

Form CT-1040 Connecticut Resident Income Tax Return

FOR DRS USE ONLY

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2005 CT-1040

Complete return in blue or black ink only.

Taxpayers must sign declaration on reverse side.

For the year January 1 - December 31, 2005, or other taxable year beginning: 2005 and ending:

Filing Status section with checkboxes for Single, Married filing jointly, Married filing separately, and Head of household. Includes a box for spouse name and SSN.

Personal information section including Social Security Numbers, names, and mailing address.

Checkboxes for filing preferences: 'Check here if you do not want forms sent to you next year...', 'Check here if you filed Form CT-2210 and checked any boxes on Part 1.', 'Form CT-8379', 'Schedule CT-1040CRC', and 'Check here if you are filing the following and attach the form to the front of the return.'

Table with 16 rows for tax calculations. Includes instructions like 'Federal adjusted gross income', 'Connecticut Adjusted Gross Income', and 'Connecticut Income Tax'. Columns for amounts and cents.

Due date: April 15, 2006 - Attach a copy of all applicable schedules and forms to this return.

Webfile or e-file your return for faster refund, see Page 4 of booklet.

17. Enter amount from Line 16. 17. 00

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W-2, W-2G, and 1099 Federal Identification Information

Table with 3 columns: Column A (Employer's federal ID No.), Column B (Connecticut Wages, Tips, etc.), and Column C (Connecticut Income Tax Withheld). Rows 18a-18g.

18h. Enter amount from Supplemental Schedule CT-1040WH, Line 3. 18h. 00

18. Total Connecticut Income Tax Withheld (Add amounts in Column C and enter here.) 18. 00

19. All 2005 estimated tax payments and any overpayments applied from a prior year 19. 00

20. Payments made with Form CT-1040 EXT (Request for extension of time to file) 20. 00

21. Total Payments (Add Lines 18, 19, and 20.) 21. 00

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22. Overpayment (If Line 21 is more than Line 17, subtract Line 17 from Line 21.) 22. 00

23. Amount of Line 22 you want applied to your 2006 estimated tax 23. 00

24. Total Contributions of Refund to Designated Charities (From Schedule 5, Line 70) 24. 00

25. Refund (Subtract Lines 23 and 24 from Line 22.) For faster refund, use Direct Deposit by completing Lines 25a, 25b, and 25c. 25. 00

25a. Type: checking savings 25b. Routing Number 25c. Account Number

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26. Tax Due (If Line 17 is more than Line 21, subtract Line 21 from Line 17.) 26. 00

27. If Late: Enter penalty (Multiply Line 26 by 10% (.10).) 27. 00

28. If Late: Enter interest (Multiply Line 26 by number of months or fraction of a month late, then by 1% (.01).) 28. 00

29. Interest on underpayment of estimated tax (From Form CT-2210, see instructions, Page 17.) 29. 00

30. Total Amount Due (Add Lines 26 through 29.) 30. 00

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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.

Signature section table with columns for Signature, Date, Telephone Number, SSN/PTIN, and FEIN.

Third Party Designee - Complete the following if you wish to authorize DRS to contact another person about this return. Designee's Name Telephone Number Personal Identification Number (PIN)

Schedule 1 - Modifications to Federal Adjusted Gross Income (Enter all items as positive numbers.)

(See Instructions, Page 18.)

Table with 50 rows for Schedule 1. Rows include interest on state and local government obligations, mutual fund dividends, allocated for future use, taxable amount of lump-sum distributions, beneficiary's share of Connecticut fiduciary adjustment, loss on sale of bonds, other - specify, total additions, interest on U.S. government obligations, exempt dividends, social security benefit adjustment, refunds of state and local income taxes, tier 1 and tier 2 railroad retirement benefits, special depreciation allowance, beneficiary's share of Connecticut fiduciary adjustment (less than zero), gain on sale of bonds, allocated for future use, other - specify (Do not include out of state income), and total subtractions.

Schedule 2 - Credit for Income Taxes Paid to Qualifying Jurisdictions

(You must attach a copy of your return filed with the qualifying jurisdiction(s) or your credit will be disallowed.)

Table for Schedule 2 with 59 rows. Row 51: Modified Connecticut adjusted gross income. Row 52: Qualifying jurisdiction's name and two-letter code. Row 53: Non-Connecticut income included on Line 51. Row 54: Divide Line 53 by Line 51. Row 55: Income tax liability. Row 56: Multiply Line 54 by Line 55. Row 57: Income tax paid to a qualifying jurisdiction. Row 58: Enter the lesser of Line 56 or Line 57. Row 59: Total Credit (Add Line 58, all columns.).

Schedule 3 - Property Tax Credit Worksheet

Qualifying Property	Primary Residence	Auto 1	Auto 2 (Married Filing Jointly Only)
Name of Connecticut Tax Town or District	•	•	•
Description of Property If primary residence, enter street address. If motor vehicle, enter year, make, and model.	•	•	•
Date(s) Paid (See instructions, Page 26.)	• __ / __ / 2005 • __ / __ / 2005	• __ / __ / 2005 • __ / __ / 2005	• __ / __ / 2005 • __ / __ / 2005
Amount Paid	60. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00	61. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00	62. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00
63. Total Property Tax Paid (Add Lines 60, 61, and 62.)			63. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00
64. Maximum Property Tax Credit Allowed			64. • 3 5 0 . 00
65. Enter the lesser of Line 63 or Line 64.			65. • <input type="text"/> . 00
66. Enter the decimal amount for your filing status and Connecticut AGI from the Property Tax Credit Table exactly as it appears on Page 27. (If zero, enter amount from Line 65 on Line 68.)			66. • <input type="text"/> . <input type="text"/>
67. Multiply Line 65 by Line 66.			67. • <input type="text"/> . 00
68. Subtract Line 67 from Line 65. Enter here and on Line 11.			68. <input type="text"/> . 00

Schedule 4 - Individual Use Tax Worksheet

Complete this worksheet to calculate your Connecticut individual use tax liability.

Column A	Column B	Column C	Column D	Column E	Column F	Column G
Date of purchase	Description of goods or services	Retailer or service provider	Purchase price	CT tax due (.06 X Column D)	Tax, if any, paid to another jurisdiction	Balance due (Column E minus Column F but not less than zero)
•						
•						
•						
•						
•						
• Total of individual purchases under \$300 not listed above						

69. Individual Use Tax (Add all amounts for Column G.) Enter here and on Line 15. • 69. . 00

Schedule 5 - Contribution Worksheet

70a. AIDS Research	70a. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70b. Organ Transplant	70b. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70c. Endangered Species/Wildlife	70c. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70d. Breast Cancer Research	70d. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70e. Safety Net Services	70e. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70f. Military Family Relief Fund	70f. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70. Total Contributions (Add Lines 70a through 70f; enter amount here and on Line 24.)	• 70. <input type="text"/> . 00

Use envelope provided, with correct mailing label, or mail to:

<p>For refunds and all other tax forms without payment: Department of Revenue Services PO Box 2976 Hartford CT 06104-2976</p>	<p>For all tax forms with payment: Department of Revenue Services PO Box 2977 Hartford CT 06104-2977</p>
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Make your check or money order payable to: **Commissioner of Revenue Services**

To ensure proper posting, write your SSN(s) (optional) and "2005 Form CT-1040" on your check or money order.