Department of Revenue Services State of Connecticut

Form CT-1120 Corporation Business Tax Return

2009

(Rev. 12/09)

E	nter	r Income Year Beginning ▶		2009, and Ending ► _		,
Total assets		Corporation name			Federal Employ	yer ID Number (FEIN)
>	00			▶	-	
Amount from federal Form 1120, Line 11: See		Ni washa wa analatwa at		DO Pay	DDC use only	
Schedule C, Line 1b below		Number and street		PO Box	DRS use only	
					_	– 20
NAIDO 1 0 1 1 1	00	City or town	State	ZIP code	CT Tax Registr	ration Number
NAICS code: See instruction	ns.				•	
Check and Comp	olet	e All Applicable Boxes		Visit w	ww.ct.gov/TS	C www.ct.gov/DRs
1. Address char	nge				and pay this	TSA
2. Return status:	Initi	ial 🔲 Final 🔲 Short period			electronically.	Taxpayer Service Center
		has the corporation: Dissolved nized: Enter survivor's CT Tax Registrati	►☐ Withdra	ıwn	·	Selvice 2
4. Federal return wa	s file		Other:			
					_	
•		xchanging R & D tax credits? ►□	`	•	No No	_
		cluded in a CT combined or unitary busing electing or revoking combined or unitary				►
		ed in a CT combined or unitary business to CT-1120CR or Form CT-1120U.)	ax return for this y	/ear?		
		of business located in CT? ▶☐ Yes				
		re principal place of business is located				
Date of organizati	on _	Date qualified in	CT	Date business I	began in CT	
Is this corporation	exe	empt from CT corporation business tax?	Yes (Attach	explanation of exempt	tion including sta	atutory cite.) 🔲 No
10. Did this corporation	n us	se the annualized method to calculate its	s estimated tax ir	nstallments? ► ☐ Ye	s (Attach Form	CT-1120I.)
· ·		pay, accrue, or incur interest expenses (Attach Form CT-1120AB .) No	or intangible exp	enses, costs, and relat	ted interest expe	enses to a related
		g Form CT-1120 PIC? ►☐ Yes (Attac	ch Form CT-112	0 PIC.) □ No		
·		Complete Copy of Form 1120 Including Complete Schedule C a	g All Schedules	as Filed With the Inte	ernal Revenue	Service.
Schedule C - Co	mn	outation of Amount Payable (Min				
		e A, Line 6; Schedule B, Line 6; or \$250		00		<i>'''''</i>
		d by 10%. If federal Form 1120, Line 11 is	la		<u>'</u>	
		or Line 1a is \$250 enter "0."	▶ 1b	00	ο ////////	
1c. Recapture of tax cre	edits:	: See instructions	▶ 1c	00	5 ///////	
1. Total tax: Enter the	e tot	al of Lines 1a through Line 1c. If no tax cr	edits claimed, en	iter also on Line 6	. 1	00
2. Multiply Line 1 by 3	0% ((0.30)			- 2	00
3. Enter the greater of	Line	e 2 or \$250		>	3	00
4. Tax credit limitation:	: Sul	btract Line 3 from Line 1		>	- 4	00
5. Tax credits from Fo	rm (CT-1120K, Part II, Line 11. Do not exceed	amount on Line	4	- 5	00
6. Balance of tax paya	ble:	Subtract Line 5 from Line 1		>	6	00
7a. Paid with application	for e	extension from Form CT-1120 EXT	▶ 7a	00	5 ////////	
		Forms CT-1120 ESA, ESB, ESC, & ESD		00	5 //////	
7c. Overpayment from p	rior y	/ear	▶ 7c	00	5 //////	
7. Tax payments: Ent	er th	e total of Lines 7a, 7b, and 7c			· 7	00
		rpaid): Subtract Line 7 from Line 6			8	00
9a. Penalty			▶ 9a	00	5 ////////	
•				00	5 '//////	
9c. CT-1120I Interest			▶ 9c	00	5 //////	///////////////////////////////////////
9. Total penalty and in	teres	st: Enter the total of Lines 9a, 9b, and Line	9c		. 9	00
		o 2010 estimated tax		00	111111111111111111111111111111111111111	
				00	— <i>\////////////////////////////////////</i>	
		efunded: Enter the total of Line 10a and Li			· ////////////////////////////////////	00
		return: Add Line 8 and Line 9			11	00

