

2018 Individual Income Tax

Third Party Software Vendor Specifications

- ▶ **Form CT-1040**, *Connecticut Resident Income Tax Return*;
- ▶ **Form CT-1040NR/PY**, *Connecticut Nonresident and Part-Year Resident Income Tax Return*;
- ▶ **Schedule CT-EITC**, *Connecticut Earned Income Tax Credit*;
- ▶ **Schedule CT-CHET**, *Connecticut Higher Education Trust (CHET) 529 College Savings Plan Contribution*;
- ▶ **Schedule CT-IT Credit**, *Income Tax Credit Summary*;
- ▶ **Schedule CT-1040WH**, *Connecticut Income Tax Withholding*;
- ▶ **Schedule CT-PE**, *Pass-Through Entity Tax Credit*;
- ▶ **Form CT-6251**, *Connecticut Alternative Minimum Tax Return - Individuals*.

I. Introduction

The 2018 **Form CT-1040**; **Form CT-1040NR/PY**; **Schedule CT-EITC**; **Schedule CT-CHET**; **Schedule CT-IT Credit**; **Supplemental Schedule CT-1040WH**; **Schedule CT-PE**; and **Form CT-6251** absolute position forms and specifications are now available for design and production.

For taxable year 2018, the following changes were made:

- **Significant changes have been made to the 2D barcodes:**
 - **Schedules have been removed from the 2D barcode for the CT-1040 and CT-1040NR/PY.**
 - **Ordinals for the CT-1040 and CT-1040NR/PY have been re-ordered.**
 - **Supporting schedules now include their own 2D barcode.**
- For “NRA” or “Applied For” taxpayers, the SSN field needs to be filled with (0) zeroes on the return as well as in the barcode. The fields will no longer be alphanumeric.
- We added cents (.00) to the “total amount due” CT-1040 Line 30 and CT-1040NR/PY Line 32. The scanning process matches “total amount due” lines with amount on checks which includes cents.

Vendors **must** submit paper test form samples to DRS and receive DRS approval or risk rejection of taxpayer submitted unapproved forms.

Tests should be submitted to:

Dept. of Revenue Services
450 Columbus Blvd.
Suite 1, G3-N
Hartford, CT 06103
Attn: John Dumin

For the best processing results, it is imperative that absolute position forms and 2-D barcodes meet DRS standards and adhere to all specifications within this publication. Any forms not in compliance or not approved for use will be rejected. Software vendors and taxpayers will be alerted that the software used to produce such forms is not in compliance with the DRS specifications and will not be processed.

Questions concerning the absolute position forms or specifications may be emailed to John Dumin, Software Vendor Coordinator at john.dumin@po.state.ct.us or call at **860-297-5813**.

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II. Absolute Position Forms: Included in 2-D Barcodes

General Field Requirements

The following requirements are critical to the successful processing of tax returns for the Connecticut Department of Revenue Services (DRS) and must be followed exactly.

Document Identification Number

The Document Identification Number (DIN) occurs three times on each page. One DIN is in the QR code located at the top of the page. The other two DINs are numeric and are located at the top and bottom of each scannable page of each form. A QR code placemaker will be located on the forms where the vendor generated QR code should be placed.

The numeric DIN and QR DIN contain the same information and may be up to 19 characters long.

The QR DIN is in the same location for all pages of all forms. The numeric DINs are in similar locations, but they can be different lengths.

QR DIN: Is 1/2" X 1/2" and the top, left corner is located at Row 6, Column 35;

Top Numeric DIN: Is located on Row 7 and varies from Column 15 to 32; and

Bottom Numeric DIN: Is located on Row 62 and varies from Column 34 to 52.

The numeric DINs must be printed in Courier 12 point, 10 pitch font, and surround by a minimum of 1/4" inch of white space. The QR DIN must also be surrounded by a minimum of 1/4" inch of white space.

Each page has a unique number and the number assigned follows a set format. Use the correct DIN for each page. Each vendor has its own identification number assigned by DRS. **Do not use** the DIN printed on the samples.

The following is an example of the DIN format:

10401218V01XXXX = 1040 / 12 / 18 / V / 01 / XXXX

1040 = Form number;

12 = Month

18 = Year;

V = Output source (V = vendor; W = website; or B = booklet);

01 = Page number; and

XXXX = Software developer's NATCP identification number.

Quick Reference (QR) Codes

Quick reference (QR) code document identifiers occur at the top of each scannable page (Rows 6,7, and 8; Columns 35 through 39) and are unique to each page of each form.

QR codes are 1/2" X 1/2" and located in Rows 6, 7, and 8; Columns 35 through 39. Codes are plain text, static content (embed text into code "as-is"), foreground color is black, and they use a 21X21 array of data items.

Draft samples provide a QR code place holder to show the location where the actual QR code should be placed.

Target Mark Locations

All target marks and data fields **must** be in absolute relative position to each other. This is critical to allow for automated systems to locate the data fields for processing. Placement **must** follow the specifications exactly. DRS provides sample PDF forms (with grids) for use to verify that data fields and target marks are properly placed.

<p>All Pages (corner marks): Row 7, Column 11 and 12; Row 7, Column 74 and 75; Row 62, Column 11 and 12; and Row 62, Column 74 and 75.</p> <p>CT-1040, Page 1: Row 18, Column 61; Row 31, Column 60; and Row 46, Column 60.</p> <p>CT-1040, Page 2: Row 13, Column 54; Row 23, Column 56; Row 43, Column 56; and Row 53, Column 60.</p> <p>CT-1040, Page 3: Row 11, Column 60; Row 40, Column 60; Row 44, Column 41; and Row 59, Column 41.</p> <p>CT-1040, Page 4: Row 18, Column 27; Row 21, Column 54; Row 30, Column 54; Row 41, Column 54; and Row 56, Column 56.</p> <p>CT-1040 NR/PY, Page 1: Row 15, Column 60; Row 29, Column 60; and Row 46, Column 60.</p> <p>CT-1040 NR/PY, Page 2: Row 23, Column 58; Row 31, Column 56; Row 43, Column 58, and Row 53, Column 60.</p>	<p>CT-1040 NR/PY, Page 3: Row 11, Column 60; Row 40, Column 60; Row 44, Column 41; and Row 59, Column 43.</p> <p>CT-1040 NR/PY, Page 4: Row 13, Column 58; Row 25, Column 54; and Row 37, Column 56.</p> <p>Sch. CT-EITC, Page 1: Row 18, Column 56; Row 24, Column 56; Row 34, Column 56; and Row 44, Column 56.</p> <p>Sch. CT-EITC, Page 2: Row 11, Column 54; Row 14, Column 56; Row 23, Column 51; and Row 37, Column 51.</p> <p>Sch. CT-CHET, Page 1: Row 12, Column 60; Row 23, Column 60; and Row 34, Column 60.</p> <p>Sch. CT-IT CREDIT, Page 1: Row 10, Column 54; Row 16, Column 54; and Row 30, Column 47.</p> <p>Sch. CT-IT CREDIT, Page 2: Row 9, Column 49; Row 20, Column 48; and Row 31, Column 62.</p>	<p>Supp. Sch. CT-1040WH, Page 1: Row 10, Column 55; Row 16, Column 55; Row 30, Column 60; and Row 35, Column 60.</p> <p>Sch. CT-PE Row 26, Column 43.</p> <p>Form CT-6251, Page 1: Row 10, Column 55; Row 16, Column 55; and Row 46, Column 51.</p> <p>Form CT-6251, Page 2: Row 16, Column 54; Row 23, Column 56; and Row 43, Column 56.</p>
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Grids

Grids are industry standard 10 characters per inch by 6 rows per inch. The grids printed on the sample PDF forms are for reference only. Do **not** print grids on the actual taxpayer return.

Font

Use Courier 12 point, 10 pitch font for all data fields.

Alpha Characters

Use only UPPER CASE alpha characters. Do not use any lowercase characters.

Yes, No, or Affirmative Entries

All field entries for “Yes,” “No,” or to affirm an answer must be marked with a “Y” or “N.” Do **not** mark fields with an “X.”

Alpha Field Justification

All alpha fields (name, address, etc.) are left justified.

Alpha Field Padding

Pad all alpha fields with spaces. (This is essential for making sure that the fields are in absolute relative position to each other.)

Example: Printing the name JOHN Q SMITH JR.

Incorrect spacing (no padding):

JOHN Q SMITH JR

Correct spacing (first name is 15 characters, last name is 20 characters):

JOHN Q SMITH JR

The only punctuation allowed in names is a dash. Apostrophes should be omitted.

Example: Incorrect: **O’ BRIEN**

Correct: **OBRIEN**

Punctuation

The only punctuation allowed in address fields are dashes (-) and slashes (/).

No dashes should be printed in Social Security Numbers (SSN), Employer Identification Numbers (EIN), account numbers, phone numbers, and ZIP codes. These fields should **not** contain any dashes or other punctuation.

Money Fields

Money fields use whole dollar amounts only. **Do not include cents** except for the “total amount due” lines.

Example: Incorrect: **42033.00**

Correct: **42033**

Money fields are right justified and do **not** include decimal points, commas, or dollar signs (\$).

Money fields are filled with a zero (0) when no value is present.

Negative amounts are signed with a dash (-). The negative sign is one character wide and no space should be between the negative sign and the number.

Example: Incorrect: **- 1234**

Correct: **-1234**

Money Format

Use whole dollars only, right justify, and pad with spaces (not zeros). **Do not include cents**(except for total amount due lines), decimal points, commas, or dollar signs (\$). If zero, print 0 (zero). Do not leave blank.

Addresses

Do not wrap Address Line 1 into Address Line 2. Truncate long addresses and use standard address (ST, RD, AVE, etc.) and secondary unit (APT, FL, etc.) USPS abbreviations to keep within the correct address line. Visit **DRS Software Developer's website**, USPS standard abbreviations for complete list.

For DRS processing purposes it is extremely important that address lines be completed and placed properly. DO NOT WRAP addresses or use non-standard abbreviations. Doing so will cause delays in return processing and impede the delivery of refund checks.

When using "in care of" (c/o) or "attention to" (Attn:), enter these items on Address Line 1 and enter the street address on Address Line 2. If no c/o or Attn:, street address must go on Address Line 1.

Foreign addresses (other than Canada), enter entire address (including country) on Address Line 1, Address Line 2, and City fields.

Taxpayer Email

The field is 70 alphanumeric characters and contains the email address of the primary taxpayer. In the case of a jointly filed return, the secondary taxpayer may enter their email address if the primary taxpayer does not have an email address.

Form CT-1040 Required Fields

The following fields are required to be automatically populated or completed for taxpayers to continue filing, or must be completed in response to the selection of other fields.

