## Form CT-1040 Connecticut Resident Income Tax Return

FOR DRS USE ONLY CT-1

			Complete return in blue or black ink only.  Taxpayers must s	ign	dec	lara	ition	on	rev	erse	side		
Fo	r the	e ye	ear January 1 - December 31, 2006, or other taxable year beginning:, 20	006	and e	ndin	ıg:						
1		Fili	ng Status Single Married Civil union filling jointly  Civil union filling jointly  Married filing separately  Civil union filling separately	Head of Qualifying widow(er with dependent child									
			(Enter spouse's name here and SSN below.	•									
		You	r Social Security Number Check if Spouse Social Security Number Check deceased										
-	7	You	r First Name MI Last Name (If two last names, insert a	a spa	ce be	twee	n nam	nes.)			Suff	x (Jr.	/Sr.)
Label Here		If Jo	oint Return, Spouse's First Name MI Last Name (If two last names, insert	a spa	ce be	twee	n nam	nes.)			Suff	x (Jr.	/Sr.)
<u> </u>	Ħ												
ape	Print	Mai	ling Address (number and street, apartment number, suite number, PO Box)										
Ce l	o			H									
Place		City	Town, or Post Office (If town is two words, leave a space between the words.)  State  ZIP Code										
-	<b>+</b>				-								
_							01		•				
	to	yo	k here if you do not want forms sent u next year. (This does not relieve of your responsibility to file.)  Check here if you filed Form CT-2210 and checked any boxes on Part 1.				follow	ving	and	attac	are filir h the		
			any some on the many	-104	IUCK	<u> </u>	the fr			e ret ars (			—
2		1.	Federal adjusted gross income (From federal Form 1040, Line 37; Form 1040A, Line 21; or Form 1040EZ, Line 4)	1.								٦.[	00
•	- 2	2.	Additions to federal adjusted gross income (From <i>Schedule 1</i> , Line 39)	2.									00
not staple.)	:	3.	Add Line 1 and Line 2.	3.		ī			Π			īï	00
stap	ιġ	4.	Subtractions from federal adjusted gross income (From <i>Schedule 1</i> , Line 50)	4.		T						= '	00
5	Ξ					_				, <u>                                     </u>		= :	
0	၈	5.	Connecticut Adjusted Gross Income (Subtract Line 4 from Line 3.)	5.		4	,			,[		= : ;	00
9	1 9 9	6.	Income Tax (From Tax Tables or Tax Calculation Schedule. See instructions, Page 14.)	6.			,			<u>,                                    </u>		إ٠إ	00
ere	ō		Credit for income taxes paid to qualifying jurisdictions (From Schedule 2, Line 59)	7.			,			,		ا.ا	00
erh	ġ,	8.	Subtract Line 7 from Line 6. (If Line 7 is greater than Line 6, enter "0.")	8.			, 🔲			, 🔲		<u></u>	00
zd	2, W-2G,	9.	Connecticut Alternative Minimum Tax (From Form CT-6251)	9.								].[	00
ey	<b>N-2</b>	10.	Add Line 8 and Line 9.	10.								٦.[	00
k or mon	send \	11.	Connecticut Alternative Minimum Tax (From Form CT-6251)  Add Line 8 and Line 9.  Credit for property taxes paid on your primary residence, motor vehicle, or both (From <i>Schedule 3</i> , Line 68)  Subtract Line 11 from Line 10. (If less than zero, enter "0.")	11.								].[	00
	ğ	12.	Subtract Line 11 from Line 10. (If less than zero, enter "0.")	12.								٦.[	00
chec	ے 0	13.	Adjusted Net Connecticut Minimum Tax Credit (From Form CT-8801)	13.									00
Clip c		14.	Connecticut Income Tax (Subtract Line 13 from Line 12. If less than zero, enter "0.")	14.		ī							00
<u>ี</u>			Individual Use Tax (From <i>Schedule 4</i> , Line 69. If no tax is due, enter "0.")	15.								= :	00
•			Add Line 14 and Line 15.	16.								= ;;	00

