

Department of Revenue Services State of Connecticut 1041 1217W 01 9999



## Form CT-1041



**Connecticut Income Tax Return for Trusts and Estates** For residents, nonresidents, and part-year residents (Rev. 12/17)

For calendar year 2017, or other taxable year beginning ► Complete the return in blue or black ink.	and ending ►
Name of trust or estate	Federal Employer Identification Number (FEIN)
Name and title of fiduciary	
Address of fiduciary Number and street	PO Box For estates only: Decedent's Social Security Number (SSN)
City, town, or post office State	te ZIP code
	For DRS
Check applicable boxes:	
► Final return	Amended return: (Attach Explanation).
► You meet the Form CT-1041 Quick-File Require See Form CT-1041 Quick-File Requirements.	Check here if you checked any of the boxes on Form CT-2210, Part 1.
Date trust was created or, for an	If estate was closed or trust
estate, date of decedent's death:	- terminated, enter date:
Check applicable box: M M - D D → Resident Estate Nonresident estate	
Resident Estate Resident estate	► Full-year resident trust ► Part-year resident trust ► Nonresident trust
Check applicable box:	
Decedent's estate Bankrup	otcy estate  Simple trust Entity is an ESBT
► Complex trust ► Pooled i	income fund Frankright Grantor type trust filing federal Form 1041
Indicate if:	
Trust was created by the will of a decedent	Inter vivos trust: Complete Question A Below.

## Resident estates or full year resident trusts, except for those that meet the Quick-File Requirements, must attach Schedule CT-1041C and, if applicable, Schedule CT-1041FA.

## Questions

Grantor name
Grantor address
City State ZIP code

B. Date on which part-year resident trusts, identified on the front of this return, became irrevocable:

(MMDDYYYY)

C. Does the trust or estate have an interest in real property or tangible personal property located in Connecticut?

No

Yes

Completed CT-1041 schedules must be attached to the back of Form CT-1041 in the following order unless the trust or estate meets the Quick-File Requirements.

- Schedule CT-1041B; 1.
- Schedule CT-1041C; 2.
- Schedule CT-1041FA; 3.
- 4. Form CT-1041 Schedule I; and
- 5. Complete copy federal 1041 return.

Also **attach** the following, if applicable:

- 1. Schedule CT-IT Credit;
- 2. Worksheet B, Worksheet for Schedule CT-IT Credit;
- 3. Schedule CT-1041 WH; and
- Copies of all income tax returns filed with qualifying 4. jurisdictions or the credit for income taxes paid to a qualifying jurisdiction will be disallowed.



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CT Tax Registration Number								

	Cor	nnecticut Income Tax Calculation			
	1.	Connecticut taxable income from Schedule CT-1041C, Line 14, or to Quick-File, s	ee		
Full-Year Resident		federal Form 1041, Line 22.	1.		.00
Only					
,	2.	Connecticut income tax: Multiply Line 1 by 6.99% (.0699).	2.		.00
Nonresident	3.	Allocated Connecticut income tax from Schedule CT-1041FA, Part 1, Line 12, for			
Part-Year		nonresident estates, nonresident trusts, or part-year resident trusts only.	3.		.00
	4	Credit for income tax paid to qualifying jurisdictions by resident estates, resident			
		trusts, or part-year resident trusts only: See instructions.	4		.00
	5.	Subtract Line 4 from Line 2 or Line 3. See instructions.	5		.00
	5.		0.		.00
Computation	6	Connecticut alternative minimum tex from Form CT 10/1. Schedule I. Bert I. Line 2	2 6		.00
ofTax	0.	6. Connecticut alternative minimum tax from Form CT-1041, Schedule I, Part I, Line 23. 6			.00
	-	Add time E and time C	-		00
	7.	Add Line 5 and Line 6.	7.		.00
	~		~		00
	8.	Total allowable credits from Schedule CT-IT Credit, Part 1, Line 11	8.		.00
	-				00
	9.	Connecticut income tax: Subtract Line 8 from Line 7.	9.		.00
	10.	Connecticut income tax withheld: Must attach Schedule CT-1041WH. See instruction	s. 10.		.00
	11.	All 2017 estimated tax payments and any overpayment applied from a prior year	11.		.00
Payments					
	12.	12. Payments made with extension request (on Form CT-1041 EXT)			.00
	13.	Total payments: Add Lines 10, 11, and 12.	13.		.00
	14.	If Line 13 is greater than Line 9, enter amount overpaid. Subtract Line 9 from Line 13.	14.		.00
	15.	Amount of Line 14 you want to be applied to the 2018 estimated tax	15.		.00
	16.	Balance of overpayment: Subtract Line 15 from Line 14.	16.		.00
	17.	Reserved for future use.	17.		
	18.	Amount to be refunded: Enter the amount from Line 16.	18.		.00
Refund or	For	faster refund, use Direct Deposit by completing Lines 18a, 18b, and 18c.			
Amount		ů, se	ccoun	t number	
Due	18a	a. Acct. type: ► Ck ► Sv. 18b.► 18c. ►			
	180	d. Refund going to a bank account outside the U.S.	18	8d. 🕨	
	19.	If Line 9 is greater than Line 13, enter the amount of tax due. Subtract Line 13 from Line 9	. 19.		.00
	20.	If late, enter penalty. See instructions.	20.		.00
	21.	If late, enter interest. See instructions.	21.		.00
		—			
	22. Interest on underpayments of estimated tax from Form CT-2210				.00
	23.	Amount due: Add Lines 19 through 22.	23.		.00







CT Tax Registration Number								

Sc	hedule A - Connecticut Fiduciary Adjustments: See instructions.			
	ditions			
	Interest on state and local government obligations other than Connecticut	1.	►	.00
2.	Mutual fund exempt-interest dividends from state or municipal government obligations other than Connecticut	2.	►	.00
	Loss on sale of Connecticut state and local government bonds: Enter as a positive number.	3.	►	.00
4.	Connecticut income tax payments deducted in determining federal taxable income prior to deductions relating to distributions to beneficiaries	4.	►	.00
5.	Other (Specify)	5.	►	.00
	Total additions: Add Lines 1 through 5.	6.	►	.00
	Interest on U.S. government obligations	7.		.00
	Exempt dividends from certain qualifying mutual funds derived from U.S. government	7.		.00
0.	obligations	8.	►	.00
9.	Gain on sale of Connecticut state and local government bonds	9.	►	.00
10.	Refunds of Connecticut income tax	10.	►	.00
11.	Other (Specify)	11.	►	.00
12.	Total subtractions: Add Lines 7 through 11.	12.	►	.00
13	Connecticut fiduciary adjustment: Subtract Line 12 from Line 6. This amount may be			
	positive or negative. Enter on Schedule CT-1041B, Part 1, Line f, Column 5.	13.	►	.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 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 of fiduciary or officer representing fiduciary	Date		Telephone number
Sign				
Here	Email address of fiduciary or officer representing fiduciary			
Keep 🏲				
a copy	Paid preparer's signature	Date		Preparer's SSN or PTIN
of this				
return for your				
records.	Firm's name, address, and ZIP code		Firm's FEIN	
			Telephone n	umber

Visit the Department of Revenue Services (DRS) Taxpayer Service Center (TSC)	<b>Taxpayer Service Center (TSC)</b> website at www.ct.gov/TSC to electronically file your return and direct tax payment or to download and	Due date for calendar year filers: April 15, 2018		
		Mail paper return to: Department of Revenue State of Connecticut, P Hartford CT 06104-2934	O Box 2934	

Taxpayers must sign declaration above.

For a faster refund choose direct deposit (Lines 18a - 18c).

