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

Form CT-990T **Connecticut Unrelated Business Income Tax Return**

Complete this return in blue or black ink only.

(Rev. 12/11) Enter Income Year Beginning ▶ _, 2011, and Ending ▶ DRS Organization name **CT Tax Registration Number** (please type or print) Use Only Audited by Address number and street PO Box DRS use only -20 \square F State ZIP code Federal Employer ID Number (FEIN) City or town Check and Complete All Applicable Boxes If the organization is annualizing its income check here Change of: Mailing address Closing month (Attach explanation.) Return status: Amended return Initial return Final return If final return: Dissolved Withdrawn Merged/reorganized: Enter survivor's CT Tax Reg. Number. Type of organization: ▶ Corporation ▶ Domestic trust ▶ Foreign trust ▶ Other: Explain ____ 1. Date unrelated trade or business began in Connecticut: _ 2. Nature of unrelated trade or business income activity: ___ 3. Corporation only: Enter state of incorporation: _ Date of organization: Date qualified in Connecticut if not incorporated in Connecticut: - Attach a Complete Copy of Form 990-T Including all Schedules as Filed With the Internal Revenue Service -Computation of Income 1. Federal unrelated business taxable income from 2011 federal Form 990-T, Part II, Line 34 00 2. Federal net operating loss deduction from 2011 federal Form 990-T, Part II, Line 31▶ 2 00 3. Federal deduction for Connecticut tax on unrelated business taxable income ▶ 3 00 4. Total: Add Lines 1, 2, and 3. 00 5. Refund or credit for overpayment of Connecticut tax included in federal unrelated business taxable income 00 Unrelated business taxable income: Subtract Line 5 from Line 4. 00 1. Unrelated business taxable income from Line 6 above. If 100% Connecticut, enter also on Line 3. 00 2. Apportionment fraction from Schedule A, Line 5 on back page. Carry to six places.▶ 3 3. Connecticut unrelated business taxable income: Line 1 or Line 1 multiplied by Line 2.▶ 00 4. Operating loss carryover from Schedule B, Line 12 on back page 00 5. Income subject to tax: Subtract Line 4 from Line 3. ▶ 5 00 6. **Tax:** Multiply Line 5 by 7.5% (.075). 00 Computation of Amount Payable 1. Tax: Include surtax if applicable. See instructions. 1 00 2. Reserved for future use 00 3. Total Tax: Enter the amount from Line 1. 4. Tax credits from Form CT-1120K, Part III, Line 9. Do not exceed amount on Line 1. 00 00 5. Balance of tax payable: Subtract Line 4 from Line 3. If zero or less, enter "0."▶ 6a. Paid with application for extension from Form CT-990T EXT 00 6b. Paid with estimates from Forms CT-990T ESA, ESB, ESC, & ESD 00 00 6c. Overpayment from prior year 6. Tax Payments: Enter the total of Lines 6a, 6b, and 6c. 00 7. Balance of tax due (overpaid): Subtract Line 6 from Line 5. 7 00 .00 Interest ►(8b) ______0 CT-1120I Interest ►(8c) ____ 00 8. Add Penalty ►(8a) 8 Amount to be credited to 2012 estimated tax ►(9a) _ .00 Refunded ►(9b) 9 00 For faster refund, use Direct Deposit by completing Lines 9c, 9d, and 9e. 9d. Routing number ▶ Savings ► □ Account number ▶ | | | | | | | | 9f. Will this refund go to a bank account outside the U.S.? ▶ ☐ Yes Balance due with this return: Add Line 7 and Line 8 10. Visit the DRS website at Mail to: Dept. of Revenue Services, State of Connecticut, Make check payable to: TSC www.ct.gov/TSC to pay electronically. PO Box 5014, Hartford CT 06102-5014 Commissioner of Revenue Services 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, 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. Signature of officer or fiduciary Date May DRS contact the preparer shown Sign Here below about this return? See instructions. Telephone number Keep a copy ☐ Yes □ No of this Preparer's SSN or PTIN Paid preparer's signature Date return for your FEIN Telephone number Firm's name and address records.

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 E Carry to six places
Property (Average value)	1. (a) Inventories	00	0		00	
	(b) Tangible property	00	0		00	
	(c) Real property	00	0		00	
	(d) Capitalized rent	00			00	
	1. Total	00			00	0.
Receipts Wages, salaries,	(a) Sales of tangibles	00			00	
	(b) Services	00			00	
	(c) Rentals	00			00	
	(d) Other	00			00	
	2. Total	00	0		00	0.
and other compensation	3. Total	00	0		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					0.
Schedule B — Co	onnecticut Apportioned Operating L	oss Carryover				
1. 2000 Connection	cut net operating loss available for use ir	n 2011		1.		00
2. 2001 Connection	cut net operating loss available for use in	n 2011		2.		00
3. 2002 Connecticut net operating loss available for use in 2011						00
4. 2003 Connecticut net operating loss available for use in 2011			4.		00	
5. 2004 Connecticut net operating loss available for use in 2011				5.		00
6. 2005 Connecticut net operating loss available for use in 2011				6.		00
7. 2006 Connecticut net operating loss available for use in 2011				7.		00
8. 2007 Connecticut net operating loss available for use in 2011				8.		00
9. 2008 Connection	cut net operating loss available for use ir	n 2011		9.		00
10. 2009 Connection	cut net operating loss available for use ir	n 2011		10.		00
I1. 2010 Connection	cut net operating loss available for use ir	2011				00
2. Total: Add Line	es 1 through 11. Enter here and on Comp	outation of Tax, Line 4		12.		00
	omputation of Net Operating Loss C			<u> </u>		
	from Computation of Income, Line 6, if le					00
-	ific deduction from 2011 federal Form 99					00
	Line 1 and Line 2					00
	fraction from Schedule A, Line 5			H).	I
5. 2011 Connection	cut net operating loss available for carryf	orward: Multiply Line 3 by Li	ine 4	4 5.		00