Schedule A – Computation of Tax on Net Income		
1. Net income: Enter amount from Schedule D, Line 22. If 100% Connecticut, enter also on Line 3▶	1	00
2. Apportionment fraction: Carry to six places. See instructions.	2	0.
3. Connecticut net income: Multiply Line 1 by Line 2.	3	00
4. Operating loss carryover from Form CT-1120 ATT, Schedule H, Line 14, Column D ▶	4	00
5. Income subject to tax: Subtract Line 4 from Line 3	5	00
6. Tax: Multiply Line 5 by 7.5% (.075).	6	00

Schedule B – Computation of Minimum Tax on Capital		
1. Minimum tax base from Schedule E, Line 6, Column C. If 100% Connecticut, enter also on Line 3. ▶	1	00
2. Apportionment fraction: Carry to six places. See instructions	2	0.
3. Multiply Line 1 by Line 2	3	00
4. Number of months covered by this return	4	
5. Multiply Line 3 by Line 4, divide the result by 12	5	00
6. Tax (3 and 1/10 mills per dollar): Multiply Line 5 by .0031. Maximum tax for Schedule B is \$1,000,000 ▶	6	00

Schedule D – Computation of Net Income			
1. Federal taxable income (loss) before net operating loss and special deductions	1	C	00
2. Interest income wholly exempt from federal tax▶	2	C	00
3. Unallowable deduction for corporation tax from Schedule F, Line 8	3	C	00
4. Interest expenses paid to a related member from Form CT-1120AB, Part I A, Line 1 ▶	4	C	00
5. Intangible expenses and costs paid to a related member from Form CT-1120AB, Part I B, Line 3 ▶	5	C	00
6. Federal bonus depreciation: See instructions. ▶	6	C	00
7. Cancellation of debt income deferred on I.R.C. §108(i) election statement	7	C	00
8. I.R.C. §199 domestic production activities deduction	8	C	00
9. Other: Attach explanation.	9	C	00
10. Total: Add Lines 1 through 9.	10	C	00
11. Dividend deduction from Form CT-1120 ATT, Schedule I, Line 4			00
12. Capital loss carryover (if not deducted in computing federal capital gain)	12	C	00
13. Capital gain from sale of preserved land	13	C	00
14. Federal bonus depreciation recovery from Form CT-1120 ATT, Schedule J, Line 10 ▶	14	C	00
15. Exceptions to interest add back from Form CT-1120AB, Part II A, Line 1	15		00
16. Exceptions to interest add back from Form CT-1120AB, Part II A, Line 2▶	16		00
17. Exceptions to interest add back from Form CT-1120AB, Part II A, Line 3	17	0	00
18. Exceptions to add back of intangible expenses paid to a related member from Form CT-1120AB, Part II B, Line 1	18	C	00
19. Reserved for future use.	19		
20. Other: See instructions.	20		00
21. Total: Add Lines 11 through 20.	21	C	00
22. Net income: Subtract Line 21 from Line 10. Enter here and on Schedule A, Line 1	22	C	00

See instructions.	Column A Beginning of Year	Column B End of Year	Column C	
1. Capital stock from federal Schedule L, Line 22a and Line 22b	00	00	(Column A plus	
Surplus and undivided profits from federal Schedule L, Lines 23, 24, and 25	00	00	Column B) Divided by 2	
3. Surplus reserves: Attach schedule	00	00	Divided by 2	
4. Total: Add Lines 1, 2, and 3. Enter average in Column C	00	00	(00
Holdings of stock of private corporations - Attach schedule. Enter average in Column C.	00	00	(00
6. Balance: Subtract Line 5, Column C, from Line 4, Column C. Enter here and on Schedule B, Line 1				