Required to be Automatically-Populated Fields

Each page of each form submitted to DRS must include the following automatically populated fields:

1. **Document Identification Numbers** - Three occurrences of the Document Identification Number (DIN) must be on each page. The QR Code and two DINs must be on each scannable page. (See Document Identification Number and Quick Reference (QR) Code, on Page 3 and 4.)
2. **Social Security Number** - The Social Security Number must appear at the top of Form CT-1040, Pages 2, 3, and 4.
3. In addition, the following **Checklist for filing your Connecticut income tax return** must be included when hard copies of the form are printed. Taxpayers should not send the checklist to DRS with the return.

Do not send this sheet with your return.

Checklist for filing your Connecticut income tax return:

1. Be sure that Page 1 of your return is not printed on the back of this sheet.
2. Verify that the address lines on the return are correct and proper abbreviations are used.
3. If the Employer or Payer's Federal ID # is not listed on Page 2, Lines 18a through 18e, Column A, **all** withholding claimed will be disallowed and your return will not be successfully processed.
4. Do not attempt to remove or modify the solid boxes that print out on your return. Altering target marks may affect the processing of your return.
5. Do not send "Draft" or "Unapproved" versions of your return. This will delay or stop the processing of your return.
6. Do not make manual (hand written or typed) corrections to your return; this is a machine readable return. Changes may only be made by reentering information in your software and re-printing the return.
7. Do not use this return to change or amend previously filed returns. You must use Form CT-1040X to change or amend a previously filed Connecticut income tax return. (File Form CT-1040X electronically at www.ct.gov/TSC using the Taxpayer Service Center.)
8. **Do not attach or send copies of forms W-2 or 1099.**
9. Send **all** completed pages of CT-1040, Schedule CT-EITC, Schedule CT-CHET, Supplemental Schedule CT-1040WH, Schedule CT-IT Credit, Schedule CT-PE, and Form CT-6251. Send **all** four pages of your completed return, both pages of your completed CT-EITC schedule, the completed Schedule CT-CHET, and any other supporting schedules.
10. Make check payable to: Commissioner of Revenue Services
11. To ensure proper posting, write your SSN(s) (optional) and "2018 Form CT-1040" on your check.
12. To mail your return, use the following addresses:
For all tax returns with payment:
Department of Revenue Services
PO Box 2977
Hartford CT 06104-2977
For refunds and tax returns without payment:
Department of Revenue Services
PO Box 2976
Hartford CT 06102-2976
13. Verify that all fields print completely and any preparer information is filled out and legible before filing this return. If you find any errors, do not make manual changes. Re-enter information in your software and re-print the return.
14. If you wish to directly deposit a refund into a checking or savings bank account, confirm that Lines 25a through 25d have been completed. You **must** enter bank information on both the federal and Connecticut returns for each to be correctly deposited.
15. When making payment using Form CT-1040V, **DO NOT** attach copies of your previously filed Form CT-1040.

Do not send this sheet with your return.

Fields Required to Continue Completing Return

During the completion of Form CT-1040, the following fields must be filled before filing is allowed to continue:

FR = Field Row; FC = Field Column; FL = Field Length

1. Page 1

- a. **One** of the following filing statuses **must be selected** (Use “Y” for selected filing status and “N” for all others. Do NOT use X.):
“S” (FR=14, FC=11, FL=1); “FJ” (FR=14, FC=18, FL=1); “FS” (FR=14, FC=35, FL=1);
“HH” (FR=14, FC=53, FL=1); **or** “QW” (FR=14, FC=61, FL=1).
- b. First three digits of Social Security Number (SSN) (FR=16, FC=11, FL=3)
- c. Middle two digits SSN (FR=16, FC=17, FL=2)
- d. Last four digits SSN (FR=16, FC=22, FL=4)

2. Page 2

- a. Line 9 **must** be zero, unless **Schedule CT-6251** is completed. (Taxpayers should be reminded to attach the Schedule CT-6251 to the return.)
- b. Line 13 **must** be zero, unless **Schedule CT-IT Credit** is completed. (Taxpayers should be reminded to attach the Schedule CT-IT Credit to the return.)
- c. Line 18a, Column A, first 2 digits (FR=13, FC=18, FL=2), Line 18a, Column A, last 7 digits (FR=13, FC=23, FL=7), **and** Line 18a, Column C (FR=13, FC=60, FL=9)
- d. If Line 18b through 18e, Column C is greater than zero, the corresponding field(s) on Line 18b through 18e, Column A **must** be populated.
- e. Line 18f **must** be zero, unless lines 18a through 18e, Column A and Column C have all been populated. (Taxpayers should be reminded to attach the Supplemental Schedule to the return.)
- f. If Line 18 (FR=21, FC=67, FL=9) is greater than zero, one or more field(s) of Lines 18a through 18e, Column A and the corresponding field(s) on Line 18b through 18e, Column C **must** be populated.
- g. Line 20a **must** be zero, unless **Schedule CT-EITC** is completed. (Taxpayers should be reminded to attach the Schedule CT-EITC to the return.)
- h. Line 20b **must** be zero, unless **Form CT-1040CRC**, Claim of Right Credit is completed. (Taxpayer should be reminded to attach Form CT-1040CRC to the return.)
- i. Line 20c **must** be zero, unless **Schedule CT-PE**, Pass-Through Entity Tax Credit. (Taxpayer should be reminded to attach Schedule CT-PE to the return.)
- j. Line 24 **must** be zero, unless **Schedule CT-CHET** is completed. (Taxpayer should be reminded to attach Schedule CT-CHET to the return.)

Fields Required Based on the Completion of Other Fields

During the completion of Form CT-1040, the following fields must be filled before allowing the completion of any other fields:

FR = Field Row; FC = Field Column; FL = Field Length

1. Page 1

- a. If Filing Status “FJ” (FR=14, FC=18, FL=1) is selected, the first three digits Spouse SSN (FR=16, FC=28, FL=3); middle two digits Spouse SSN (FR=16, FC=34, FL=2); **and** last four digits Spouse SSN (FR=16, FC=39, FL=4) **must** be populated.
- b. If Filing Status “FS” (FR=14, FC=35, FL=1) is selected, the first three digits Spouse SSN (FR=16, FC=28, FL=3); middle two digits Spouse SSN (FR=16, FC=34, FL=2); last four digits Spouse SSN (FR=16, FC=39, FL=4); **and** Spouse’s name (FR=26, FC=55, FL=21) **must** be populated.
- c. If Line 9 is not zero (“0”), Schedule CT-6251 **must** be completed.
- d. If Line 13 is not zero (“0”), Schedule CT-IT Credit **must** be completed.

2. Page 2

- a. If Line 18f is not zero (“0”), Supplemental Schedule CT-1040WH **must** be completed.
- b. If Line 20a is not zero (“0”), Schedule CT-EITC **must** be completed.
- c. If Line 20b is not zero (“0”), Form CT-1040CRC **must** be completed.
- d. If Line 20c is not zero (“0”), Schedule CT-PE **must** be completed.
- e. If Line 24 is not zero (“0”), Schedule CT-CHET **must** be completed.
- f. If Line 25c is completed, Line 25d **must** also be completed.

Data Format Instructions: Form CT-1040 Absolute Position Form

Form CT-1040, Page 1

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Beginning Date	12	28	8	MMDDYYYY Format.
Ending Date	12	46	8	MMDDYYYY Format.
Filing Status "S"	14	11	1	Y or N. Use Y if filing status is Single, N otherwise. (Do NOT use X.)
Filing Status "FJ"	14	18	1	Y or N. Use Y if filing status is Filing Jointly, N otherwise. If 'Y' then Spouse SSN must not be blank. (Do NOT use X.)
Filing Status "FS"	14	35	1	Y or N. Use Y if filing status is Filing Separately, N otherwise. (Do NOT use X.)
Filing Status "HH"	14	53	1	Y or N. Use Y if filing status is Head of Household, N otherwise. (Do NOT use X.)
Filing Status "QW"	14	61	1	Y or N. Use Y if filing status is Qualified Widow, N otherwise. If 'Y' then Spouse SSN must not be blank. (Do NOT use X.)
First three digits Social Security Number (SSN)/Individual Taxpayer Identification Number (ITIN)	16	11	3	First three digits of primary SSN/ITIN (If NRA or Applied For, use zeroes). Numeric.
Middle two digits SSN/ITIN	16	17	2	Middle two digits of primary SSN/ITIN (If NRA or Applied For, use zeroes). Numeric.
Last four digits SSN/ITIN	16	22	4	Last four digits of primary SSN/ITIN (If NRA or Applied For, use zeroes). Numeric.
First three digits Spouse SSN/ITIN	16	28	3	First three digits of spouse SSN/ITIN (If NRA or Applied For, use zeroes). . Numeric.
Middle two digits Spouse SSN/ITIN	16	34	2	Middle two digits of spouse SSN/ITIN (If NRA or Applied For, use zeroes). . Numeric.
Last four digits SSN/ITIN	16	39	4	Last four digits of spouse SSN /ITIN (If NRA or Applied For, use zeroes). Numeric.
First Name	18	11	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Middle Initial	18	28	1	Single UPPER CASE alpha, or blank.
Last Name	18	31	20	Use all UPPER CASE. The only punctuation allowed is dash (-). DO NOT INCLUDE apostrophes. Pad with spaces on the right.
Suffix	18	53	3	Use all UPPER CASE, or blank. Valid Entries: JR,SR,II,III,IV,V,VI.
Deceased	18	70	1	Use Y if deceased and N otherwise. (Do NOT use X.)
Spouse First Name	20	11	15	Use all UPPER CASE. The only punctuation allowed is a dash. Blank if no spouse. Pad with spaces on the right.
Spouse Middle Initial	20	28	1	Single upper case alpha, or blank.
Spouse Last Name	20	31	20	Use all UPPER CASE. The only punctuation allowed is dash (-). DO NOT INCLUDE apostrophes. Blank if no spouse. Pad with spaces on the right.
Spouse Suffix	20	53	3	Use all UPPER CASE, or blank. Valid Entries: JR,SR,II,III,IV,V,VI
Deceased Spouse	20	70	1	Use Y if deceased and N otherwise. (Do NOT use X.)
Address Line 1	22	11	30	Use all UPPER CASE. Only punctuation allowed is slash (/) and dash (-). DO NOT wrap to Address Line 2. Use standard address and secondary unit USPS abbreviations.
CT-8379	22	54	1	Y or N. Use Y if CT-8379 is filed, N otherwise. (Do NOT use X.)
Form CT-2210	22	65	1	Y or N. Use Y if CT-2210 is filed, N otherwise. (Do NOT use X.)
Address Line 2	24	11	30	Use all UPPER CASE. Only punctuation allowed is slash (/) and dash (-). Use standard address and secondary unit USPS abbreviations.
CT-1040CRC	24	54	1	Y or N. Use Y if CT-1040CRC is filed, N otherwise. (Do NOT use X.)
Filler	24	65	1	Pass one space

