

# Form CT-4804

For DRS Use Only

## Transmittal of Informational Returns Reported on Compact Disc (CD) For Forms W-2G, 1099-R, and 1099-MISC.

Complete this form in blue or black ink only.

1. Type of file represented by this transmittal <input type="checkbox"/> Original <input type="checkbox"/> Replacement	2. Calendar year for which CDs are submitted	3. Transmitter's Federal Employer ID Number (FEIN)
4. Name of transmitter		5. Total number of CDs in shipment
6. Company name, address, and name and title of person to contact about problem files (street, city, state, and ZIP Code)  Telephone number (      )		7. Combined total number of payer records reported

8. Payer Summary of CD Wage Informational Returns.

<b>8 A</b>	<b>Payer 1 Summary Information</b>
Name of payer	
Street address	
City	State      ZIP Code
Connecticut Tax Registration Number	
FEIN	
Type of return	
Number of 1099s or W-2Gs submitted	
Total nonpayroll amounts reported	
Connecticut tax withheld	

<b>8 B</b>	<b>Payer 2 Summary Information</b>
Name of payer	
Street address	
City	State      ZIP Code
Connecticut Tax Registration Number	
FEIN	
Type of return	
Number of 1099s or W-2Gs submitted	
Total nonpayroll amounts reported	
Connecticut tax withheld	

<b>8 C</b>	<b>Payer 3 Summary Information</b>
Name of payer	
Street address	
City	State      ZIP Code
Connecticut Tax Registration Number	
FEIN	
Type of return	
Number of 1099s or W-2Gs submitted	
Total nonpayroll amounts reported	
Connecticut tax withheld	

<b>8 D</b>	<b>Payer 4 Summary Information</b>
Name of payer	
Street address	
City	State      ZIP Code
Connecticut Tax Registration Number	
FEIN	
Type of return	
Number of 1099s or W-2Gs submitted	
Total nonpayroll amounts reported	
Connecticut tax withheld	

In general, the payer must sign the declaration below; however, an authorized agent of the payer may sign if all conditions stated on the back are met.

**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, 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.

Signature	Title	Date
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# Form CT-4804

## Instructions

Use **Form CT-4804**, *Transmittal of Informational Returns Reported on CD*, to identify the transmitter of a CD file. Complete this form in blue or black ink only. All requested information must be entered on Form CT-4804. Include **Form CT-1096**, *Connecticut Annual Summary and Transmittal of Information Returns*, **only if Connecticut tax was withheld**.

**Block 1:** Indicate whether the data in this shipment is an original or replacement file by checking the appropriate box.

**Block 2:** Enter the calendar year for which the CD files are being submitted.

**Block 3:** Enter the transmitter's FEIN.

**Block 4:** Enter the name of the transmitter. See *Declaration Requirements* below.

**Block 5:** Enter the total number of CDs included in your shipment.

**Block 6:** Enter the name and address of the company along with the name and title of the person to contact about problem files. Also enter the telephone number.

**Block 7:** Enter the combined total number of payee records being reported.

**Block 8:** Use this section to report information for up to four payers. If additional space is needed, use **Form CT-4802**, *Transmittal of Informational Returns Reported on Compact Disc (CD) Continuation*.

Only **one** type of return should be entered on a payer summary. Types of returns **must not** be intermingled. Use Form CT- 4802 to report more than four payers

**Declaration Requirements:** An agent who is a transmitter, service bureau, paying agent, or disbursing agent may sign Form CT-4804 on behalf of the payer (or other person required to file), if both conditions below are met:

1. The agent has the authority to sign the form under an agency agreement (oral, written, or implied) that is valid under state law; **and**
2. The agent signs the form and adds the caption "For: (name of payer or other person required to file)."

The authorized agent's signing of the declaration on the payer's behalf does not relieve the payer of the responsibility for filing a correct, complete, and timely Form CT-4804 with attachments, and does not relieve the payer of any penalties for not complying with those requirements.

**Substitute Forms CT- 4804 and CT- 4802:** DRS encourages the use of computer-generated substitutes for Forms CT-4804 and CT-4802. The format must include all information requested on these forms including the declaration. See *Declaration Requirements*.

**Packaging CDs for Mailing:** Send the CD with an external label on each volume (multiple volumes allowed), Form CT-4804, and Form CT-4802, if applicable, in a single box with proper packing to prevent damage. It is not necessary to use an oversized box. Mailers for CDs are available commercially. DRS is unable to return special containers.

### Checklist for Mailing Forms 1099 and W-2G Informational Returns on CD:

- Label the CD. The external label must identify:
  - 1099 or W-2G;
  - Calendar year;
  - Transmitter name and FEIN; **and**
  - Contact name and telephone number.
- Make a backup of the CD for your files in case the package sent to DRS is lost or damaged.
- Complete and attach Form CT-4804 for each CD file, or use a computer generated form with the same information. Sign and date the declaration. Keep copies of Form CT-4804 for your records.
- Use packaging that will protect the media.
- Place the following items inside each package:
  - The labeled CD;
  - A completed Form CT-4804 and Form CT-4802 (if applicable) or a computer generated facsimile; **and**
  - A completed Form CT-1096 if Connecticut tax is withheld from non-payroll amounts.