	17. Ent									Security	/ INUITIDE	71								
2		17. Enter amount from Line 16.								17.						00				
3	Column A  Employer's federal ID No. from Box b of W-2, or Payer's federal ID No. from W-2G, or 1099  Column B  Connecticut Wages, Tips, etc.										Column C Connecticut Income Tax Withheld									
W-2, W-2G,	18a.		-						•	. 00	18a.						00			
and 1099 Information	18b.	ī.	-						•	. 00	18b.						00			
(Only enter information	18c.	₩.	_						•		18c.						00			
from your W-2,		₩.							•		18d.						00			
W-2G, and 1099 forms if	18d.		H												,		≓:			
Connecticut income tax	18e.	#	Ļ						•		18e.		_,		,		. 00			
was withheld.)	18f.	Ш						Ш	•	. 00	18f.						. 00			
	18g.		-						•	. 00	18g.						. 00			
	18h. E	nter a	moui	nt fro	m Su	ppler	nenta	al Sc	hedule CT-1040	WH, Line 3.	18h.						. 00			
							•		ounts in Column ( vithholding will		) 18.						. 00			
19 All 20	06 estima	- ated ta	ax na	vmei	nts an	d an	v ove	rnav	ments applied f	om a prior vear	19.						00			
			-	-							20.		7		7,-		00			
•	0. Payments made with Form CT-1040 EXT (Request for								ist for extension	or time to file)		7'-				00				
21. <b>Total</b>	Paymen	ts (Ac	ld Lir	ies 1	8, 19,	and	20.)				21						=:=			
4 22. Overp	<ol> <li>Overpayment (If Line 21 is more than Line 17, subtract Line 17 from Line 21.)</li> <li>Amount of Line 22 you want applied to your 2007 estimated tax</li> </ol>								rom Line 21.)	22.				,		. 00				
23. Amou										23.						. 00				
24. Total (	24. Total Contributions of Refund to Designated Charities (From Schedule 5, Line 70)									) 24.		,				. 00				
	<b>Refund</b> (Subtract Lines 23 and 24 from Line 22.) For faster refund, use Direct Deposit by completing Lines 25a, 25b, and 25c.							25.						00						
For ra 25a.Type: check		na, us b. Ro		rect	Depos	sit by	com	pieti	ng Lines 25a, 2		25.		, ][]		,					
savi	ngs	Nu	mber						Num	ber			<u> </u>		<u> </u>		<del>   </del>			
5 26. Tax D	Tax Due (If Line 17 is more than Line 21, subtract Line 21 from Line 17.)								26.				,		. 00					
27. If Late	<ul> <li>27. If Late: Enter penalty (Multiply Line 26 by 10% (.10).)</li> <li>28. If Late: Enter interest (Multiply Line 26 by number of months or fraction of a mor late, then by 1% (.01).)</li> <li>29. Interest on underpayment of estimated tax</li> </ul>										27.						. 00			
										ction of a month	1 28.						. 00			
											29.						00			
•	Form C						•	•			30.		77		7,-		00			
30. Total		•							ned this return (inc	Judio a ony o o o o							<u> </u>			
schedules I understa than \$5,00 other than Your Signa	and state nd the pe 00, or imp the taxpa	ments) nalty fo risonm	and, or will ent fo	to the fully or not	e best o leliveri more	of my ng a than f	knowl false i five ye	ledge retur ears,	e and belief, it is true of a comment to or both. The declich the preparer h	ue, complete, and DRS is a fine of r aration of a paid p	correct. ot more preparer		Daytime	Telepho	ne Numb	oer	-			
Spouse's S	's Signature (if joint return)  Date								•	Daytime Telephone Number										
your I									•	(	)									
Spouse's S Spouse's S Paid Prepa	arer's Signat	ure							Date	Telephone Number			Preparer	r's SSN o	r PTIN					
σ Finns's Non	ne, Address,	and ZIF	<sup>2</sup> Code							[( )			FEIN							
	rd Party signee's N		gnee	- Co	mplet	e the	follo	wing	if you wish to a		contac	ct ar				t this re				
	-								• schedules or				•		_					