Form CT-1040, Page 1 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
City	26	11	20	Use all UPPER CASE. Only punctuation allowed is a dash (-). Pad with spaces on the right.
State	26	33	2	Use all UPPER CASE. Standard U.S. State abbreviation as well as OC,AA,AP,AE
First five digits of ZIP Code	26	37	5	Alphanumeric. For US addresses, must be 5-digit ZIP code.
Last four digits of ZIP Code	26	45	4	Alphanumeric. Last 4-digits of ZIP code.
Spouse's name.	26	55	21	Use all UPPER CASE. The only punctuation allowed is a dash (-).
City of Residence	28	11	20	Use all UPPER CASE. Only punctuation allowed is a dash (-). Pad with spaces on the right.
ZIP Code of Residence	28	37	5	Alphanumeric. 5-digits ZIP code.
Line 1	31	67	9	Use money format. (See Money Format, on Page 5.)
Line 2	32	67	9	Use money format. (See Money Format, on Page 5.)
Line 3	33	67	9	Use money format. (See Money Format, on Page 5.)
Line 4	34	67	9	Use money format. (See Money Format, on Page 5.)
Line 5	35	67	9	Use money format. (See Money Format, on Page 5.)
Line 6	36	67	9	Use money format. (See Money Format, on Page 5.)
Line 7	37	67	9	Use money format. (See Money Format, on Page 5.)
Line 8	38	67	9	Use money format. (See Money Format, on Page 5.)
Line 9	39	67	9	Use money format. (See Money Format, on Page 5.)
Line 10	40	67	9	Use money format. (See Money Format, on Page 5.)
Line 11	41	73	3	Use money format. (See Money Format, on Page 5.)
Line 12	42	67	9	Use money format. (See Money Format, on Page 5.)
Line 13	43	67	9	Use money format. (See Money Format, on Page 5.)
Line 14	44	67	9	Use money format. (See Money Format, on Page 5.)
Line 15	45	67	9	Use money format. (See Money Format, on Page 5.)
Line 16	46	67	9	Use money format. (See Money Format, on Page 5.)

Form CT-1040, Page 2

Field Name	Field Row	Field Column	Field Length	Formatting Notes
SSN/ITIN	7	60	9	Duplicated from Page 1. Alphanumeric. DO NOT PRINT DASHES.
Line 17	9	60	9	Use money format. (See Money Format, on Page 5.)
Line 18a, Column A, first 2 digits	13	18	2	All numeric. Leave blank if not present.
Line 18a, Column A, last 7 digits	13	23	7	All numeric. Leave blank if not present.
Line 18a, Column B	13	40	9	Use money format. (See Money Format, on Page 5.)
Line 18a, Column C	13	60	9	Use money format. (See Money Format, on Page 4.) If Column C is populated, then corresponding Column A line must not be blank.
Line 18b, Column A, first 2 digits	14	18	2	All numeric. Leave blank if not present.
Line 18b, Column A, last 7 digits	14	23	7	All numeric. Leave blank if not present.
Line 18b, Column B	14	40	9	Use money format. (See Money Format, on Page 5.)
Line 18b, Column C	14	60	9	Use money format. (See Money Format, on Page 4.) If Column C is populated, then corresponding Column A line must not be blank.
Line 18c, Column A, first 2 digits	15	18	2	All numeric. Leave blank if not present.
Line 18c, Column A, last 7 digits	15	23	7	All numeric. Leave blank if not present.
Line 18c, Column B	15	40	9	Use money format. (See Money Format, on Page 5.)
Line 18c, Column C	15	60	9	Use money format. (See Money Format, on Page 4.) If Column C is populated, then corresponding Column A line must not be blank.

Form CT-1040, Page 2 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Line 18d, Column A, first 2 digits	16	18	2	All numeric. Leave blank if not present.
Line 18d, Column A, last 7 digits	16	23	7	All numeric. Leave blank if not present.
Line 18d, Column B	16	40	9	Use money format. (See Money Format, on Page 5.)
Line 18d, Column C	16	60	9	Use money format. (See Money Format, on Page 4.) If Column C is populated, then corresponding Column A line must not be blank.
Line 18e, Column A, first 2 digits	17	18	2	All numeric. Leave blank if not present.
Line 18e, Column A, last 7 digits	17	23	7	All numeric. Leave blank if not present.
Line 18e, Column B	17	40	9	Use money format. (See Money Format, on Page 5.)
Line 18e, Column C	17	60	9	Use money format. (See Money Format, on Page 4.) If Column C is populated, then corresponding Column A line must not be blank.
Line 18f	19	60	9	Use money format. (See Money Format, on Page 5.)
Line 18	21	67	9	Use money format. (See Money Format, on Page 5.)
Line 19	22	67	9	Use money format. (See Money Format, on Page 5.)
Line 20	23	67	9	Use money format. (See Money Format, on Page 5.)
Line 20a	24	72	4	Use money format. (See Money Format, on Page 5.)
Line 20b	25	67	9	Use money format. (See Money Format, on Page 5.)
Line 20c	26	67	9	Use money format. (See Money Format, on Page 5.)
Line 21	27	67	9	Use money format. (See Money Format, on Page 5.)
Line 22	28	67	9	Use money format. (See Money Format, on Page 5.)
Line 23	30	67	9	Use money format. (See Money Format, on Page 5.)
Line 24	31	68	8	Use money format. (See Money Format, on Page 5.)
Line 24a	32	67	9	Use money format. (See Money Format, on Page 5.)
Line 25	34	67	9	Use money format. (See Money Format, on Page 5.)
Line 25a (Checking account)	36	20	1	Y or N or blank. Use Y if Checking Account, use blank if amount due, use N if Savings Account or check. (Do NOT use X.)
Line 25a (Savings account)	36	26	1	Y or N or blank. Use Y if Savings Account, use blank if amount due, use N if Checking Account or check. (Do NOT use X.)
Line 25b	36	40	9	Bank routing number. Alphanumeric, but leave blank if no direct deposit. (This is an ABA routing number and contains a check digit that can be validated.)
Line 25c	36	59	17	Account number. Left justify. Leave blank if no direct deposit.
Line 25d	38	40	1	Y or N. Use Y if refund is going to a bank account outside of the United States, use N otherwise. (Do NOT use X.)
Line 26	39	67	9	Use money format. (See Money Format, on Page 5.)
Line 27	40	67	9	Use money format. (See Money Format, on Page 5.)
Line 28	42	67	9	Use money format. (See Money Format, on Page 5.)
Line 29	43	67	9	Use money format. (See Money Format, on Page 5.)
Line 30	44	67	9	Use money format. (See Money Format, on Page 5.)
Home/cell telephone number	49	63	10	Alphanumeric. DO NOT USE DASHES. Leave blank if not present.
Preparer's PTIN	53	63	9	Alphanumeric. DO NOT USE DASHES. Leave blank if not present.
Paid Preparer's Name	55	13	30	Alphanumeric. Leave blank if not present.
FEIN	55	63	9	Alphanumeric. DO NOT USE DASHES. Leave blank if not present.
Firm Name	56	26	30	Alphanumeric. Leave blank if not present. PERIODS AND COMMAS NOT ALLOWED
Firm Address	57	13	21	Use all UPPER CASE. Only punctuation allowed is slash (/) and dash (-). DO NOT wrap to Address Line 2. Use standard address and secondary unit USPS abbreviations.
Firm City	57	35	9	Use all UPPER CASE. Only punctuation allowed is a dash (-). Pad with spaces on the right.

Form CT-1040, Page 2 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Firm State	57	45	2	Use all UPPER CASE. Standard U.S. State abbreviation as well as OC,AA,AP,AE
Firm first five digits of ZIP Code	57	48	5	Alphanumeric. For US addresses, must be 5-digit ZIP code.
Firm last four digits of ZIP Code	57	55	4	Alphanumeric. Last 4-digits of ZIP code.
Self Employed	57	68	1	Y or N. Use Y if Self Employed, otherwise use N (Do NOT use X)

Form CT-1040, Page 3

Field Name	Field Row	Field Column	Field Length	Formatting Notes
SSN/ITIN	7	60	9	Duplicated from Page 1. Alphanumeric. DO NOT PRINT DASHES.
Line 31	11	67	9	Use money format. (See Money Format, on Page 5.)
Line 32	13	67	9	Use money format. (See Money Format, on Page 5.)
Line 33	15	67	9	Use money format. (See Money Format, on Page 5.)
Line 34	16	67	9	Use money format. (See Money Format, on Page 5.)
Line 35	17	67	9	Use money format. (See Money Format, on Page 5.)
Line 36	18	67	9	Use money format. (See Money Format, on Page 5.)
Line 36a	19	67	9	Use money format. (See Money Format, on Page 5.)
Line 37 – Other	20	22	40	Alphanumeric.
Line 37	20	67	9	Use money format. (See Money Format, on Page 5.)
Line 38	22	67	9	Use money format. (See Money Format, on Page 5.)
Line 39	23	67	9	Use money format. (See Money Format, on Page 5.)
Line 40	24	67	9	Use money format. (See Money Format, on Page 5.)
Line 41	25	67	9	Use money format. (See Money Format, on Page 5.)
Line 42	26	67	9	Use money format. (See Money Format, on Page 5.)
Line 43	27	67	9	Use money format. (See Money Format, on Page 5.)
Line 44	28	67	9	Use money format. (See Money Format, on Page 5.)
Line 45	29	67	9	Use money format. (See Money Format, on Page 5.)
Line 46	30	67	9	Use money format. (See Money Format, on Page 5.)
Line 47	31	67	9	Use money format. (See Money Format, on Page 5.)
Line 48 – Account #	33	32	14	All numeric.
Line 48 – Amount	33	67	9	Use money format. (See Money Format, on Page 5.)
Line 48a	35	67	9	Use money format. (See Money Format, on Page 5.)
Line 49 – Other	37	22	40	Alphanumeric.
Line 49	37	67	9	Use money format. (See Money Format, on Page 5.)
Line 50	38	67	9	Use money format. (See Money Format, on Page 5.)
Line 51	41	67	9	Use money format. (See Money Format, on Page 5.)
Line 52 Name, Column A	45	49	12	Alphanumeric.
Line 52 Name, Column B	45	64	12	Alphanumeric.
Line 52 Code, Column A	46	59	2	Uppercase.
Line 52 Code, Column B	46	74	2	Uppercase.
Line 53, Column A	48	52	9	Use money format. (See Money Format, on Page 5.)
Line 53, Column B	48	67	9	Use money format. (See Money Format, on Page 5.)
Line 54, Column A	50	55	6	Must be in decimal format with one digit to the left of the decimal and four digits to the right. Maximum value is 1.0000 (100%) and minimum value is 0.0000 (do not allow a negative number). Pad with zeros on the right if required.

