Department of Revenue Services PO Box 2931 Hartford, CT 06104-2931

# Form CT-941X

## **Amended Connecticut Reconciliation of Withholding**

(Rev. 12/12) Complete this return in blue or black ink only. See instructions on back before completing.

(11011 12, 12)					
Name of employer			Connecticut Tax Registration Number		
Address (number and street)			Federal Employer ID Number (FEIN)		
City, town, or post office		State		ZIP code	
Name of form	n being amended (check one): ►☐Form CT-941 ►☐	Form CT-945 ►□F	Form CT-94	1 HHF House	ehold employer
	ng amended (Form CT-941 filers only, check one) and e			T TITL TIOUS	Calendar
1st Qu		-	Quarter		year
	uarter 2nd Quarter 3rd Quarter 3rd Quarter 3rd Quarter 5rd Quarte		oer - Decemi	hor <b>•</b>	<i>y</i> • • • • • • • • • • • • • • • • • • •
Janua	ily - March - Department - Congression - Congression				
		Column A Amount as Originally Reported on CT-941 or CT-945	Net C	mn B change or Decrease)	Column C Corrected Amount
	gross wages from Form CT-941, Line 1, or nonpayroll amounts from Form CT-945, Line 11.			<b>•</b>	
	gross <b>CT</b> wages from Form CT-941, Line 2, or gross apayroll amounts from Form CT-945, Line 22.			<b>&gt;</b>	
	CT tax withheld from Form CT-941 or CT-945, Line 33.			<b>&gt;</b>	
calend	credit from prior quarter, if any, of the same ar year (Form CT-941 filers only)4.			<b>&gt;</b>	
	its made with Form CT-WH (Form CT-941) or CT-8109 (Form CT-945)5.			<b>&gt;</b>	
	nt paid with Form CT-941, Form CT-945, m CT-941 HHE6.			<b>&gt;</b>	
7. Total p	ayments: Add Lines 4, 5, and 67.			<b>&gt;</b>	
8. Overpa	ayment, if any, as shown on original return (or as previou	ısly adjusted)		8. ▶	
9. Subtra	ct Line 8 from Line 7			9. <b>&gt;</b>	
10. Net tax due or (credit): Subtract Line 9 from Line 3.				10. ►	
	st on net tax due			11. ►	
	mount due or (credit): Add Line 10 and Line 11. Credits er account.			12. ▶	
Overpaymen amount here	at: If amount on Line 12 is a credit, enter the overpayment  \$\sum_\$ and check if:	Use the <b>Taxpayer Se</b> file this return. See <b>TS</b>		r (TSC) to ele	ectronically (150)
▶□	Applied to next return or ► Refunded				missioner of Revenue
Declaration:	I declare that (check the appropriate box)				mber on your check. Do vices (DRS) may submit
	vithheld Connecticut income taxes for the current calendar	your check to your ba			(2.10)
year were repaid to employees prior to the end of the current calendar year. (You must keep in your records each employee's written receipt		Attach a copy of all applicable schedules and forms.			
showing the date and amount of repayment.)		Mail to: Department of Revenue Services PO Box 2931			
■ None of t	his refund or credit was withheld from employees.		2931 CT 06104-2	931	
knowledge a	are under penalty of law that I have examined this return (incl nd belief, it is true, complete, and correct. I understand the per 6,000, imprisonment for not more than five years, or both.				
Sign Here	Signature of employer	Date			
Keep a copy of this return	Paid preparer's signature	Date	<b>•</b>	FEIN	
for your records.	Firm name and address			Telephone nu	mber

#### **Explanation of Changes to the Connecticut Reconciliation**

Enter the line number from Page 1 for each item you are changing and give the reason for each change. Attach all supporting forms and schedules for items changed. Be sure to include the business name and tax registration numbers on any attachments. Credits cannot be transferred to another account.

## Form CT-941X Instructions

#### **General Instructions**

Complete this return in blue or black ink only. This form must be filed before the end of the current calendar year to correct Connecticut income tax withholding errors made during the same calendar year. This form may not be filed after the end of the calendar year to correct Connecticut income tax withholding errors made during that calendar year unless to correct an **administrative error**.

