

# Form CT-4804

For DRS Use Only

## Transmittal of Informational Returns Reported Magnetically

(For Forms W-2G, 1098, 1099-R, 1099-S, and 1099-MISC)

1. Type of file represented by this transmittal  <input type="checkbox"/> Original <input type="checkbox"/> Replacement	2. Calendar year for which media are submitted	3. Transmitter FEIN
4. Name of transmitter	5. Name of person to contact regarding magnetic file  Telephone number (    )	
6. Name and address of company and name and title of person to whom problem files are to be returned (street, city, state, and ZIP)	7. Type of media submitted  <input type="checkbox"/> Magnetic Tape <input type="checkbox"/> Cartridge <input type="checkbox"/> Diskette	
	8. Total number of media in shipment	
	9. Combined total number of payee records reported	

10. Please use this section to report information for up to four payers. If additional space is needed, please use **Form CT-4802, Transmittal of Informational Returns Reported Magnetically (Continuation)**

10.	Payer Summary of Magnetic Media Wage Informational Return		
Name of Payer			
Street Address			
City	State	Zip	
Connecticut Tax Registration Number			
Federal Employer ID Number			
Type of Return			
Number of 1098s, 1099s, or W-2Gs Submitted			
Total Nonpayroll Amounts Reported			
Connecticut Tax Withheld			

10.	Payer Summary of Magnetic Media Wage Informational Return		
Name of Payer			
Street Address			
City	State	Zip	
Connecticut Tax Registration Number			
Federal Employer ID Number			
Type of Return			
Number of 1098s, 1099s, or W-2Gs Submitted			
Total Nonpayroll Amounts Reported			
Connecticut Tax Withheld			

10.	Payer Summary of Magnetic Media Wage Informational Return		
Name of Payer			
Street Address			
City	State	Zip	
Connecticut Tax Registration Number			
Federal Employer ID Number			
Type of Return			
Number of 1098s, 1099s, or W-2Gs Submitted			
Total Nonpayroll Amounts Reported			
Connecticut Tax Withheld			

10.	Payer Summary of Magnetic Media Wage Informational Return		
Name of Payer			
Street Address			
City	State	Zip	
Connecticut Tax Registration Number			
Federal Employer ID Number			
Type of Return			
Number of 1098s, 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 false statement that I have examined this transmittal, including any accompanying documents, and to the best of my knowledge and belief it is true, complete, and correct. (The penalty for false statement is imprisonment not to exceed one year or a fine not to exceed two thousand dollars, or both.)

Signature	Title	Date

## INSTRUCTIONS FOR FORM CT-4804

Use **Form CT-4804**, *Transmittal of Informational Returns Reported Magnetically*, to identify the transmitter of a magnetic media file. The Department of Revenue Services (DRS) no longer requires **Form CT-1096**, *Connecticut Annual Summary and Transmittal of Information Returns*, with Form CT-4804. However, you **must** enter all of the requested information on Form CT-4804.

### SPECIFIC INSTRUCTIONS

- 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 media are being submitted.
- Block 3:** Enter the transmitter's Federal Employer Identification Number.
- Block 4:** Enter the name of the transmitter. (*See declaration requirements listed below.*)
- Block 5:** Enter the name and telephone number of the person to contact about the magnetic files.
- Block 6:** Enter the name and address of the company, along with the name and title of the person to whom unprocessed media are to be returned. DRS will not return media that have been successfully processed.
- Block 7:** Indicate whether you are submitting data on magnetic tape, cartridge or diskette.
- Block 8:** Enter the total number of media included in your shipment.
- Block 9:** Enter the combined total number of payee records being reported.
- Block 10:** For each payer, enter the name, address, Connecticut Tax Registration Number, FEIN, type of return (1098, 1099-R, 1099-S, 1099-MISC, and W-2G), the number of payee records, total nonpayroll amounts from Connecticut sources reported, and Connecticut tax withheld.

**Transmitter Media Number:** If your organization uses an in-house numbering system to identify media, indicate the media number(s) in the appropriate blocks. If your file contains more than one medium (*for example, 1 of 5, 2 of 5, etc.*), indicate the number of the first medium only.

**Mailing Address:** Send your magnetic media in the same package with transmittal Forms CT-4804 and CT-4802 to the address below.

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

If a PO Box cannot be used, send to:

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

**Note:** Use **Form CT-4802**, *Transmittal of Informational Returns Reported Magnetically (Continuation)*, if you are reporting for more than four payers.

**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 listed below.*)

### DECLARATION REQUIREMENTS

A transmitter, service bureau, paying agent, or disbursing agent ("*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.
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.

### FORMS AND PUBLICATIONS

Forms and publications are available all day, seven days a week:

- **Internet:** Preview and download forms and publications from the DRS Web site: **[www.drs.state.ct.us](http://www.drs.state.ct.us)**
- **DRS TAX-FAX:** Call **860-297-5698** from the handset attached to your fax machine and select from the menu
- **Telephone:** Call **860-297-4753** (from anywhere), or **1-800-382-9463** (toll-free within Connecticut) and select **Option 2** from a touch-tone phone