Form CT K-1T Transmittal of Schedule CT K-1,

Member's Share of Certain Connecticut Items

For DRS use only -

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Complete this form in blue or black ink only.

Pass-Through Entity Information					
► Federal Employer ID Number (FEIN)	CT Ta	CT Tax Registration Number			
Pass-through entity name					
► Number and street address	PO Bo	ЭХ			
City or town	y or town State ZIP			code	
Part I - Schedule CT K-1s Submitted	k				
1. Total number of Schedule CT K-1s sub	mitted with this Form CT K-1T			1.	
Part II - Number of Members				I	
	Column A Number of Members			Column B Ownership Percentage by Member Type	
1. Resident (RI, RT, RE)		•			•
2. Nonresident (NI, NT, NE, PE)		•			•
3. Corporate (CM)		►			•
Part III - Summary of Schedule CT k	(-1 Information				
1. Total Connecticut-sourced income (NI,	NT, NE)		►	1.	00
2. Total Connecticut-sourced income (PE)					00
3. Connecticut-sourced income: Amount from Form CT-1065/CT-1120SI, Part I, Schedule A, Line 1 ►				3.	00
4. Connecticut tax liability: Amount from F	orm CT-1065/CT-1120SI, Part	I, Schedule A,	Line 4 ►	4.	00
Part IV - Summary of Income Tax Cr	edits				
				Total Credit Allocated to Members	
1. Qualified small business tax credit			►	1.	00
2. Job expansion tax credit			►	2.	00
3. Angel investor tax credit			►	3.	00
4. Insurance reinvestment fund tax credit			►	4.	00
5. Total credits earned in 2012: Add Lines	1 through 4.		►	5.	00
Do not attach Form CT K-1T or copies of Schedule CT K-1, Member's Share of Certain Connecticut Items to Form CT-1065/CT-1120SI, Connecticut Composite Income Tax Return. Form CT K-1T and copies of Schedule CT K-1 must be mailed separately.	Attach Schedule CT K-1s to and mail to: Department of Revenue State of Connecticut PO Box 150420 Hartford CT 06115 - 04	e Services 20	\$2,000 per ca failure to pro to DRS unles cause and no	lendar y vide a c s the fail ot to will	
Declaration: I declare under the penalty of law the of my knowledge and belief, it is true, complete, a of Revenue Services (DRS) is a fine of not more t	nd correct. I understand the penal han \$5,000, imprisonment for not	ty for willfully deli more than five ye	vering a false retu	s and sta rn or doo	itements) and, to the best sument to the Department
Sign Here Signature		Date			

of this		
return for	Title	Telephone number
your records.		()

Complete this form in blue or black ink only.

Form CT K-1T, *Transmittal of Schedule CT K-1*, *Member's Share of Certain Connecticut Items*, must be filed with the Department of Revenue Services (DRS) when a PE issues one or more **Schedule CT K-1**, *Member's share of Certain Connecticut Items*. Copies of all Schedule CT K-1s being filed must be attached to Form CT K-1T.

Form CT K-1T and all attached Schedule CT K-1's must show the same tax year and the PE's Federal Employer Identification Number (FEIN).

Electronically Filed Forms and Schedules

If **Form CT-1065/CT-1120SI**, *Connecticut Composite Income Tax Return,* was electronically filed, you are not required to file Form CT K-1T and paper copies of Schedule CT K-1 with DRS. However, Schedule CT K-1 is still required to be issued to the members.

Do not send payment with this form.

Specific Instructions

Pass-Through Entity Information

Complete the pass-through entity information section, including the entity's FEIN and Connecticut Tax Registration Number (TID).

Part I - Schedule CT K-1 Submitted

Enter the total number of Schedule CT K-1s submitted.

Part II - Number of Members

Enter the total number of resident, nonresident, and corporate members in Column A.

Enter the total ownership percentage for each member type in Column B. The total of all members' ownership percentage should equal to 1.0000.

Part III - Summary of Schedule CT K-1 Information

Line 1: Enter the total Connecticut-sourced income for all nonresident noncorporate individuals, trust and estate members.

Line 2: Enter the total Connecticut-sourced income for all pass-through entity members.

Line 3: Enter the amount reported from Form CT-1065/ CT-1120SI, Part I, *Schedule A*, Line 1.

Line 4: Enter the tax liability amount reported on Form CT-1065/ CT-1120SI, Part I, *Schedule A*, Line 4.

Part IV - Summary of Income Tax Credits

Lines 1 through 4: Enter the total amount from all Schedule CT K-1s, Part IV, Column A, Lines 1 through 4, allocated to members for each respective credit. The amounts should equal the amounts reported on Form CT-1065/ CT-1120SI, Part VII, *Totals for All Members* column.

Penalty

A penalty of \$5 per schedule (up to a total of \$2,000 per calendar year) will be imposed for failure to provide a copy of Schedule CT-K1 to DRS unless the failure is due to reasonable cause and not to willful neglect.

Signature

Form CT K-1T should be signed by a general partner or corporate officer. Include title and provide a contact telephone number.

When to File

Form CT K-1T and Schedule CT K-1s must be submitted on or before the fifteenth day of the fourth month following the close of the taxable year (April 15 if the PE's taxable year for federal income tax purposes is the calendar year). If the PE requested an extension of time to file Form CT-1065/CT-1120SI by timely filing **Form CT-1065/ CT-1120SI EXT**, *Application for Extension of Time to File Connecticut Composite Income Tax Return*, the deadline is automatically extended to the fifteenth day of the ninth month following the close of the taxable year (September 15 if the PE's taxable year for federal income tax purposes is the calendar year).

Where to File

Attach copies of all Schedule CT K-1s issued to Form CT K-1T and **mail to:**

Department of Revenue Services State of Connecticut PO Box 150420 Hartford CT 06115 - 0420