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

Form CT-990T Connecticut Unrelated Business Income Tax Return

2008

(Rev. 12/08)

Complete this return in blue or black ink only.

Enter inc	ome year beginni	ng ►	, 2008, a	and ending ►			
DRS use only	Organization name	(please type or print)		•	CT Tax	Registration Nu	ımber
Audited by	Address	number and street	PO Box		DRS u	se only	- 20
□∘	City or town		State	ZIP code	Federa	ıl Employer ID Nu	
Init	l Complete All Appl	iachla Daves		<u> </u>	·		
	I Complete All Appl	11 110		lizing its income check h			
		Closing month (Attach exp					turn
		Withdrawn Merged/reorg					
		oration Domestic trus					
		ness began in Connecticut: business income activity:					
		te of incorporation:			n·		
-	-	incorporated in Connecticut		Date of organizatio	11.		
Date qualifie		·		Fil- d Wide de - I-d			
Computat	ion of Income	olete Copy of Form 990-T l	nciuding all Schedule	s as Filed With the Inter	nai Reve	enue Service –	
		axable income from 2008 fe	deral Form 990-T Part	II Line 34	▶ 1		00
		eduction from 2008 federal F					00
		cticut tax on unrelated busin			-		00
1					-		00
		nent of Connecticut tax inclu					00
		ncome: Subtract Line 5 from			-		00
Computati			-				100
		ncome from Line 6 above. It	f 100% Connecticut, e	enter also on Line 3	▶ 1		00
2. Apport	onment fraction from	Form CT-990T, Schedule A	Line 5. Carry to six pla	aces	▶ 2	0.	'
3. Conne	cticut unrelated busine	ess taxable income: Line 1 o	r Line 1 multiplied by L	ine 2	▶ 3		00
4. Operat	ing loss carryover fror	n Form CT-990T, Schedule	B, Line 9		▶ 4		00
5. Income	subject to tax: Subtra	act Line 4 from Line 3			▶ 5		00
6. Tax: M	ultiply Line 5 by 7.5%	(.075)			▶ 6		00
	on of Amount Paya						
	•	x, Line 6					00
		from Line 1					00
		120K, Part III, Line 9. Do no					00
		tract Line 4 from Line 3. If ze					00
		ension from Form CT-990T I					00
		rms CT-990T ESA, ESB, ES					00
		r					00
		tal of Lines 6a, 6b, and 6c					00
		d): Subtract Line 6 from Line					00
	enalty ►(8a)	00 Interest ►(8b) 09 estimated tax ►(9a)					00
		rn: Add Line 7 and Line 8					00
10. Balani	se due with this retu	n: Add Line / and Line o			10		00
Make check	payable to: Commiss	ioner of Revenue Services	. Attach check to return	with paper clip. Do not stap	le.		
Mail to: Dep	partment of Revenue Se	ervices, State of Connecticut,	PO Box 5014, Hartford (CT 06102-5014			
Declaratio	n: I declare under p	enalty of law that I have ex	camined this return (ir	ncluding any accompany	ing sche	edules and staten	nents) and, to
		elief, it is true, complete, a					
		Services (DRS) is a fine of					or both. The
ucciaialiUII	Signature of officer or f	ther than the taxpayer is ba	aseu on an inionnalio	Date	ias ally	May DRS contact the	a nrangrar
Cian Hara	Signature of officer of i	lauciary		Date		shown below about	
Sign Here	Title			Talanhana numbar		See instructions.	inio retarri:
Кеер а сору	Title			Telephone number		☐ Yes	□ No
of this	Dold numerous starts			Data /			
return for your	Paid preparer's signatu	re		Date		Preparer's SSN o	OT PIIN
records.	Firm's name and addre	SS		FEIN		Telephone number	er

Schedule A — Unrelated Business Income Apportionment: See instructions.

Complete this schedule if the taxpayer's unrelated trade or business is conducted at a regular place of business outside Connecticut.

Factor	ltem	Column A Connecticut			Column B Everywhere		Column C Divide Column A by Column B. Carry to six places	
	1. (a) Inventories		00			00		
Property	(b) Tangible property		00			00		
(Average value)	(c) Real property		00			00		
(Average value)	(d) Capitalized rent		00			00		
	1. Total		00			00	0.	/////
	2. (a) Sales of tangibles		00			00		
	(b) Services		00	00		00		
Receipts	(c) Rentals		00			00		
·	(d) Other		00			00		
	2. Total		00			00	0.	//////
Wages, 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 on Schedule C, Line 4; and als	Line 4 by number of fac					0.	
Schedule B — Conn	ecticut Apportioned Operating Loss	1 0 1						
1. 2000 Connecticut ne	2000 Connecticut net operating loss available for use in 2008							00
2. 2001 Connecticut ne	t operating loss available for use in 2008				2			00
3. 2002 Connecticut net operating loss available for use in 2008								00
4. 2003 Connecticut net operating loss available for use in 2008								00
5. 2004 Connecticut net operating loss available for use in 2008								00
6. 2005 Connecticut net operating loss available for use in 2008								00
7. 2006 Connecticut ne	7. 2006 Connecticut net operating loss available for use in 2008							00
8. 2007 Connecticut ne	2007 Connecticut net operating loss available for use in 2008							00
9. Total: Add Lines 1 th	7. Total: Add Lines 1 through 8. Enter here and on Computation of Tax, Line 4							00
Schedule C — Comp	outation of Net Operating Loss Carry	forward						
1. Enter amount from C	. Enter amount from Computation of Income, Line 6, if less than zero.							00
2. Add back specific de	Add back specific deduction from 2008 federal Form 990-T, Part II, Line 33							00
3. Subtotal: Add Line 1	. Subtotal: Add Line 1 and Line 2.							00
4. Apportionment fraction from Schedule A, Line 5						0.		
5. 2008 Connecticut net operating loss available for carryforward: Multiply Line 3 by Line 4								00