Use Form CT-941X to correct Form CT-941, Connecticut Quarterly Reconciliation of Withholding, Form CT-945, Connecticut Annual Reconciliation of Withholding for Nonpayroll Amounts, or Form CT-941 HHE, Connecticut Quarterly Reconciliation of Withholding for Household Employers, as it was originally filed. Form CT-941X can only be used to correct a single period. If additional periods require correction, or if you are amending for more than one type of return, a separate Form CT-941X must be completed for each period and for each type of return that you are amending.

To claim a refund for the overpayment of Connecticut withholding tax, Form CT-941X must be filed within three years from the due date of the original return. If you filed federal Form 941-X, Adjusted Employer's Quarterly Federal Tax Return or Claim for Refund, or federal Form 945-X, Adjusted Annual Return of Withheld Federal Income Tax or Claim for Refund, you must file Form CT-941X no later than 90 days after the final determination by the Internal Revenue Service. If the tax reported on your federal Form 941, Employer's Quarterly Federal Tax Return, or federal Form 945, Annual Return of Withheld Federal Income Tax, is changed or corrected by the Internal Revenue Service or other competent authority, and the change increases or decreases your Connecticut withholding tax liability, you must file Form CT-941X to report the change or correction no later than 90 days after the final determination of the change or correction.

### Amending Form CT-W3 or Form CT-1096

Form CT-941X is not used to correct any mistakes made on Form CT-W3, Connecticut Annual Reconciliation of Withholding, or Form CT-1096, Connecticut Annual Summary and Transmittal of Information Returns. To correct any errors made on Form CT-W3 or Form CT-1096, you must submit a revised Form CT-W3 or Form CT-1096 clearly labeled "AMENDED." The total amounts reported for Connecticut tax withheld on Line 3 of Form(s) CT-941, Form CT-945, or if applicable, Form(s) CT-941X, for the calendar year must agree with the total amount reported on Form CT-W3, Line 1, or Form CT-1096, Line 1, or both. The total amounts reported for gross Connecticut wages or nonpayroll amounts on Form(s) CT-941, Form CT-945, Line 2, or if applicable, Form(s) CT-941X, Line 2, for the calendar year must agree with total Connecticut wages reported on Form CT-W3, Line 2, or total nonpayroll amounts reported on Form CT-1096, Line 2, or both.

#### Information Section

Enter the employer's name, address, Connecticut Tax Registration Number, and Federal Employer Identification Number (FEIN) in the spaces provided. Check the appropriate box to indicate the type of quarterly return you are amending. Also, check the appropriate box and enter the calendar year to identify the quarterly return being amended.

#### **Line Instructions**

In Column A, enter the amount reported on the original Form CT-941, Form CT-945, or Form CT-941 HHE.

In Column B, enter the net increase or net decrease for each line which has been changed. (Any decrease should be in parentheses.)

In Column C, enter the amount that should have been reported on the original Form CT-941, Form CT-945, or Form CT-941 HHE.

**Line 10:** If the amount on Line 10 is a net tax due, you must complete Line 11 and Line 12. If Line 10 is a credit, enter the same amount on Line 12 and complete the overpayment section.

**Line 11:** The unpaid amount is subject to interest of 1% per month or fraction of a month from the due date.

Line 12: Add Line 10 and Line 11.

#### **Attachments**

A copy of your federal Form 941-X, federal Form 945-X, quarterly reconciliations of withholding from other states (original and corrected copies), and all federal Forms W-2c, Corrected Wage and Tax Statement, must be attached to support your changes.

#### Signature

This form must be signed by the employer. Anyone paid to prepare the tax return must sign the return. The preparer's FEIN, firm name, firm address, and telephone number must also be entered in the space provided.

## **For More Information**

Call DRS during business hours, Monday through Friday:

- **800-382-9463** (Connecticut calls outside the Greater Hartford calling area only); **or**
- 860-297-5962 (from anywhere).

TTY, TDD, and Text Telephone users **only** may transmit anytime by calling 860-297-4911.

#### **Taxpayer Service Center**

The **Taxpayer Service Center** (*TSC*) allows taxpayers to electronically file, pay, and manage state tax responsibilities. To make electronic transactions or administer your tax account online, visit www.ct.gov/TSC and select *Business*.