

Form CT-1065/CT-1120SI Supplemental Attachment

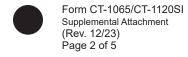
2023

Pass-through entity's Federal Employer Identification Number

3

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, Li	ine 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 B, and C. Enter the total of all supplemental attachmen	17. Supplemental Attachment Subtotal - Total Columns A,								
on Form CT-1065/CT-1120SI, Part 1, Schedule D, Line	e 6. 17.		.00	.00	.00				



Pass-through entity's Federal Employer Identification N	

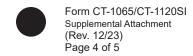
Part 3 - Member Information

	Member #	Name, Address, City, State, and ZIP Code	FEIN or SSN	Member Type Cod		e % al.	Capital Ownership % Enter as a decimal.
>	•		•	•		>	
•	•		>	>	.	•	
							·
•	•		>	>		>	
•	•		•	•		•	
•	>		>	>	.	•	
•	•		•	>		•	
•			•	•	.	•	
							·
•	•		>	•	.	•	

Pass-through entity's Federal Employer Identification Number

Part 5 – Member's Total Share of Connecticut Modifications

Additions:	Member #: ▶	Member #: ▶	Member #: ▶	Member #: ▶	
Enter all amounts as positive numbers					
Interest on state and local government obligations other than Connecticut	1. ▶	.00 ▶	.00 ▶	.00 ►	.00
Mutual fund exempt-interest dividends from non-Connecticut state or municipal government obligations	2. ▶	.00 ▶	.00 ▶	.00 ▶	.00
Certain deductions relating to income exempt from Connecticut income tax	3. ▶	.00 ▶	.00 ▶	.00 ▶	.00
 Section 168(k) federal bonus depreciation allowed for property placed in service during this year 	4. ▶	.00 ▶	.00 ▶	.00 ►	.00
5. 80% of Section 179 federal deduction	5. ▶	.00 ▶	.00 ▶	.00 ▶	.00
6. Other Specify:	6. ▶	.00 ▶	.00 ►	.00 ►	.00
Subtractions: Enter all amounts as po	sitive numbers.				
Interest on U.S. government obligations	7. ▶	.00 ▶	.00 ▶	.00 ▶	.00
Exempt dividends from certain qualifying mutual funds derived from U.S. government obligations	8. ▶	.00 ▶	.00 ▶	.00 ▶	.00
Certain expenses related to income exempt from federal income tax but subject to Connecticut tax	9. ▶	.00 ▶	.00 ►	.00 ▶	.00
lour years	10. ▶	.00 ▶	.00 ▶	.00 ▶	.00
11. 25% of Section 179 federal deduction added back in preceding four years 11a Ordinary and necessary business	11. ▶	.00 ▶	.00 ▶	.00 ▶	.00
expenses for taxpayers licensed under Chapter 420f or 420h that are not claimed for federal income tax purposes	1a. ▶	.00 ▶	.00 ▶	.00 ▶	.00
12. Other Specify:	12. ▶	.00 ▶	.00 ▶	.00 ▶	.00
Additional Information Required to I	ne Reported to Nonresiden	t, Noncorporate Members ar	nd 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 ▶	.00



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

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

Part 7 - Connecticut Income Tax Credit Summary

			•							
			Member #: ▶		Member #: ►		Member #: ▶		Member #: ▶	
1.	Reserved for future use	1.								
2.	Reserved for future use	2.								
3.	Angel investor tax credit	3. ▶		.00 ▶		.00		.00 ▶		.00
4.	Reserved for future use	4.								
5.	Total credits: Add Lines 1 through 4.	5.		.00		.00		.00		.00

Pass-throu	gh entity's Fed	eral Employer	Identification	Number

Part 9 – Allocation of PE Tax Credit to Members.

	Column A Member #		Column B Direct PE Tax Credit		Column C Indirect PE Tax Credit From Subsidiary PE(s)		Column D 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,		er the total of all tal attachments on 065/CT-1120SI,		00	00			00
	Part 9, Line 10.			.00	.00			.00