

Form CT-1065/CT-1120SI

Supplemental Attachment

2023

Pass-through entity's Federal Employer Identification Number

Please note that each form is year specific. To prevent any delay in processing your return, the correct year's form **must** be submitted to the Department of Revenue Services (DRS).

Part 1, Schedule D - Subsidiary PE Information

Only a parent PE must complete this schedule.

| | Name of Subsidiary PE | FEIN | Column A Amount Reported on Federal K-1 | Column B Amount From Connecticut Sources | Column C PE Tax Credit Reported on Schedule CT K-1, Part 3, Line 1 |
|-----|---|------|---|--|--|
| 1. | | | .00 | .00 | .00 |
| 2. | | | .00 | .00 | .00 |
| 3. | | | .00 | .00 | .00 |
| 4. | | | .00 | .00 | .00 |
| 5. | | | .00 | .00 | .00 |
| 6. | | | .00 | .00 | .00 |
| 7. | | | .00 | .00 | .00 |
| 8. | | | .00 | .00 | .00 |
| 9. | | | .00 | .00 | .00 |
| 10. | | | .00 | .00 | .00 |
| 11. | | | .00 | .00 | .00 |
| 12. | | | .00 | .00 | .00 |
| 13. | | | .00 | .00 | .00 |
| 14. | | | .00 | .00 | .00 |
| 15. | | | .00 | .00 | .00 |
| 16. | | | .00 | .00 | .00 |
| 17. | Supplemental Attachment Subtotal - Total Columns A, B, and C. Enter the total of all supplemental attachments on Form CT-1065/CT-1120SI, Part 1, <i>Schedule D</i> , Line 6. | 17. | .00 | .00 | .00 |

Pass-through entity's Federal Employer Identification Number

Part 3 – Member Information

| Member # | Name, Address, City, State, and ZIP Code | FEIN or SSN | Member Type Code | Distributive Share % Enter as a decimal. | Capital Ownership % Enter as a decimal. |
|------------------------|--|------------------------|------------------------|---|--|
| ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> |
| ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> |
| ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> |
| ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> |
| ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> |
| ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> |
| ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> |
| ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> | ▶ <input type="text"/> |

Pass-through entity's Federal Employer Identification Number

Part 5 – Member's Total Share of Connecticut Modifications

Additions:

Enter all amounts as positive numbers.

| | Member #: ▶ | Member #: ▶ | Member #: ▶ | Member #: ▶ |
|---|-------------|-------------|-------------|-------------|
| 1. Interest on state and local government obligations other than Connecticut | 1. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 2. Mutual fund exempt-interest dividends from non-Connecticut state or municipal government obligations | 2. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 3. Certain deductions relating to income exempt from Connecticut income tax | 3. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 4. Section 168(k) federal bonus depreciation allowed for property placed in service during this year | 4. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 5. 80% of Section 179 federal deduction | 5. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 6. Other Specify: _____ | 6. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |

Subtractions: Enter all amounts as positive numbers.

| | | | | |
|--|--------|-------|-------|-------|
| 7. Interest on U.S. government obligations | 7. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 8. Exempt dividends from certain qualifying mutual funds derived from U.S. government obligations | 8. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 9. Certain expenses related to income exempt from federal income tax but subject to Connecticut tax | 9. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 10. 25% of Section 168(k) federal bonus depreciation added back in preceding four years | 10. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 11. 25% of Section 179 federal deduction added back in preceding four years | 11. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 11a. Ordinary and necessary business expenses for taxpayers licensed under Chapter 420f or 420h that are not claimed for federal income tax purposes | 11a. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 12. Other Specify: _____ | 12. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |

Additional Information Required to be Reported to Nonresident, Noncorporate Members and PE Members

| | | | | |
|---|-------|-------|-------|-------|
| 13. Member's portion of Connecticut PE tax payments deducted in calculating income/(loss) for federal purposes: Enter the member's distributive share of the amount reported on Part 1, <i>Schedule B</i> , Line 17a, Column A. | 13. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
|---|-------|-------|-------|-------|

Pass-through entity's Federal Employer Identification Number

Part 6 – Member’s Total Connecticut Source Income/(Loss)

| | Member #: ▶ | Member #: ▶ | Member #: ▶ | Member #: ▶ |
|--|-------------|-------------|-------------|-------------|
| 1. Ordinary business income (loss) | 1. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 2. Net rental real estate income (loss) | 2. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 3. Other net rental income (loss) | 3. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 4. Guaranteed payments | 4. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 5. Interest income | 5. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 6a. Ordinary dividends | 6a. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 7. Royalties | 7. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 8. Net short-term capital gain (loss) | 8. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 9a. Net long-term capital gain (loss) | 9a. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 10. Net section 1231 gain (loss) | 10. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 11. Other income (loss): Attach statement. | 11. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 12. Section 179 deduction | 12. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 13. Other deductions: Attach statement. | 13. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |

Part 7 – Connecticut Income Tax Credit Summary

| | Member #: ▶ | Member #: ▶ | Member #: ▶ | Member #: ▶ |
|---|-------------|-------------|-------------|-------------|
| 1. <i>Reserved for future use</i> | 1. | | | |
| 2. <i>Reserved for future use</i> | 2. | | | |
| 3. Angel investor tax credit | 3. ▶ | .00 ▶ | .00 ▶ | .00 ▶ |
| 4. <i>Reserved for future use</i> | 4. | | | |
| 5. Total credits: Add Lines 1 through 4. | 5. | .00 | .00 | .00 |

Pass-through entity's Federal Employer Identification Number

Part 9 – Allocation of PE Tax Credit to Members.

| Column A | | Column B | | Column C | | Column D | |
|----------|--|----------------------|-----|--|---|--|--|
| Member # | | Direct PE Tax Credit | | Indirect PE Tax Credit From Subsidiary PE(s) | | Total PE Tax Credit (Column B plus Column C) | |
| 1. | ▶ | 1. | .00 | .00 | ▶ | .00 | |
| 2. | ▶ | 2. | .00 | .00 | ▶ | .00 | |
| 3. | ▶ | 3. | .00 | .00 | ▶ | .00 | |
| 4. | ▶ | 4. | .00 | .00 | ▶ | .00 | |
| 5. | ▶ | 5. | .00 | .00 | ▶ | .00 | |
| 6. | ▶ | 6. | .00 | .00 | ▶ | .00 | |
| 7. | ▶ | 7. | .00 | .00 | ▶ | .00 | |
| 8. | ▶ | 8. | .00 | .00 | ▶ | .00 | |
| 9. | ▶ | 9. | .00 | .00 | ▶ | .00 | |
| 10. | ▶ | 10. | .00 | .00 | ▶ | .00 | |
| 11. | ▶ | 11. | .00 | .00 | ▶ | .00 | |
| 12. | ▶ | 12. | .00 | .00 | ▶ | .00 | |
| 13. | ▶ | 13. | .00 | .00 | ▶ | .00 | |
| 14. | Supplemental Attachment Subtotal - Total Columns B, C, and D. Enter the total of all supplemental attachments on Form CT-1065/CT-1120SI, Part 9, Line 10. | | .00 | .00 | ▶ | .00 | |