
12.	Displaced Worker or Displaced Electric Worker	00
13.	Service Facility	00
14.	New Jobs Creation	00
15.	<b>Total Part I-C:</b> Add Lines 6 through 14.	00

#### Part I-D Tax Credits With Carryforward Provisions

		A Carryforward Amount From Previous Income Years	B 2007 Credit Amount Claimed		C Amount Applied to Corporation Tax		D Carryforward Amount to 2008
16.	Housing Program Contribution: See instructions.	00	/	▶	00	▶	00
17.	Employer-Assisted Housing: See instructions.	00	/	▶	00	▶	00
18.	Hiring Incentive	00	00	▶	00	▶	00
19.	Clean Alternative Fuel-Vehicles, Equipment, and Related Filling or Recharging Stations	00	00	▶	00	▶	00
20.	Research and Experimental Expenditures	00	00	▶	00	▶	00
21.	Research and Development	00	00	▶	00	▶	00
22.	Fixed Capital Investment	00	00	▶	00	▶	00
23.	Human Capital Investment	00	00	▶	00	▶	00
24.	Insurance Reinvestment Fund	00	00	▶	00	▶	00
25.	Small Business Administration Guaranty Fee	00	00	▶	00	▶	00
26.	Historic Rehabilitation	00	00	▶	00	▶	00
27.	Donation of Land	00	00	▶	00	▶	00
28.	<i>Reserved for Future Use</i>	/	/	/	/	/	/
29.	Urban and Industrial Site Reinvestment	00	00	▶	00	▶	00
30.	Film Credits	00	00	▶	00	▶	00
31.	<b>Total Part I-D:</b> Add Lines 16 through 30 in Columns A through D, and enter the result in the spaces provided.	00	00	▶	00	▶	00

<b>Part I-E Electronic Data Processing Equipment Property Tax Credit</b>		<b>A</b> Carryforward Amount From Previous Income Years	<b>B</b> 2007 Credit Amount Claimed	<b>C</b> Amount Applied to Corporation Tax	<b>D</b> Carryforward Amount to 2008
32	Electronic Data Processing Equipment Property	00	00 ▶	00 ▶	00

**Part II - Total Tax Credits Applied**

1	Enter amount from <b>Form CT-1120CR</b> , Part IV, Line 11.	00
2	<b>Financial Institutions Credit:</b> Enter amount from <i>Schedule KC, Part I-A</i> , Line 1, Column A. <b>Do not exceed amount on Line 1.</b>	00
3	Creditable corporation business tax balance: Subtract Line 2 from Line 1.	00
4	<b>Tax Credits With Carryback Provisions:</b> Enter amount from <i>Schedule KC, Part I-B</i> , Line 5, Column A. <b>Do not exceed amount on Line 3.</b>	00
5	Creditable corporation business tax balance: Subtract Line 4 from Line 3.	00
6	<b>Tax Credits Without Carryback or Carryforward Provisions:</b> Enter amount from <i>Schedule KC, Part I-C</i> , Line 15, Column A. <b>Do not exceed amount on Line 5.</b>	00
7	Creditable corporation business tax balance: Subtract Line 6 from Line 5.	00
8	<b>Tax Credits With Carryforward Provisions:</b> Carryforward credits that expire first should be claimed before any credit carryforward that will expire later or not at all. Enter amount from <i>Schedule KC, Part I-D</i> , Line 31, Column C. <b>Do not exceed amount on Line 7.</b>	00
9	Creditable corporation business tax balance: Subtract Line 8 from Line 7.	00
10	<b>Electronic Data Processing Equipment Property Tax Credit:</b> Enter amount from <i>Schedule KC, Part I-E</i> , Line 32, Column C. <b>Do not exceed amount on Line 9.</b>	00
11	<b>Total Tax Credits Applied:</b> Add Part II, Lines 2, 4, 6, 8, and 10. Enter total here and on <b>Form CT-1120CR</b> , Part IV, Computation of Amount Payable, Line 12. <b>Do not exceed amount on Line 1.</b>	▶ 00

**Part III - Credit Reconciliation (If additional lines are required, attach a worksheet.)**

Column A Name of Affiliate Computing Credit	Column B Connecticut Tax Registration Number	Column C Name of Tax Credit Claimed	Column D Amount of Tax Credit Applied
			00
			00
			00
			00
			00
			00