Form CT-1040, Page 3 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Line 54, Column B	50	70	6	Must be in decimal format with one digit to the left of the decimal and four digits to the right. Maximum value is 1.0000 (100%) and minimum value is 0.0000 (do not allow a negative number). Pad with zeros on the right if required.
Line 55, Column A	52	52	9	Use money format. (See Money Format, on Page 5.)
Line 55, Column B	52	67	9	Use money format. (See Money Format, on Page 5.)
Line 56, Column A	54	52	9	Use money format. (See Money Format, on Page 5.)
Line 56, Column B	54	67	9	Use money format. (See Money Format, on Page 5.)
Line 57, Column A	56	52	9	Use money format. (See Money Format, on Page 5.)
Line 57, Column B	56	67	9	Use money format. (See Money Format, on Page 5.)
Line 58, Column A	58	52	9	Use money format. (See Money Format, on Page 5.) Cannot be a negative number.
Line 58, Column B	58	67	9	Use money format. (See Money Format, on Page 5.) Cannot be a negative number.
Line 59	60	67	9	Use money format. (See Money Format, on Page 5.)

Form CT-1040, Page 4

Field Name	Field Row	Field Column	Field Length	Formatting Notes
SSN/ITIN	7	60	9	Duplicated from Page 1. Alphanumeric. DO NOT PRINT DASHES.
T/P or Spouse > 65 Check Box	10	32	1	Y or N Use "Y" if checked, "N" if not checked
Dependant on Fed Ret Check Box	10	48	1	Y or N Use "Y" if checked, "N" if not checked
Primary Residence – Town	14	35	9	Alphanumeric.
Auto 1 – Town	14	51	9	Alphanumeric.
Auto 2 – Town	14	67	9	Alphanumeric.
Primary Residence – Property Description	15	35	9	Alphanumeric.
Auto 1 – Property Description	15	51	9	Alphanumeric.
Auto 2 – Property Description	15	67	9	Alphanumeric.
Primary Residence - Date 1 Paid	16	36	8	MMDDYYYY Format.
Primary Residence - Date 2 Paid	17	36	8	MMDDYYYY Format
Auto 1 - Date 1 Paid	16	52	8	MMDDYYYY Format.
Auto 1 - Date Paid	17	52	8	MMDDYYYY Format.
Auto 2 - Date 1 Paid	16	68	8	MMDDYYYY Format.
Auto 2 - Date 2 Paid	17	68	8	MMDDYYYY Format.
Line 60	18	35	9	Use money format. (See Money Format, on Page 5.)
Line 61	18	51	9	Use money format. (See Money Format, on Page 5.)
Line 62	18	67	9	Use money format. (See Money Format, on Page 5.)
Line 63	20	67	9	Use money format. (See Money Format, on Page 5.)
Line 64	22	73	3	Numeric. Must Equal 200.
Line 65	24	73	3	Numeric. Must be less than or equal to 200.
Line 66	26	72	4	Must be in decimal format with one digit to the left of the decimal and two digits to the right. Pad with zeros on the right if required.
Line 67	28	73	3	Numeric.
Line 68	30	73	3	Numeric.
Line 69a	33	67	9	Use money format. (See Money Format, on Page 5.)
Line 69b	35	67	9	Use money format. (See Money Format, on Page 5.)
Line 69c	37	67	9	Use money format. (See Money Format, on Page 5.)
Line 69d	39	67	9	Use money format. (See Money Format, on Page 5.)

Form CT-1040, Page 4 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Line 69	41	67	9	Use money format. (See Money Format, on Page 5.)
Line 70a	43	67	9	Use money format. (See Money Format, on Page 5.)
Line 70b	45	67	9	Use money format. (See Money Format, on Page 5.)
Line 70c	47	67	9	Use money format. (See Money Format, on Page 5.)
Line 70d	49	67	9	Use money format. (See Money Format, on Page 5.)
Line 70e	51	67	9	Use money format. (See Money Format, on Page 5.)
Line 70f	53	67	9	Use money format. (See Money Format, on Page 5.)
Line 70g	55	67	9	Use money format. (See Money Format, on Page 5.)
Line 70h	57	67	9	Use money format. (See Money Format, on Page 5.)
Line 70	59	67	9	Use money format. (See Money Format, on Page 5.)
Taxpayer Email	61	11	70	Alphanumeric.

Form CT-1040NR/PY Required Fields

The following fields are required to be automatically populated or completed for taxpayers to continue filing, or must be completed in response to the selection of other fields.

Required to be Automatically-Populated Fields

Each page of each form submitted to DRS must include the following automatically populated fields:

1. **Document Identification Numbers** - Three occurrences of the Document Identification Number (DIN) must be on each page. The QR Code and two DINs must be on each scannable page. (See Document Identification Number and Quick Reference (QR) Code, on Page 3 and 4.)
2. **Social Security Number** - The Social Security Number must appear at the top of Form CT-1040NR/PY, Pages 2, 3, and 4; Schedule CT-CHET; Supplemental Schedule CT-1040WH; Schedule CT-IT Credit, Pages 1 and 2; Schedule CT-PE; and Form CT-6251, Pages 1 and 2.
3. In addition, the following **Checklist for filing your Connecticut income tax return** must be included when hard copies of the form are printed. Taxpayers should not send the checklist to DRS with the return.

Do not send this sheet with your return.

Checklist for filing your Connecticut income tax return:

1. Do not send this sheet with your return. Be sure that Page 1 of your return is not printed on the back of this sheet.
2. Verify that the address lines on the return are correct and proper abbreviations are used.
3. If the Employer or Payer's Federal ID # is not listed on Page 2, Lines 20a through 20e, Column A, **all** withholding claimed will be disallowed and your return will not be successfully processed.
4. Do not attempt to remove or modify the solid boxes that print out on your return. Altering target marks may affect the processing of your return.
5. Do not send "Draft" or "Unapproved" versions of your return. This will delay or stop the processing of your return.
6. Do not make manual (hand written or typed) corrections to your return; this is a machine readable return. Changes may only be made by reentering information in your software and re-printing the return.
7. Do not use this return to change or amend previously filed returns. You must use Form CT-1040X to change or amend a previously filed Connecticut income tax return. (File Form CT-1040X electronically at www.ct.gov/TSC using the Taxpayer Service Center.)
8. **Do not attach or send copies of forms W-2 or 1099.**
9. Send **all** completed pages of CT-1040NR/PY, Schedule CT-CHET, Supplemental Schedule CT-1040WH, Schedule CT-IT Credit, Schedule CT-PE, and Form CT-6251.
10. Make check payable to: Commissioner of Revenue Services
11. To ensure proper posting, write your SSN(s) (optional) and "2018 Form CT-1040NR/PY" on your check.
12. To mail your return, use the following addresses:
For all tax returns with payment:
Department of Revenue Services
PO Box 2969
Hartford CT 06104-2969
For refunds and tax returns without payment:
Department of Revenue Services
PO Box 2968
Hartford CT 06104-2968
13. Verify that all fields print completely and any preparer information is filled out and legible before filing this return. If you find any errors, do not make manual changes. Re-enter information in your software and re-print the return.
14. If you wish to directly deposit a refund into a checking or savings bank account, confirm that Lines 27a through 27d have been completed. You **must** enter bank information on both the federal and Connecticut returns for each to be correctly deposited.
15. When making payment using Form CT-1040V, **DO NOT** attach copies of your previously filed Form CT-1040NR/PY.

Do not send this sheet with your return.

Fields Required to Continue Completing Return

During the completion of Form CT-1040NR/PY, the following fields must be filled before filing is allowed to continue:

FR = Field Row; FC = Field Column; FL = Field Length

1. Page 1

- a. **One** of the following filing statuses **must be selected** (Use “Y” for selected filing status and “N” for all others.):
 - “S” (FR=13, FC=11, FL=1);
 - “FJ” (FR=13, FC=18, FL=1);
 - “FS” (FR=13, FC=35, FL=1);
 - “HH” (FR=13, FC=53, FL=1); **or**
 - “QW” (FR=13, FC=61, FL=1).
- b. First three digits of Social Security Number (SSN) (FR=15, FC=11, FL=3)
- c. Middle two digits SSN (FR=15, FC=17, FL=2)
- d. Last four digits SSN (FR=15, FC=22, FL=4)
- e. Line 6 **must** be zero, unless **Schedule CT-SI** is completed. (Taxpayers should be reminded to attach the Schedule CT-SI to the return.)
- f. Line 13 **must** be zero, unless **Schedule CT-6251** is completed. (Taxpayers should be reminded to attach the Schedule CT-6251 to the return.)
- g. Line 15 **must** be zero, unless **Schedule CT-IT Credit** is completed. (Taxpayers should be reminded to attach the Schedule CT-IT Credit to the return.)

2. Page 2

- a. Line 20a, Column A, first 2 digits (FR=13, FC=15, FL=2), Line 20a, Column A, last 7 digits (FR=13, FC=20, FL=7), **and** Line 20a, Column C (FR=13, FC=60, FL=9)
- b. If Line 20b through 20e, Column C is greater than zero, the corresponding field on Line 20b through 20e, Column A must be populated.
- c. Line 20f must be zero, unless lines 20a through 20e, Column A and Column C have all been populated. (Taxpayers should be reminded to attach the Supplemental Schedule to the return.)
- d. If Line 20 (FR=21, FC=67, FL=9) is greater than zero, one or more field(s) of Lines 20a through 20e, Column A and the corresponding field(s) on Line 20b through 20e, Column C must be populated.
- e. Line 22a **must** be zero, unless **Form CT-1040CRC**, Claim of Right Credit is completed. (Taxpayer should be reminded to attach Form CT-1040CRC to the return.)
- f. Line 22b **must** be zero, unless **Schedule CT-PE**, Pass-Through Entity Tax Credit is completed. (Taxpayer should be reminded to attach Schedule CT-PE, Pass-Through Entity Tax Credit to the return.)
- g. Line 26 **must** be zero, unless **Schedule CT-CHET** is completed. (Taxpayer should be reminded to attach Schedule CT-CHET to the return.)

Fields Required Based on the Completion of Other Fields

During the completion of Form CT-1040NR/PY, the following fields must be filled before allowing the completion of any other fields:

FR = Field Row; FC = Field Column; FL = Field Length

1. Page 1

- a. If Filing Status “FJ” (FR=13, FC=18, FL=1) is selected, the first three digits Spouse SSN (FR=15, FC=28, FL=3); middle two digits Spouse SSN (FR=15, FC=34, FL=2); **and** last four digits Spouse SSN (FR=15, FC=39, FL=4) **must** be populated.
- b. If Filing Status “FS” (FR=13, FC=35, FL=1) is selected, the first three digits Spouse SSN (FR=15, FC=28, FL=3); middle two digits Spouse SSN (FR=15, FC=34, FL=2); last four digits Spouse SSN (FR=15, FC=39, FL=4); **and** Spouse’s name (FR=24, FC=55, FL=21) **must** be populated.

2. Page 2

- a. If Line 22a is not zero (“0”), **Form CT-1040CRC must** be completed.
- b. If Line 22b is not zero (“0”), **Schedule CT-PE must** be completed.
- c. If Line 26 is not zero (“0”), **Schedule CT-CHET must** be completed.
- d. If Line 27c is completed, Line 27d **must** also be completed.

Data Format Instructions: Form CT-1040NR/PY Absolute Position Form

Form CT-1040NR/PY, Page 1

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Beginning Date	11	32	8	MMDDYYYY Format.
Ending Date	11	50	8	MMDDYYYY Format.
Filing Status “S”	13	11	1	Y or N. Use Y if filing status is Single, N otherwise. (Do NOT use X.)
Filing Status “FJ”	13	18	1	Y or N. Use Y if filing status is Filing Jointly, N otherwise. If ‘Y’ then Spouse SSN must not be blank. (Do NOT use X.)
Filing Status “FS”	13	35	1	Y or N. Use Y if filing status is Filing Separately, N otherwise. (Do NOT use X.)
Filing Status “HH”	13	53	1	Y or N. Use Y if filing status is Head of Household, N otherwise. (Do NOT use X.)
Filing Status “QW”	13	61	1	Y or N. Use Y if filing status is Qualified Widow, N otherwise. If ‘Y’ then Spouse SSN must not be blank. (Do NOT use X.)
First three digits Social Security Number (SSN)/Individual Taxpayer Identification Number (ITIN)	15	11	3	First three digits of primary SSN/ITIN (If NRA or Applied For, use zeroes). Numeric.
Second two digits of SSN/ITIN	15	17	2	Middle two digits of primary’s SSN/ITIN (If NRA or Applied For, use zeroes). . Numeric..
Last four digits of SSN/ITIN	15	22	4	Last four digits of primary’s SSN/ITIN (If NRA or Applied For, use zeroes).. Numeric.
First three digits of spouse’s SSN/ITIN	15	28	3	First three digits of spouse’s SSN/ITIN (If NRA or Applied For, use zeroes).. Numeric.
Middle two digits of spouse’s SSN/ITIN	15	34	2	Middle two digits of spouse’s SSN/ITIN (If NRA or Applied For, use zeroes).. Numeric.
Last four digits of spouse’s SSN/ITIN	15	39	4	Last four digits of spouse’s SSN/ITIN (If NRA or Applied For, use zeroes). Numeric.
First Name	17	11	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Middle Initial	17	28	1	Single upper case alpha, or blank.
Last Name	17	31	20	Use all UPPER CASE. The only punctuation allowed is dash (-). DO NOT INCLUDE apostrophes. Pad with spaces on the right.
Suffix	17	53	3	Use all UPPER CASE, or blank. Valid Entries: JR,SR,II,III,IV,V,VI
Deceased	17	64	1	Use Y if deceased and N otherwise. (Do NOT use X.)
Partial Year (PY)	17	72	1	Y or N. Use Y if Part Year Resident, N otherwise. (Do NOT use X.)
Spouse First Name	18	11	15	Use all UPPER CASE. The only punctuation allowed is a dash. Blank if no spouse. Pad with spaces on the right.
Spouse Middle Initial	18	28	1	Single upper case alpha, or blank.
Spouse Last Name	18	31	20	Use all UPPER CASE. The only punctuation allowed is dash (-). DO NOT INCLUDE apostrophes. Blank if no spouse. Pad with spaces on the right.
Spouse Suffix	18	53	3	Use all UPPER CASE, or blank. Valid Entries: JR,SR,II,III,IV,V,VI
Deceased Spouse	18	64	1	Use Y if deceased and N otherwise. (Do NOT use X.)
Non-Resident (NR)	18	72	1	Y or N. Use Y if Non Resident, N otherwise. (Do NOT use X.)
Address Line 1	20	11	30	Use all UPPER CASE. Only punctuation allowed is slash (/) and Dash (-). DO NOT wrap to Address Line 2. Use standard address and secondary unit USPS abbreviations.
Form CT-8379	20	53	1	Y or N. Use Y if CT-2210 is filed, N otherwise. (Do NOT use X.)
Form CT-2210	20	64	1	Y or N. Use Y if CT-8379 is filed, N otherwise. (Do NOT use X.)
Address Line 2	22	11	30	Use all UPPER CASE. Only punctuation allowed is slash (/) and dash (-). Use standard address and secondary unit USPS abbreviations.
CT-1040CRC	22	64	1	Y or N. Use Y if CT-1040CRC is filed, N otherwise. (Do NOT use X.)

Form CT-1040NR/PY, Page 1 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
City	24	11	20	Use all UPPER CASE. Only punctuation allowed is a dash (-). Pad with spaces on the right.
State	24	33	2	Use all UPPER CASE. Standard U.S. State abbreviation as well as OC,AA,AP,AE
First Five digits of ZIP	24	37	5	Alphanumeric. For US addresses, must be 5 digits ZIP code.
Last four digits of ZIP	24	45	4	Alphanumeric. Last four digits of ZIP code.
Spouse's name.	24	55	21	Use all UPPER CASE. The only punctuation allowed is a dash (-).
City of Residence	26	11	20	Use all UPPER CASE. Only punctuation allowed is a dash (-). Pad with spaces on the right.
ZIP Code of Residence	26	37	5	Alphanumeric. 5-digits ZIP code.
Line 1	29	67	9	Use money format. (See Money Format, on Page 5.)
Line 2	30	67	9	Use money format. (See Money Format, on Page 5.)
Line 3	31	67	9	Use money format. (See Money Format, on Page 5.)
Line 4	32	67	9	Use money format. (See Money Format, on Page 5.)
Line 5	33	67	9	Use money format. (See Money Format, on Page 5.)
Line 6	34	67	9	Use money format. (See Money Format, on Page 5.)
Line 7	35	67	9	Use money format. (See Money Format, on Page 5.)
Line 8	36	67	9	Use money format. (See Money Format, on Page 5.)
Line 9	37	70	6	Must be in decimal format with one digit to the left of the decimal and four digits to the right. Maximum value is 1.0000 (100%) and minimum value is 0.0000 (do not allow a negative number). Pad with zeros on the right if required.
Line 10	38	67	9	Use money format. (See Money Format, on Page 5.)
Line 11	39	67	9	Use money format. (See Money Format, on Page 5.)
Line 12	40	67	9	Use money format. (See Money Format, on Page 5.)
Line 13	41	67	9	Use money format. (See Money Format, on Page 5.)
Line 14	42	67	9	Use money format. (See Money Format, on Page 5.)
Line 15	43	67	9	Use money format. (See Money Format, on Page 5.)
Line 16	44	67	9	Use money format. (See Money Format, on Page 5.)
Line 17	45	67	9	Use money format. (See Money Format, on Page 5.)
Line 18	46	67	9	Use money format. (See Money Format, on Page 5.)

Form CT-1040NR/PY, Page 2

Field Name	Field Row	Field Column	Field Length	Formatting Notes
SSN/ITIN	7	60	9	Duplicated from Page 1. Alphanumeric. DO NOT PRINT DASHES.
Line 19	9	60	9	Use money format. (See Money Format, on Page 5.)
Line 20a, Col A, first 2 digits	13	15	2	All numeric. Leave blank if not present.
Line 20a, Col A, second 7 digits	13	20	7	All numeric. Leave blank if not present.
Line 20a, Col B	13	34	9	Use money format. (See Money Format, on Page 5.)
Line 20a, Col C	13	60	9	Use money format. (See Money Format, on Page 5.) If Col C is populated, then corresponding Col A line must not be blank.
Line 20b, Col A, first 2 digits	14	15	2	All numeric. Leave blank if not present.
Line 20b, Col A, second 7 digits	14	20	7	All numeric. Leave blank if not present.
Line 20b, Col B	14	34	9	Use money format. (See Money Format, on Page 5.)
Line 20b, Col C	14	60	9	Use money format. (See Money Format, on Page 5.) If Col C is populated, then corresponding Col A line must not be blank.

Form CT-1040NR/PY, Page 2 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Line 20c, Col A, first 2 digits	15	15	2	All numeric. Leave blank if not present.
Line 20c, Col A, second 7 digits	15	20	7	All numeric. Leave blank if not present.
Line 20c, Col B	15	34	9	Use money format. (See Money Format, on Page 5.)
Line 20c, Col C	15	60	9	Use money format. (See Money Format, on Page 5.) If Col C is populated, then corresponding Col A line must not be blank.
Line 20d, Col A, first 2 digits	16	15	2	All numeric. Leave blank if not present.
Line 20d, Col A, second 7 digits	16	20	7	All numeric. Leave blank if not present.
Line 20d, Col B	16	34	9	Use money format. (See Money Format, on Page 5.)
Line 20d, Col C	16	60	9	Use money format. (See Money Format, on Page 5.) If Col C is populated, then corresponding Col A line must not be blank.
Line 20e, Col A, first 2 digits	17	15	2	All numeric. Leave blank if not present.
Line 20e, Col A, second 7 digits	17	20	7	All numeric. Leave blank if not present.
Line 20e, Col B	17	34	9	Use money format. (See Money Format, on Page 5.)
Line 20e, Col C	17	60	9	Use money format. (See Money Format, on Page 5.) If Col C is populated, then corresponding Col A line must not be blank.
Line 20f	19	60	9	Use money format. (See Money Format, on Page 5.)
Line 20	21	67	9	Use money format. (See Money Format, on Page 5.)
Line 21	22	67	9	Use money format. (See Money Format, on Page 5.)
Line 22	23	67	9	Use money format. (See Money Format, on Page 5.)
Line 22a	24	67	9	Use money format. (See Money Format, on Page 5.)
Line 22b	25	67	9	Use money format. (See Money Format, on Page 5.)
Line 23	26	67	9	Use money format. (See Money Format, on Page 5.)
Line 24	28	67	9	Use money format. (See Money Format, on Page 5.)
Line 25	30	67	9	Use money format. (See Money Format, on Page 5.)
Line 26	31	68	8	Use money format. (See Money Format, on Page 5.)
Line 26a	32	67	9	Use money format. (See Money Format, on Page 5.)
Line 27	34	67	9	Use money format. (See Money Format, on Page 5.)
Line 27a (Checking account)	36	20	1	Y or N or blank. Use Y if Checking Account, use blank if amount due, use N if Savings Account or check. (Do NOT use X.)
Line 27a (Savings account)	36	26	1	Y or N or blank. Use Y if Savings Account, use blank if amount due, use N if Checking Account or check. (Do NOT use X.)
Line 27b	36	40	9	Bank routing number. All numeric, but leave blank if no direct deposit. (This is an ABA routing number and contains a check digit that can be validated.)
Line 27c	36	59	17	Account number. Left justify. Leave blank if no direct deposit.
Line 27d	38	40	1	Y or N. Use Y if refund is going to a bank account outside of the United States, use N otherwise. (Do NOT use X.)
Line 28	39	67	9	Use money format. (See Money Format, on Page 5.)
Line 29	40	67	9	Use money format. (See Money Format, on Page 5.)
Line 30	42	67	9	Use money format. (See Money Format, on Page 5.)
Line 31	43	67	9	Use money format. (See Money Format, on Page 5.)
Line 32	44	67	9	Use money format. (See Money Format, on Page 5.)

Form CT-1040NRPY, Page 2 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Home/cell telephone number	49	63	10	Alphanumeric. DO NOT USE DASHES. Leave blank if not present.
Preparer's PTIN	53	63	9	Alphanumeric. DO NOT USE DASHES. Leave blank if not present.
Paid Preparer's Name	55	13	30	Alphanumeric. DO NOT USE DASHES. Leave blank if not present.
FEIN	55	63	9	Alphanumeric. DO NOT USE DASHES. Leave blank if not present.
Firm Name	56	26	30	Alphanumeric. Leave blank if not present. PERIODS AND COMMAS NOT ALLOWED
Firm Address	57	13	21	Use all UPPER CASE. Only punctuation allowed is slash (/) and dash (-). DO NOT wrap to Address Line 2. Use standard address and secondary unit USPS abbreviations.
Firm City	57	35	9	Use all UPPER CASE. Only punctuation allowed is a dash (-). Pad with spaces on the right.
Firm State	57	45	2	Use all UPPER CASE. Standard U.S. State abbreviation as well as OC,AA,AP,AE
Firm first five digits of ZIP Code	57	48	5	Alphanumeric. For US addresses, must be 5-digit ZIP code.
Firm last four digits of ZIP Code	57	55	4	Alphanumeric. Last 4-digits of ZIP code.
Self Employed	57	68	1	Y or N. Use Y if Self Employed, otherwise use N. (Do NOT use X).

Form CT-1040NR/PY, Page 3

Field Name	Field Row	Field Column	Field Length	Formatting Notes
SSN/ITIN	7	60	9	Duplicated from Page 1. Alphanumeric. DO NOT PRINT DASHES.
Line 33	11	67	9	Use money format. (See Money Format, on Page 5.)
Line 34	13	67	9	Use money format. (See Money Format, on Page 5.)
Line 35	15	67	9	Use money format. (See Money Format, on Page 5.)
Line 36	16	67	9	Use money format. (See Money Format, on Page 5.)
Line 37	17	67	9	Use money format. (See Money Format, on Page 5.)
Line 38	18	67	9	Use money format. (See Money Format, on Page 5.)
Line 38a	19	67	9	Use money format. (See Money Format, on Page 5.)
Line 39 – Other	20	22	40	Alphanumeric.
Line 39	20	67	9	Use money format. (See Money Format, on Page 5.)
Line 40	22	67	9	Use money format. (See Money Format, on Page 5.)
Line 41	23	67	9	Use money format. (See Money Format, on Page 5.)
Line 42	24	67	9	Use money format. (See Money Format, on Page 5.)
Line 43	25	67	9	Use money format. (See Money Format, on Page 5.)
Line 44	26	67	9	Use money format. (See Money Format, on Page 5.)
Line 45	27	67	9	Use money format. (See Money Format, on Page 5.)
Line 46	28	67	9	Use money format. (See Money Format, on Page 5.)
Line 47	29	67	9	Use money format. (See Money Format, on Page 5.)
Line 48	30	67	9	Use money format. (See Money Format, on Page 5.)
Line 49	31	67	9	Use money format. (See Money Format, on Page 5.)
Line 50 – Account #	33	32	14	All numeric.
Line 50 – Amount	33	67	9	Use money format. (See Money Format, on Page 5.)
Line 50a	35	67	9	Use money format. (See Money Format, on Page 5.)
Line 51 – Other	37	22	40	Alphanumeric.
Line 51 - Amount	37	67	9	Use money format. (See Money Format, on Page 5.)
Line 52	38	67	9	Use money format. (See Money Format, on Page 5.)
Line 53	41	67	9	Use money format. (See Money Format, on Page 5.)

Form CT-1040NR/PY, Page 3 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Line 54 Name, Column A	45	49	12	Alphanumeric.
Line 54 Name, Column B	45	64	12	Alphanumeric.
Line 54 Code, Column A	46	58	2	Uppercase.
Line 54 Code, Column B	46	74	2	Uppercase.
Line 55, Column A	48	52	9	Use money format. (See Money Format, on Page 5.)
Line 55, Column B	48	67	9	Use money format. (See Money Format, on Page 5.)
Line 56, Column A	50	55	6	Must be in decimal format with one digit to the left of the decimal and four digits to the right. Maximum value is 1.0000 (100%) and minimum value is 0.0000 (do not allow a negative number). Pad with zeros on the right if required.
Line 56, Column B	50	70	6	Must be in decimal format with one digit to the left of the decimal and four digits to the right. Maximum value is 1.0000 (100%) and minimum value is 0.0000 (do not allow a negative number). Pad with zeros on the right if required.
Line 57, Column A	52	52	9	Use money format. (See Money Format, on Page 5.)
Line 57, Column B	52	67	9	Use money format. (See Money Format, on Page 5.)
Line 58, Column A	54	52	9	Use money format. (See Money Format, on Page 5.)
Line 58, Column B	54	67	9	Use money format. (See Money Format, on Page 5.)
Line 59, Column A	56	52	9	Use money format. (See Money Format, on Page 5.)
Line 59, Column B	56	67	9	Use money format. (See Money Format, on Page 5.)
Line 60, Column A	58	52	9	Use money format. (See Money Format, on Page 5.) Cannot be a negative number.
Line 60, Column B	58	67	9	Use money format. (See Money Format, on Page 5.) Cannot be a negative number.
Line 61	60	67	9	Use money format. (See Money Format, on Page 5.)

Form CT-1040NR/PY, Page 4

Field Name	Field Row	Field Column	Field Length	Formatting Notes
SSN/ITIN	7	60	9	Duplicated from Page 1. Alphanumeric. DO NOT PRINT DASHES.
Line 62a	13	67	9	Use money format. (See Money Format, on Page 5.)
Line 62b	15	67	9	Use money format. (See Money Format, on Page 5.)
Line 62c	17	67	9	Use money format. (See Money Format, on Page 5.)
Line 62d	19	67	9	Use money format. (See Money Format, on Page 5.)
Line 62	21	67	9	Use money format. (See Money Format, on Page 5.)
Line 63a	25	67	9	Use money format. (See Money Format, on Page 5.)
Line 63b	27	67	9	Use money format. (See Money Format, on Page 5.)
Line 63c	29	67	9	Use money format. (See Money Format, on Page 5.)
Line 63d	31	67	9	Use money format. (See Money Format, on Page 5.)
Line 63e	33	67	9	Use money format. (See Money Format, on Page 5.)
Line 63f	35	67	9	Use money format. (See Money Format, on Page 5.)
Line 63g	37	67	9	Use money format. (See Money Format, on Page 5.)
Line 63h	39	67	9	Use money format. (See Money Format, on Page 5.)
Line 63	41	67	9	Use money format. (See Money Format, on Page 5.)
Taxpayer Email	45	11	70	Alphanumeric.

Schedule CT-EITC Required Fields

Part-year residents and nonresidents do not qualify to claim the CT Earned Income Tax Credit (CT EITC).

The following fields are required to be automatically populated or completed for taxpayers to continue filing, or must be completed in response to the selection of other fields.

Required to be Automatically-Populated Fields

Each page of Schedule CT-EITC submitted to DRS must include the following automatically populated fields:

1. **Document Identification Numbers** - Three occurrences of the Document Identification Number (DIN) must be on each page. The QR Code and two DINs must be on each scannable page. (See Document Identification Number and Quick Reference (QR) Code, on Page 3 and 4.)
2. **Social Security Number** - The Social Security Number must appear at the top of Page 1 and Page 2.

Fields Required to Continue Completing Return

During the completion of Schedule CT-EITC, the following fields must be filled before filing is allowed to continue:

FR = Field Row; FC = Field Column; FL = Field Length

1. Page 1

- a. Line 1 must be "Y" (FR=10; FC=58; FL= 1) indicating the 2018 federal earned income credit was claimed.
- b. Line 2 must be "N" (FR=12; FC=58; FL=1) indicating investment income is **not** greater than \$3,500.
- c. Line 3 must be "N" (FR=14; FC=58; FL=1) indicating that Form CT-1040 has **not** already been filed.

Fields Required Based on the Completion of Other Fields

During the completion of Schedule CT-EITC, the following fields must be filled before allowing the completion of any other fields:

1. Page 1

Complete all entries for Line 5, Child 1, if Line 4 (FR=16; FC=58; FL=1) is "Y".

- a. Child 1, first name (FR=22, FC=11, FL=15). Pad with spaces to the right.
- b. Child 1, middle initial (FR=22, FC=28, FL=1).
- c. Child 1, last name (FR=22, FC=31, FL=20).
- d. Child 1, first three digits of Social Security Number (SSN) (FR=24, FC=11, FL=3).
- e. Child 1, middle two digits SSN (FR=24, FC=17, FL=2).
- f. Child 1, last four digits SSN (FR=24, FC=22, FL=4).

Complete **all** entries for Line 5, Child 2 and 3, if any entry is made for Child 2 or 3.

If Line 6 is **Yes**, Line 6a, Column A, B, and C are required to be completed to continue filing.

If any entry is made for Line 6a, complete:

- a. Line 6a, Column A, first 2 digits (FR=15, FC=16, FL=2);
- b. Line 6a, Column A, last 7 digits (FR=15, FC=21, FL=7);
- c. Line 6a, Column B (FR=15, FC=36, FL=10); and
- d. Line 6a, Column B (FR=15, FC=49, FL=3).

If any entry is made for Line 6b, complete:

- a. Line 6b, Column A, first 2 digits (FR=17, FC=16, FL=2);
- b. Line 6b, Column A, last 7 digits (FR=17, FC=21, FL=7);
- c. Line 6b, Column B (FR=17, FC=36, FL=10); and
- d. Line 6b, Column B (FR=17, FC=49, FL=3).

If any entry is made for Line 6c, complete:

- a. Line 6c, Column A, first 2 digits (FR=19, FC=16, FL=2);
- b. Line 6c, Column A, last 7 digits (FR=19, FC=21, FL=7);
- c. Line 6c, Column B (FR=19, FC=36, FL=10); and
- d. Line 6c, Column B (FR=19, FC=49, FL=3).

2. Page 2

If Line 7 is **Yes**, Line 7a, Column A, B, and C are required to be completed to continue filing.

If any entry is made for Line 7a, complete:

- a. Line 7a, Column A, first 2 digits (FR=27, FC=16, FL=2);
- b. Line 7a, Column A, last 7 digits (FR=27, FC=21, FL=7);
- c. Line 7a, Column B (FR=27, FC=36, FL=10); and
- d. Line 7a, Column B (FR=27, FC=49, FL=3).

If any entry is made for Line 7b, complete:

- a. Line 7b, Column A, first 2 digits (FR=29, FC=16, FL=2);
- b. Line 7b, Column A, last 7 digits (FR=29, FC=21, FL=7);
- c. Line 7b, Column B (FR=29, FC=36, FL=10); and
- d. Line 7b, Column B (FR=29, FC=49, FL=3).

If any entry is made for Line 7c, complete:

- a. Line 7c, Column A, first 2 digits (FR=31, FC=16, FL=2);
- b. Line 7c, Column A, last 7 digits (FR=31, FC=21, FL=7);
- c. Line 7c, Column B (FR=31, FC=36, FL=10); and
- d. Line 7c, Column B (FR=31, FC=49, FL=3).

Line 8 - Must be completed to complete Line 10.

Line 11 - If "Y," Lines 12 through 15 must be completed.

Line 16 - If Line 16 is completed, amount must be entered on Form CT-1040, Line 20a. Taxpayer should be reminded to attach the completed Schedule CT-EITC to the back of Form CT-1040 return.

Suggested Warning Based on Field Completion

If no entries are made for wages earned on either Form CT-1040, Line 18a; Schedule CT-EITC, Line 6a; or Schedule CT-EITC, Line 7a, taxpayers should be warned that their request for the Earned Income Tax Credit may be delayed since no income has been claimed to qualify them for this credit. DRS will require further documentation and the credit will not be approved until the additional supporting documentation is provided.

Data Format Instructions: Form CT-EITC Absolute Position Form

Schedule CT-EITC, Page 1

Field Name	Field Row	Field Column	Field Length	Formatting Notes
SSN	7	60	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Line 1	10	58	1	Required field. Must be Y to continue. (Do NOT use X.)
Line 2	12	58	1	Required field. Must be N to continue. (Do NOT use X.)
Line 3	14	58	1	Required field. Must be N to continue. (Do NOT use X.)
Line 4	16	58	1	Y or N. Use Y if qualifying children claimed on 2014 federal EIC, N otherwise. (Do NOT use X.)
Line 5, Child 1, First Name	22	11	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Line 5, Child 1, Middle Initial	22	28	1	Single UPPER CASE alpha, or blank.
Line 5, Child 1, Last Name	22	31	20	Use all UPPER CASE. The only punctuation allowed is dash (-). DO NOT INCLUDE apostrophes. Pad with spaces on the right.
Line 5, Child 1, First three digits	24	11	3	First three digits of primary SSN. All numeric.
Line 5, Child 1, Middle two digits	24	17	2	Middle two digits of primary SSN. All numeric.
Line 5, Child 1, Last four digits	24	22	4	Last four digits of primary SSN. All numeric
Line 5, Child 1, Year of Birth	24	31	4	Four digit year.
Line 5, Child 1, Relationship	24	41	1	All numeric. 1= son/daughter stepchild; 2= niece/nephew; 3 =grandchild; 4=foster child; 5=other
Line 5, Child 1, Number of months living with you	24	51	2	All numeric.
Line 5, Child 1, Student	26	58	1	Y or N. Use Y if child was identified as student on federal EIC, N otherwise. (Do NOT use X.
Line 5, Child 1, Disabled	28	58	1	Y or N. Use Y if child was identified as disabled on federal EIC, N otherwise. (Do NOT use X.)
Line 5, Child 2, First Name	32	11	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Line 5, Child 2, Middle Initial	32	28	1	Single UPPER CASE alpha, or blank.
Line 5, Child 2, Last Name	32	31	20	Use all UPPER CASE. The only punctuation allowed is dash (-). DO NOT INCLUDE apostrophes. Pad with spaces on the right.
Line 5, Child 2, First three digits	34	11	3	First three digits of primary SSN. All numeric.
Line 5, Child 2, Middle two digits	34	17	2	Middle two digits of primary SSN. All numeric.
Line 5, Child 2, Last four digits	34	22	4	Last four digits of primary SSN. All numeric.
Line 5, Child 2, Year of Birth	34	31	4	Four digit year.
Line 5, Child 2, Relationship	34	41	1	All numeric. 1= son/daughter stepchild; 2= niece/nephew; 3 =grandchild; 4=fosterchild; 5=other
Line 5, Child 2, Number of months living with you	34	51	2	All numeric.
Line 5, Child 2, Student	36	58	1	Y or N. Use Y if child was identified as student on federal EIC, N otherwise. (Do NOT use X.
Line 5, Child 2, Disabled	38	58	1	Y or N. Use Y if child was identified as disabled on federal EIC, N otherwise. (Do NOT use X.)

Schedule CT-EITC, Page 1 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Line 5, Child 3, First Name	42	11	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Line 5, Child 3, Middle Initial	42	28	1	Single UPPER CASE alpha, or blank.
Line 5, Child 3, Last Name	42	31	20	Use all UPPER CASE. The only punctuation allowed is dash (-). DO NOT INCLUDE apostrophes. Pad with spaces on the right.
Line 5, Child 3, First three digits	44	11	3	First three digits of primary SSN. All numeric.
Line 5, Child 3, Middle two digits	44	17	2	Middle two digits of primary SSN. All numeric.
Line 5, Child 3, Last four digits	44	22	4	Last four digits of primary SSN. All numeric.
Line 5, Child 3, Year of Birth	44	31	4	Four digit year.
Line 5, Child 3, Relationship	44	41	1	All numeric. 1= son/daughter stepchild; 2= niece/nephew; 3 =grandchild; 4=fosterchild; 5=other
Line 5, Child 3, Number of months living with you	44	51	2	All numeric.
Line 5, Child 3, Student	46	58	1	Y or N. Use Y if child was identified as student on federal EIC, N otherwise. (Do NOT use X.)
Line 5, Child 3, Disabled	48	58	1	Y or N. Use Y if child was identified as disabled on federal EIC, N otherwise. (Do NOT use X.)

Schedule CT-EITC, Page 2

Field Name	Field Row	Field Column	Field Length	Formatting Notes
SSN	7	60	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Line 6	13	58	1	Y or N. Use Y if taxpayer had wages with NO Connecticut income tax withheld, N otherwise. (Do NOT use X.)
Line 6a, Column A, first 2 digits	15	16	2	All numeric. Leave blank if not present.
Line 6a, Column A, last 7 digits	15	21	7	All numeric. Leave blank if not present.
Line 6a, Column B, first 10 digits	15	36	10	All numeric. Leave blank if not present. Pad with zeros on the left if required.
Line 6a, Column B, last 3 digits	15	49	3	All numeric. Leave blank if not present.
Line 6a, Column C	15	61	9	All numeric. Leave blank if not present.
Line 6b, Column A, first 2 digits	17	16	2	All numeric. Leave blank if not present.
Line 6b, Column A, last 7 digits	17	21	7	All numeric. Leave blank if not present.
Line 6b, Column B, first 10 digits	17	36	10	All numeric. Leave blank if not present. Pad with zeros on the left if required.
Line 6b, Column B, last 3 digits	17	49	3	All numeric. Leave blank if not present.
Line 6b, Column C	17	61	9	All numeric. Leave blank if not present.
Line 6c, Column A, first 2 digits	19	16	2	All numeric. Leave blank if not present.
Line 6c, Column A, last 7 digits	19	21	7	All numeric. Leave blank if not present.
Line 6c, Column B, first 10 digits	19	36	10	All numeric. Leave blank if not present. Pad with zeros on the left if required.
Line 6c, Column B, last 3 digits	19	49	3	All numeric. Leave blank if not present.
Line 6c, Column C	19	61	9	All numeric. Leave blank if not present.
Line 7	25	58	1	Y or N. Use Y if taxpayer was self-employed or had wages not reported on W-2 or 1099, N otherwise. (Do NOT use X.)
Line 7a, Column A, first 2 digits	27	16	2	All numeric. Leave blank if not present.
Line 7a, Column A, last 7 digits	27	21	7	All numeric. Leave blank if not present.
Line 7a, Column B, first 10 digits	27	36	10	All numeric. Leave blank if not present. Pad with zeros on the left if required.
Line 7a, Column B, last 3 digits	27	49	3	All numeric. Leave blank if not present.
Line 7a, Column C	27	61	9	All numeric. Leave blank if not present.

Schedule CT-EITC, Page 2 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Line 7b, Column A, first 2 digits	29	16	2	All numeric. Leave blank if not present.
Line 7b, Column A, last 7 digits	29	21	7	All numeric. Leave blank if not present.
Line 7b, Column B, first 10 digits	29	36	10	All numeric. Leave blank if not present. Pad with zeros on the left if required.
Line 7b, Column B, last 3 digits	29	49	3	All numeric. Leave blank if not present.
Line 7b, Column C	29	61	9	All numeric. Leave blank if not present.
Line 7c, Column A, first 2 digits	31	16	2	All numeric. Leave blank if not present.
Line 7c, Column A, last 7 digits	31	21	7	All numeric. Leave blank if not present.
Line 7c, Column B, first 10 digits	31	36	10	All numeric. Leave blank if not present. Pad with zeros on the left if required.
Line 7c, Column B, last 3 digits	31	49	3	All numeric. Leave blank if not present.
Line 7c, Column C	31	61	9	All numeric. Leave blank if not present.
Line 8	34	72	4	Use money format. (See Money Format, on Page 5.)
Line 9	36	73	3	Decimal. Must Equal '.230'
Line 10	38	72	4	Use money format. (See Money Format, on Page 5.)
Line 11	41	75	1	Y or N. Use Y if federal income tax return filed jointly but CT return is filed FS, N otherwise. (Do NOT use X.)
Line 12	43	67	9	Use money format. (See Money Format, on Page 5.)
Line 13	45	67	9	Use money format. (See Money Format, on Page 5.)
Line 14	47	70	6	Must be in decimal format with one digit to the left of the decimal and four digits to the right. Maximum value is 1.0000 (100%) and minimum value is 0.0000 (do not allow a negative number). Pad with zeros on the right if required.
Line 15	49	72	4	Use money format. (See Money Format, on Page 5.)
Line 16	51	72	4	Use money format. (See Money Format, on Page 5.)

Schedule CT-CHET Required Fields

Only taxpayers with a refund amount on Form CT-1040, Line 25, or Form CT-1040NR/PY, Line 27, may complete Schedule CT-CHET.

