Department of Revenue Services State of Connecticut PO Box 5014 Hartford CT 06102-5014

Form CT-990T Connecticut Unrelated Business Income Tax Return

2015

(Rev. 12/15)

Complete this return in blue or black ink only.

Check and Complete All Applicable Boxes If the organization is annualizing its income check here Foreign trust Foreign trust Foreign trust Foreign trust Cher: Explain	
(Please type or print) City or town State ZIP code Federal Employer ID Number (FEIN)	
Check and Complete All Applicable Boxes	
Check and Complete All Applicable Boxes	
Change of: ☐ Mailing address ☐ Closing month (Attach explanation.) Return status: ☐ Amended return ☐ Initial return ☐ Final return ☐ If final return: ☐ Dissolved ☐ Withdrawn ☐ Merged/reorganized: Enter survivor's CT Tax Reg. Number. Type of organization: ▶☐ Corporation ▶☐ Domestic trust ▶☐ Foreign trust ▶☐ Other: Explain ☐ 1. Date unrelated trade or business began in Connecticut: ☐ 2. Nature of unrelated trade or business income activity: ☐ 3. Corporation only: Enter state of incorporation: ☐ Date of organization: ☐ Date qualified in Connecticut if not incorporated in Connecticut: ☐ — Attach a Complete Copy of Form 990-T Including all Schedules as Filed With the Internal Revenue Service ─ Computation of Income 1. Federal unrelated business taxable income from 2015 federal Form 990-T, Part II, Line 34	
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	00
	00
	<u>00</u> 00
Computation of Tax	00
	00
2. Apportionment fraction from <i>Schedule A</i> , Line 5 on back page. Carry to six places	00
	00
	00
	00
	00
Computation of Amount Payable	
1. Tax: Include surtax if applicable. See instructions	00
2. Reserved for future use	///
3. Total Tax: Enter the amount from Line 1	00
4. Tax credits from Form CT-1120K, Part III, Line 9. Do not exceed amount on Line 1	00
1.7	00
	00
	00
	00
	00
	00
	00
	00
For faster refund, use Direct Deposit by completing Lines 9c, 9d, and 9e. 9c. Checking ▶ ☐ Savings ▶ ☐	
9d. Routing number ▶ 9e. Account number ▶	—
9f. Will this refund go to a bank account outside the U.S.? ▶ ☐ Yes 9g. Bank name ▶	
	00
Visit the DRS website at Mail to: Dept. of Revenue Services, State of Connecticut, PO Box 5014, Hartford CT 06102-5014 Make check payable to: Commissioner of Revenue Services	
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	of 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, 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 knowle	,000
Name of officer or fiduciary (<i>print</i>) Signature of officer or fiduciary Date	
Sign Here Officer's email address (<i>print</i>) May DRS contact the preparer shown be	olow,
Keep a copy about this return? See instructions.	
of this Title Telephone number Telephone number No	
return for your Paid preparer's signature Date Preparer's SSN or PTIN	
records. Firm's name and address FEIN Telephone number	

		Column A		Column B		Column C	
Factor	ltem	Connecticut		Everywher	е	Divide Column A by Col Carry to six place	
	1. (a) Inventories		00		00		
	(b) Tangible property		00		00		
Property (Average value)	(c) Real property		00		00		
	(d) Capitalized rent		00		00		
	1. Total		00		00	0.	/////
Receipts	(a) Sales of tangibles		00		00	<u> </u>	
	(b) Services		00		00		
	(c) Rentals		00		00		
	(d) Other		00		00		
	2. Total		00		00	0.	
Nages, salaries, and other							
compensation	3. Total		00		00	0.	
	4. Total: Add Lines 1, 2, and 3 in	Column C.				0.	
	5. Apportionment fraction: Divide	Line 4 by number of fa	actors	used. Enter here;		_	
	on Schedule C, Line 4; and also			· · · · · · · · · · · · · · · · · · ·		0.	
	onnecticut Apportioned Operating I						
	cut net operating loss available for use in						00
2001 Connecticut net operating loss available for use in 2015 2002 Connecticut net operating loss available for use in 2015							00
	cut net operating loss available for use it						00
	cut net operating loss available for use in						00
	cut net operating loss available for use in						00
	cut net operating loss available for use in						00
	cut net operating loss available for use in			<u> </u>			00
	cut net operating loss available for use in						00
	cut net operating loss available for use in						00
	cut net operating loss available for use in			H + + + + + + + + + + + + + + + + + + +			00
	cut net operating loss available for use in			H + + + + + + + + + + + + + + + + + + +			00
	cut net operating loss available for use in			<u> </u>			00
	cut net operating loss available for use in						00
	cut net operating loss available for use in			 			00
6. Total: Add Line	es 1 through 15. Enter here and on Com Computation of Tax, Line 3	putation of Tax, Line 4. I	Do not				00
	omputation of Net Operating Loss (•			
1. Enter amount t	rom Computation of Income, Line 6, if le	ess than zero		1.			00
2. Add back spec	ific deduction from 2015 federal Form 99	90-T, Part II, Line 33		2.			00
3. Subtotal: Add I	ine 1 and Line 2			3.			00
4. Apportionment	fraction from Schedule A, Line 5			4.	0.		
5. 2015 Connecti	cut net operating loss available for carry	forward:					