



Schedule CT-Dependent Connecticut Resident Dependent Information

Your Social Security Number

2024



If you were a nonresident or part-year resident of Connecticut during 2024 - **STOP HERE**. It is not necessary to complete this schedule.

Complete this schedule to report dependents claimed on your 2024 federal Form 1040. This information will be used by the Connecticut Department of Revenue Services (DRS) to determine your eligibility for any DRS administered programs. Attach completed Schedule CT-Dependent to the back of Form CT-1040. To make any change to this schedule, log into **myconnect** at portal.ct.gov/DRS-myconnect. 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 DRS. Do not use staples.

1. Did you claim at least one dependent on your 2024 federal Form 1040? Yes No **If No, STOP HERE**. It is not necessary to complete this schedule.

2. Please provide the following information for each dependent that you claimed on the 2024 federal Form 1040 that you filed with the Internal Revenue Service (IRS). If you claimed more than four dependents, include a statement showing the information required in Columns A through D.

A Dependent's Full Name		B Dependent's Date of Birth	C Dependent's Social Security Number	D Relationship of Dependent to You (See below for relationship codes.)
First name	Last name			
<input type="text"/>	<input type="text"/>	<input type="text" value="- -"/>	<input type="text" value="- -"/>	<input type="text"/>
First name	Last name	<small>M M - D D - Y Y Y Y</small>		
<input type="text"/>	<input type="text"/>	<input type="text" value="- -"/>	<input type="text" value="- -"/>	<input type="text"/>
First name	Last name	<small>M M - D D - Y Y Y Y</small>		
<input type="text"/>	<input type="text"/>	<input type="text" value="- -"/>	<input type="text" value="- -"/>	<input type="text"/>
First name	Last name	<small>M M - D D - Y Y Y Y</small>		
<input type="text"/>	<input type="text"/>	<input type="text" value="- -"/>	<input type="text" value="- -"/>	<input type="text"/>

Column D Relationship Codes
1 = son/daughter/stepchild
2 = niece/nephew
3 = grandchild
4 = foster child
5 = other

3. Total number of dependents: