

Department of Revenue Services State of Connecticut (Rev. 09/21) 990T 1220W 01 9999



Form CT-990T 20 Connecticut Unrelated Business Income Tax Return Fileand pay your taxes online mycconnel CT

2020



| Form CT-9 | 990T can be filed and | paid electronically | sing myconneCT | at portal.ct.gov/D | RS-myconneCT. | Rev | enue Services | | |
|--|---|----------------------|--|--------------------|---------------------------------------|-----------------------------------|---------------------------------------|----------|--|
| Enter Inc | come Year Beginning | | - 2020 - Y Y Y Y Y | and Ending ▶ | — — — — — — — — — — — — — — — — — — — | Y Y Y | | | |
| Organi | ization name | | | | • | Connecticut Tax F | Registration Number | | |
| Numbe | er and street | | | РО Вох | • | Federal Employer | ID Number (FEIN) | | |
| City, to | own, or post office | | State | ZIP code | | | | | |
| Check A | All Applicable B | oxes: | | | | | | | |
| Organization is annualizing its income. | | | | | | | | | |
| Change of: Closing month (Attach explanation) | | | | | | | | | |
| Return | n status: | Amended retur | n Initia | al return | Final retur | n | | | |
| lf t | final return: | Dissolved | With | drawn | | organized: ivor's CT Tax Re | eg. Number. | | |
| Type | of organization: ▶ | Corporation | un b | 401(a) or 408 | (a) truct | Other trust | | | |
| туре о | or organization. | Other: Exp | | 40 1(a) 01 400 | o(a) ilust | Other trust | | | |
| 1. Date | Date unrelated trade or business began in Connecticut: — — | | | | | | | | |
| M M - D D - Y Y Y Y 2. Nature of unrelated trade or business income activity: | | | | | | | | | |
| 3. Cor | poration only: Er | nter state of incorp | ooration: | | Date | of organization: | — — — — — — — — — — — — — — — — — — — | <u> </u> | |
| Date q | Date qualified in Connecticut if not incorporated in Connecticut: | | | | | | | | |
| 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. | | | | | | | | | |
| | Name of officer or f | iduciary (print) | | Signature of of | fficer or fiduciary | | Date (MMDDYY | YY) | |
| | Officer's amail add | coop (print) | | | | | | | |
| Sign Here | Officer's email add | ess (print) | | | | | | | |
| Keep a | Title | | | Telephone n | umber | | | | |
| copy of this | | | | | - | May DRS contact shown below about | et the preparer Yes out this return? | No | |
| return for your | Paid preparer's nar | me (print) | Paid preparer's | signature | Date (MM | DDYYYY) | Preparer's SSN or PT | IN | |
| records. | Firm's name and a | ddroes | | Firm's | | - | ao numbor | | |
| | Time manie and at | Jul 699 | | Finits | I LIIV | Ισισμιοι | ne number | | |
| | | | | | | | | | |



Connecticut Tax Registration Number

- Attach a Complete Copy of Federal Form 990-T Including all Schedules as Filed With the Internal Revenue Service -

| Co | mputation of Income | | | | |
|---|---|-----|----------|-----|--|
| 1. | Federal unrelated business taxable income from 2020 federal Form 990-T | 1. | • | .00 | |
| 2. | Federal net operating loss deduction claimed on 2020 federal Form 990-T | 2. | • | .00 | |
| 3. | Federal deduction for Connecticut tax on unrelated business taxable income | 3. | • | .00 | |
| 4. | Total: Add Lines 1, 2, and 3. | 4. | • | .00 | |
| 5. | Refund or credit for overpayment of Connecticut tax included in federal unrelated business taxable income | 5. | • | .00 | |
| 6. | Unrelated business taxable income: Subtract Line 5 from Line 4. | 6. | • | .00 | |
| Co | mputation of Tax | | | | |
| 1. | Unrelated business taxable income from Line 6 above. If 100% Connecticut, enter also on Line 3 | 1. | • | .00 | |
| 2. | Apportionment fraction from Schedule A, Line 5 on Page 3. Carry to six places. | 2. | | | |
| 3. | Connecticut unrelated business taxable income: Line 1 or Line 1 multiplied by Line 2. | | | .00 | |
| 4. | Operating loss carryover from Schedule B, Line 21 on Page 4. Do not exceed 50% of Line 3 | | | .00 | |
| 5. | Income subject to tax: Subtract Line 4 from Line 3. | | | .00 | |
| 6. | Tax: Multiply Line 5 by 7.5% (.075). | | | .00 | |
| | | | | | |
| 1. | mputation of Amount Payable Tax: Include surtax if applicable. See instructions | 1 | • | .00 | |
| 2. | Reserved for future use | | | .00 | |
| 3. | Total Tax: Enter the amount from Line 1. | | | .00 | |
| 3. 4. | Tax credits from Form CT-1120K, Part III, Line 9. Do not exceed amount on Line 1. | | | .00 | |
| 5. | Balance of tax payable: Subtract Line 4 from Line 3. If zero or less, enter "0." | | | .00 | |
| 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 | |
| 6c. | Overpayment from prior year | | | .00 | |
| | | | | .00 | |
| 7. | 6. Tax Payments: Enter the total of Lines 6a, 6b, and 6c. | | | .00 | |
| | Balance of tax due (overpaid): Subtract Line 6 from Line 5. | | | .00 | |
| | 8a. Penalty | | | .00 | |
| | | | | .00 | |
| 8. | Form CT-1120I Interest | 8c. | | .00 | |
| | Amount to be credited to 2021 estimated tax | | | .00 | |
| | | | | .00 | |
| 9b. 9. | | | | .00 | |
| Э. | For faster refund, use Direct Deposit by completing Lines 9c, 9d, and 9e. | 9. | | .00 | |
| 9c. Checking ► Savings ► 9d. Routing # ► | | | | | |
| 9e. Account # > | | | | | |
| 9f. Will this refund go to a bank account outside the U.S.? ▶ Yes 9g. Bank name ▶ | | | | | |
| | Balance due with this return: Add Line 7 and Line 8. | 10 | • | .00 | |
| 10. | Salarios das mai uno fotam. Add Emo F dire Emo O. | .0. | | .00 | |

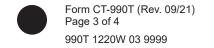




Mail to: Dept. of Revenue Services, State of Connecticut, PO Box 5014, Hartford CT 06102-5014 Make check payable to: Commissioner of Rev

Commissioner of Revenue Services







| Connecticut Tax Registration Number |
|-------------------------------------|
| |
| |
| |
| |

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 | Item | Column A Connecticut | | Column B Everywhere D | Column C ivide Column A by Column B. Carry to six places |
|--------------------------|-----------------------|----------------------|-----|------------------------------|--|
| | 1a.Inventories | | .00 | .00 | |
| | 1b.Tangible property | | .00 | .00 | |
| Property (Average value) | 1c.Real property | | .00 | .00 | |
| (riverage value) | 1d.Capitalized rent | | .00 | .00 | |
| | 1. Total | | .00 | .00 | 0. |
| | | | | | |
| | 2a.Sales of tangibles | | .00 | .00 | |
| | 2b.Services | | .00 | .00 | |
| Receipts | 2c. Rentals | | .00 | .00 | |
| | 2d.Other | | .00 | .00 | |
| | 2. Total | | .00 | .00 | 0. |
| Wages, salaries, | | | | | |
| and other compensation | 3. Total | | .00 | .00 | 0. |
| componication | | | | | |
| | 0. | | | | |
| | 0. | | | | |



2020 Connecticut net operating loss available for carryforward:

.00

Schedule B — Connecticut Apportioned Operating Loss Carryover Applied to 2020 .00 1. .00 2. .00 3. .00 4. .00 5. .00 6. .00 7. 8. .00 9. .00 .00 10. .00 11. .00 .00 .00 .00 .00 .00 .00 .00 .00 21. Total: Add Lines 1 through 20. Enter here and on Computation of Tax, Line 4. .00 Schedule C — Computation of Net Operating Loss Carryforward .00 1. .00 2. .00 3. 0. 4.