Form CT-1040 - I	•	Your Soc Security Numl		<u> </u>		
Schedule 1 - Modifications to		•		II items as posi	tive numbers	i.)
(See Instructions, Page 18.) 31. Interest on state and local government obligations other	-	31.				00
32. Mutual fund exempt-interest dividends from non-Con				,, , , , , , , , , , , , , , , , ,		
government obligations	noodod olde of maniopal	32.		,,		. 00
33. Allocated for future use		<b> </b> ///•/33./				
<ol> <li>Taxable amount of lump-sum distributions from qualif adjusted gross income</li> </ol>	34.		$,$ $\square$ $\square$ $\square$ $,$ $[$		. 00	
35. Beneficiary's share of Connecticut fiduciary adjustm	35.		,		. 00	
36. Loss on sale of Connecticut state and local governm	ent bonds	36.		,,		. 00
37. Allocated for future use		/////•/37/				
38. Other - specify <u>●</u>		38.				. 00
39. Total Additions (Add Lines 31 through 38.) Enter h	ere and on Line 2.	39.				. 00
40. Interest on U.S. government obligations		40.		$,$ $\Box$ $\Box$ $,$ $[$		. 00
41. Exempt dividends from certain qualifying mutual funds	derived from U.S. government obligation	ons 41.				. 00
42. Social Security benefit adjustment (See Social Securi	20.) 42.				. 00	
43. Refunds of state and local income taxes		43.				. 00
44. Tier 1 and Tier 2 railroad retirement benefits and supp	44.				. 00	
45. Special depreciation allowance for qualified property	r(s) 45.				. 00	
46. Beneficiary's share of Connecticut fiduciary adjustm	46.				. 00	
47. Gain on sale of Connecticut state and local government	47.		$,$ $\square$ $\square$ $,$ $[$		. 00	
48. Connecticut Higher Education Trust (CHET) contrib	48.		,		. 00	
Enter CHET account number: (can be up to 14 digits)						
49. Other - specify (Do not include out of state income.)	•	49.		,,		. 00
50. Total Subtractions (Add Lines 40 through 49.) Ent	er here and on Line 4.	50.		,, ,		. 00
Schedule 2 - Credit for Income Taxes (You must attach a copy of your return filed with to			oe disallo	owed.)		
51. Modified Connecticut adjusted gross income		51.		,,		. 00
(See instructions, Page 24.)	Column A  • Name	Code		Columi  Name		Code
<ol> <li>Enter qualifying jurisdiction's name and two-letter code (See instructions, Page 24.)</li> </ol>	52.			- ramo		
53. Non-Connecticut income included on Line 51 and						
reported on a qualifying jurisdiction's income tax return (Complete Schedule 2 Worksheet, Page 23.)	53.	00				00
54. Divide Line 53 by Line 51. (May not exceed 1.0000)	54.					-
55. Income tax liability (Subtract Line 11 from Line 6.)	55	. 00		$,$ $\square$ $\square$ $,$ $\square$		. 00
56. Multiply Line 54 by Line 55.	56	. 00		,		. 00
57. Income tax paid to a qualifying jurisdiction (See instructions, Page 25.)	57.	00				00
58. Enter the lesser of Line 56 or Line 57.	58.	. 00				00
59. Total Credit (Add Line 58, all columns.) Entr				00		-
	cable schedules on Form (	CT-1040 -	Page 4			

	Form C1-	1040 - Page 4					ty Num		•		] - [		- 🔲				
		x Credit Workshe	et (Se				ge 25.			Au	ito 2						
Qualifying Property	Residence			Auto 1				(Joint returns or Qualifying Widow(er) 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	• /_	/ 2006 •			/	/ 2	006		•		/_		/ 2006				
	• /_	/ 2006 •			/	_ / 2	006		•	_	_ /_	- —	/ 200	)6			
Amount Paid	60.	00	61.					00	62.					١.	00		
63. Total Property Tax Page 1	aid (Add Lines 60,	61, and 62.)							63.					Ī.	00		
64. Maximum Property	Tax Credit Allowe	ed							64.	•		1,	500	(	00		
65. Enter the lesser of Line	e 63 or Line 64.								65.	•					00		
66. Enter the <b>decimal am</b>	ount for your filing	status and Connecticut A	AGI fron	n the P	ropert	y Tax C	redit Ta	able									
		enter the amount from L							66.	•			.Ш				
67. Multiply Line 65 by Line	e 66.								67.	•				╛.	00		
68. Subtract Line 67 from	Line 65. Enter here	and on Line 11.							68.						00		
Schedule 4 - Individ	dual Use Tax \																
Complete this worksheet			use ta	ıx liabi	lity.												
Column A C	Column B	Column C	Column D Column E					E		olum	Column G						
	• • • • • • • • • • • • • • • • • • • •					Purchase CT tax due (.06 X Column D					any, to er tion	(C	(Column E minus Column F but not less than zero)				
•									juii	30101		16	55 IIIai	11 26	10)		
•																	
•																	
•																	
•																	
Total of individual purcl	hases under \$300 r	not listed above															
69. Individual Use Tax	(Add all amoun	ts for Column G.) Ent	er her	e and	on Li	ne 15		•	69.			], 🔲			00		
Schedule 5 - Contr	ibution Work	sheet															
70a. AIDS Research		70a.						00									
70b. Organ Transplant		70b.					П.	00									
70c. Endangered Species/\	Vildlife	70c.			īT.		П.	00									
70d. Breast Cancer Resea	rch	70d.					1	00									
70e. Safety Net Services		70e.						00									
70f. Military Family Relief F	und	70f.						00									
70. Total Contributions (A	dd Lines 70a throug	h 70f; enter amount here	and or	n Line 2	24.)		•	70.		],[		],[			00		
		Jse envelope provided, w			iling lab	oel, or i	mail to:						]				
Depar	unds and all oth tment of Revenue ox 2976	er tax forms without e Services	paym	ent:		Depa		t of	<b>s with</b> Reven		<b>ment</b> : Service	:S					