1. Payroll	Schedule F – Taxes	Column A	Column B					
3. Personal property	1. Payroll	00						
4. Sales and use	2. Real property	00						
5. Other: See instructions	3. Personal property	00						
6. Connecticut corporation business tax deducted in the computation of federal taxable income	4. Sales and use	00						
computation of federal taxable income	5. Other: See instructions.	00						
states or political subdivisions deducted in the computation of federal taxable income: Attach schedule	computation of federal taxable income		00					
Schedule G - Additional Required Information - Attach a schedule of corporate officers' names, titles, and addresses. See instructions. 1. In which CT town(s) does the corporation own or lease, as lessee, real or tangible personal property, or perform services? 2. (a) Did this corporation directly or indirectly transfer a controlling interest in an entity owning CT real property? ▶□ Yes ▶□ No If Yes, enter: Entity name ▶	states or political subdivisions deducted in the computation		00					
1. In which CT town(s) does the corporation own or lease, as lessee, real or tangible personal property, or perform services? 2. (a) Did this corporation directly or indirectly transfer a controlling interest in an entity owning CT real property? ▶□ Yes ▶□ No If Yes, enter: Entity name ▶ Federal Employer ID Number ▶□ Yes ▶□ No If Yes, enter: Transferor name ▶ Federal Employer ID Number ▶□ No If Yes, enter: Transferor name ▶□ Federal Employer ID Number ▶□ Yes ▶□ No If Yes, enter: Corporation at any time during the year own a majority of the voting stock of this corporation? ▶□ Yes ▶□ No If Yes, enter: Corporation name □ Federal Employer ID Number □ 4. Last taxable year this corporation was audited by the Internal Revenue Service ▶□ □			00					
2. (a) Did this corporation directly or indirectly transfer a controlling interest in an entity owning CT real property? ▶□ Yes ▶□ No If Yes, enter: Entity name ▶	Schedule G – Additional Required Information – Attach a	schedule of corporate officers' names,	titles, and addresses. See instructions.					
If Yes, enter: Entity name ► Federal Employer ID Number ► No (b) Was there a direct or indirect transfer of a controlling interest in your company owning CT real property? ► □ Yes ► □ No If Yes, enter: Transferor name ► Federal Employer ID Number ► No 3. Did any corporation at any time during the year own a majority of the voting stock of this corporation? ► □ Yes ► □ No If Yes, enter: Corporation name Federal Employer ID Number 4. Last taxable year this corporation was audited by the Internal Revenue Service ►	In which CT town(s) does the corporation own or lease, as	s lessee, real or tangible personal prope	rty, or perform services?					
(b) Was there a direct or indirect transfer of a controlling interest in your company owning CT real property? ►□ Yes ►□ No If Yes, enter: Transferor name ► Federal Employer ID Number ► 3. Did any corporation at any time during the year own a majority of the voting stock of this corporation? Federal Employer ID Number No If Yes, enter: Corporation name Federal Employer ID Number	2. (a) Did this corporation directly or indirectly transfer a cont	rolling interest in an entity owning CT re	al property? ►☐ Yes ►☐ No					
If Yes , enter: Transferor name ► Federal Employer ID Number ► 3. Did any corporation at any time during the year own a majority of the voting stock of this corporation?	If Yes , enter: Entity name ▶	Federal Employer ID N	umber ▶					
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If Yes , enter: Corporation name Federal Employer ID Number 4. Last taxable year this corporation was audited by the Internal Revenue Service ▶	If Yes , enter: Transferor name ►	Federal Employer ID No	umber ►					
4. Last taxable year this corporation was audited by the Internal Revenue Service ▶	3. Did any corporation at any time during the year own a maj	ority of the voting stock of this corporation	on? ► Yes ► No					
	If Yes, enter: Corporation name	Federal Employer ID No	umber					
Were adjustments reported to CT? ▶☐ Yes ▶☐ No (If No , attach explanation.)	4. Last taxable year this corporation was audited by the Inter	rnal Revenue Service ▶						
	Were adjustments reported to CT? ▶☐ Yes ▶☐ No (If	f No, attach explanation.)						

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 the Department of Revenue Services (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.

	Corporate officer's name (pri	Date				
Sign Here	Corporate officer's signature	Telephone number ()				
Keep a copy	Title			May DRS contact the	· · —	own below about this return? e instructions, Page 15.
of this return for	Paid preparer's name (print)					Date
your records.	Paid Diedater's Signature					Preparer's SSN or PTIN
	Firm's name and address			FEIN		Telephone number
Mail paper return with payment to: Department of Revenue Services State of Connecticut PO Box 2974 Hartford CT 06104-2974		Mail paper return without payment to: Department of Revenue Services State of Connecticut PO Box 150406 Hartford CT 06115-0406	Com	eck payable to: missioner of Revenue S heck to return with paper taple.		

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