**Mailing Address:** Send your CDs in the same package with transmittal Forms CT- 4804 and CT- 4802 to:

Department of Revenue Services  
State of Connecticut  
PO Box 5081  
Hartford CT 06102-5081

If a PO Box cannot be used, send to:

Department of Revenue Services  
State of Connecticut  
Attn: Processing II, 15th Floor  
25 Sigourney St Ste 2  
Hartford CT 06106-5032

Do not enclose paper Forms 1099-MISC, 1099-R, or W-2G; or other notes.

### Forms and Publications

Forms and publications are available anytime by:

- **Internet:** Visit the DRS website at [www.ct.gov/DRS](http://www.ct.gov/DRS) to download and print Connecticut tax forms; **or**
- **Telephone:** Call **1-800-382-9463** (Connecticut calls outside the Greater Hartford calling area only) and select **Option 2** from a touch-tone phone; or call **860-297-4753** (from anywhere).

**TTY, TDD, and Text Telephone users only** may transmit inquiries anytime by calling 860-297-4911.

# Form CT-4804

## Instructions (continued)

**Instructions for Preparing an External CD Label:**

Prepare a label similar to the one shown below to identify each CD being submitted to DRS. Include the following information:

1. **Type of Filing:** Indicate if the file is original or replacement.
2. **Calendar Year:** Enter the calendar year for which the file is prepared. Only one year may be reported per file.
3. **Transmitter Name:** Enter the name of the organization transmitting this file. The entry should be the same organization recorded on the Transmitter Record (T Record) of this file.
4. **FEIN:** Enter the nine-digit Federal Employer Identification Number (FEIN) of the organization transmitting the file. The FEIN on the label should be the same as the FEIN recorded on the Transmitter Record (T Record) of the file.
5. **No. of Payers:** Enter the number of payers (A Records) on the file.
6. **No. of Payees:** Enter the number of payees (B Records) on the file.
7. **Record Length:** The only acceptable record length is 750.
8. **Volume:** For multiple volume file, enter the sequence of each and the total number of CDs for the file. (For example, Volume 1 of a two volume file would indicate **Vol. 1 of 2**; Volume 2 would indicate **Vol. 2 of 2**.)
9. **Contact Information:** Enter the name and telephone number of the person to contact about this filing.

**Example:**

1099's and W-2G CD Label		
<b>1. Type of Filing</b> <input type="checkbox"/> Original <input type="checkbox"/> Replacement	<b>2. Calendar Year</b>	
<b>3. Transmitter Name</b>		
<b>4. FEIN</b>	<b>5. No. of Payers</b>	<b>6. No. of Payees</b>
<b>7. Return Type</b> <input type="checkbox"/> 1099-MISC <input type="checkbox"/> 1099-R <input type="checkbox"/> W-2G		<b>8. Volume</b> Vol. ____ of ____
<b>9. Contact Name</b>		<b>Contact Telephone Number</b> (     )

**Glossary:**

**ASCII: American Standard Code information Interchange**—One of the acceptable character sets used for electronic processing of data.

**Block** – A number of logical records grouped and written together as a single unit on a CD.

**Byte** – A computer unit of measurement, one byte contains eight bits and can store one character.

**Calendar Year** – Generally, the year in which payments were made by a payer to a payee.

**Character** – A letter, number, or punctuation symbol.

**Character Set** – A group of unique electronic definitions for all letters, numbers, and punctuation symbols.

**Compress** – Reformat computer data in a storage or size-saving technique.

**DRS** – State of Connecticut Department of Revenue Services.

**FEIN: Federal Employer Identification Number** – A nine-digit number assigned by the Internal Revenue Services (IRS) to an organization for federal tax reporting purposes.

**File** – A file consists of one Transmitter T Record at the beginning of the file followed by Payer A Record, Payee B Records, and an end of Payer C Record after each set of B Records. The last record on the file should be the End of Transmission F Record. Nothing should be reported after the End of the Transmission F Record.

**Filer** – Person (may be payer or transmitter) submitting information to DRS.

**Filing Year** – The calendar year during which the informational returns are submitted to DRS.

**Payee** – Person or organization receiving payments from the payer or for whom an informational return must be filed. The payee includes a gambling winner or a seller or other transferor.

**Payer** – Includes the person or institution making payments or a person reporting a real estate transaction. The payer will be held responsible for the completeness, accuracy, and timely submission of files submitted to DRS.

**Transmitter** – Any person or organization submitting an electronic or CD file to DRS.