The following fields are required to be automatically populated or completed for taxpayers to continue filing, or must be completed in response to the selection of other fields.

Required to be Automatically-Populated Fields

The page of Schedule CT-CHET submitted to DRS must include the following automatically populated fields:

1. **Document Identification Numbers** - Three occurrences of the Document Identification Number (DIN) must be on each page. The QR Code and two DINs must be on each scannable page. (See Document Identification Number and Quick Reference (QR) Code, on Page 3 and 4.)
2. **Social Security Number** - The Social Security Number must appear at the top of the page.

Fields Required to Continue Completing Return

During the completion of Schedule CT-CHET, the following fields must be filled before filing is allowed to continue:

FR = Field Row; FC = Field Column; FL = Field Length

1. **Beneficiary #1:** Complete all required entries if any field is entered.
 - a. First name must be entered (FR=12; FC=11; FL= 15).
 - b. Middle initial (FR=12; FC=28; FL=1)
 - c. Last name must be entered (FR=12; FC=31; FL= 20).
 - d. Either CHET Advisor (FR=14; FC=26; FL= 1) and corresponding Account No. (FR=14; FC=38; FL= 9 and FR=14; FC=51; FL= 2) **OR** CHET Direct (FR=16; FC=26; FL= 1) and corresponding Account No. (FR=16; FC=38; FL= 4 and FR=16; FC=46; FL= 11), but under no circumstance both.
 - e. Line 1 must be entered: (FR=18; FC=50; FL= 8).
2. **Line 4:** Total CHET Individual Savings Plan Contribution. (FR=44; FC=50; FL= 8) If Line 4 is completed, amount must be entered on **Form CT-1040**, Line 24, or **Form CT-1040NR/PY**, Line 26. Taxpayer should be reminded to attach completed Schedule CT-CHET to the back of the return.

Fields Required Based on the Completion of Other Fields

During the completion of Schedule CT-CHET, the following fields must be filled before allowing the completion of any other fields:

1. **Beneficiary #2:** Complete all required entries if any field is entered.
 - a. First name must be entered (FR=23; FC=11; FL= 15).
 - b. Middle initial (FR=23; FC=28; FL=1).
 - c. Last name must be entered (FR=23; FC=31; FL= 20).
 - d. Either CHET Advisor (FR=25; FC=26; FL= 1) and corresponding Account No. (FR=25; FC=38; FL= 9 and FR=25; FC=51; FL= 2) **OR** CHET Direct (FR=27; FC=26; FL= 1) and corresponding Account No. (FR=27; FC=38; FL= 4 and FR=27; FC=46; FL= 11), but under no circumstance both.
 - e. Line 2 must be entered: (FR=29; FC=50; FL= 8).
2. **Beneficiary #3:** Complete all required entries if any field is entered.
 - a. First name must be entered (FR=34; FC=11; FL= 15).
 - b. Middle initial (FR=34; FC=28; FL=1)
 - c. Last name must be entered (FR=34; FC=31; FL= 20).
 - d. Either CHET Advisor (FR=36; FC=26; FL= 1) and corresponding Account No. (FR=36; FC=38; FL= 9 and FR=36; FC=51; FL= 2) **OR** CHET Direct (FR=38; FC=26; FL= 1) and corresponding Account No. (FR=38; FC=38; FL= 4 and FR=38; FC=46; FL= 11), but under no circumstance both.
 - e. Line 3 must be entered: (FR=40; FC=50; FL= 8).

Data Format Instructions: Form CT-CHET Absolute Position Form

Schedule CT-CHET, Page 1

Field Name	Field Row	Field Column	Field Length	Formatting Notes
SSN	7	60	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Beneficiary 1, First Name	12	11	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Beneficiary 1, Middle Initial	12	28	1	Use all UPPER CASE.
Beneficiary 1, Last Name	12	31	20	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Beneficiary 1, CHET Advisor	14	26	1	Y or N. Use Y if CHET Advisor is selected, N otherwise. (Do NOT use X.)
Beneficiary 1, Advisor Account #, First 9 Digits	14	38	9	First nine digits of CHET Advisor account number. All numeric.
Beneficiary 1, Advisor Account #, Last 2 Digits	14	51	2	Last two digits of CHET Advisor account number. All numeric.
Beneficiary 1, CHET Direct	16	26	1	Y or N. Use Y if CHET Direct is selected, N otherwise. (Do NOT use X.)
Beneficiary 1, Direct Account #, First 4 Digits	16	38	4	First four digits of CHET Direct account number. All numeric.
Beneficiary 1, Direct Account #, Last 11 Digits	16	46	11	Last eleven digits of CHET Direct account number. All numeric.
Line 1	18	50	8	Use money format. (See Money Format, on Page 4.)
Beneficiary 2, First Name	23	11	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Beneficiary 2, Middle Initial	23	28	1	Use all UPPER CASE.
Beneficiary 2, Last Name	23	31	20	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Beneficiary 2, CHET Advisor	25	26	1	Y or N. Use Y if CHET Advisor is selected, N otherwise. (Do NOT use X.)
Beneficiary 2, Advisor Account #, First 9 Digits	25	38	9	First nine digits of CHET Advisor account number. All numeric.
Beneficiary 2, Advisor Account #, Last 2 Digits	25	51	2	Last two digits of CHET Advisor account number. All numeric.
Beneficiary 2, CHET Direct	27	26	1	Y or N. Use Y if CHET Direct is selected, N otherwise. (Do NOT use X.)
Beneficiary 2, Direct Account #, First 4 Digits	27	38	4	First four digits of CHET Direct account number. All numeric.
Beneficiary 2, Direct Account #, Last 11 Digits	27	46	11	Last eleven digits of CHET Direct account number. All numeric.
Line 2	29	50	8	Use money format. (See Money Format, on Page 4.)
Beneficiary 3, First Name	34	11	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Beneficiary 3, Middle Initial	34	28	1	Use all UPPER CASE.
Beneficiary 3, Last Name	34	31	20	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Beneficiary 3, CHET Advisor	36	26	1	Y or N. Use Y if CHET Advisor is selected, N otherwise. (Do NOT use X.)
Beneficiary 3, Advisor Account #, First 9 Digits	36	38	9	First nine digits of CHET Advisor account number. All numeric.
Beneficiary 3, Advisor Account #, Last 2 Digits	36	51	2	Last two digits of CHET Advisor account number. All numeric.

Schedule CT-CHET, Page 1 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Beneficiary 3, CHET Direct	38	26	1	Y or N. Use Y if CHET Direct is selected, N otherwise. (Do NOT use X.)
Beneficiary 3, Direct Account #, First 4 Digits	38	38	4	First four digits of CHET Direct account number. All numeric.
Beneficiary 3, Direct Account #, Last 11 Digits	38	46	11	Last eleven digits of CHET Direct account number. All numeric.
Line 3	40	50	8	Use money format. (See Money Format, on Page 5.)
Line 4	44	50	8	Use money format. (See Money Format, on Page 5.)

Schedule CT-IT Credit Required Fields

Taxpayers with an amount on Form CT-1040, Line 13, or Form CT-1040NR/PY, Line 15, must complete Schedule CT-IT Credit.

The following fields are required to be automatically populated or completed for taxpayers to continue filing, or must be completed in response to the selection of other fields.

Required to be Automatically-Populated Fields

Both pages of Schedule CT-IT Credit submitted to DRS must include the following automatically populated fields:

1. **Document Identification Numbers** - Three occurrences of the Document Identification Number (DIN) must be on each page. The QR Code and two DINs must be on each scannable page. (See Document Identification Number and Quick Reference (QR) Code, on Page 3 and 4.)
2. **Social Security Number** - The Social Security Number must appear at the top of Page 2.

Data Format Instructions: Schedule CT-IT Credit Absolute Position Form

Schedule CT-IT Credit, Page 1

Field Name	Field Row	Field Column	Field Length	Formatting Notes
First Name	14	13	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Middle Initial	14	32	1	Use all UPPER CASE.
Last Name	14	37	20	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
SSN	14	61	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Spouse's First Name	18	13	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Spouse's Middle Initial	18	32	1	Use all UPPER CASE.
Spouse's Last Name	18	37	20	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Spouse's SSN	18	61	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Taxpayer name (if trust or estate)	22	13	18	Use all UPPER CASE.
FEIN	22	61	9	All numeric. DO NOT PRINT DASHES.
Part 1, Line 1, Column A	28	27	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 6, Column B	35	38	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 6, Column C	35	50	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 6, Column D	35	61	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 6, Column E	35	72	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 7, Column A	37	27	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 8, Column B	41	38	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 8, Column C	41	50	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 8, Column D	41	61	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 8, Column E	41	72	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 9, Column A	44	27	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 10, Column B	48	38	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 10, Column C	48	50	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 10, Column D	48	61	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 10, Column E	48	72	9	Use money format. (See Money Format, on Page 4.)
Part 1, Line 11, Column D	52	61	9	Use money format. (See Money Format, on Page 4.)

Schedule CT-IT Credit, Page 2

Field Name	Field Row	Field Column	Field Length	Formatting Notes
SSN	7	60	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Part 2, Line 1, Column A	15	13	9	Alphanumeric.
Part 2, Line 1, Column B	15	28	18	Alphanumeric.
Part 2, Line 1, Column C	15	52	9	Alphanumeric.
Part 2, Line 1, Column D	15	67	9	Use money format. (See Money Format, on Page 4.)
Part 2, Line 2, Column A	17	13	9	Alphanumeric.
Part 2, Line 2, Column B	17	28	18	Alphanumeric.
Part 2, Line 2, Column C	17	52	9	Alphanumeric.
Part 2, Line 2, Column D	17	67	9	Use money format. (See Money Format, on Page 4.)
Part 2, Line 3, Column A	19	13	9	Alphanumeric.
Part 2, Line 3, Column B	19	28	18	Alphanumeric.
Part 2, Line 3, Column C	19	52	9	Alphanumeric.
Part 2, Line 3, Column D	19	67	9	Use money format. (See Money Format, on Page 4.)
Part 2, Line 4, Column A	21	13	9	Alphanumeric.
Part 2, Line 4, Column B	21	28	18	Alphanumeric.
Part 2, Line 4, Column C	21	52	9	Alphanumeric.
Part 2, Line 4, Column D	21	67	9	Use money format. (See Money Format, on Page 4.)
Part 2, Line 5, Column A	23	13	9	Alphanumeric.
Part 2, Line 5, Column B	23	28	18	Alphanumeric.
Part 2, Line 5, Column C	23	52	9	Alphanumeric.
Part 2, Line 5, Column D	23	67	9	Use money format. (See Money Format, on Page 4.)
Part 2, Line 6, Column A	25	13	9	Alphanumeric.
Part 2, Line 6, Column B	25	28	18	Alphanumeric.
Part 2, Line 6, Column C	25	52	9	Alphanumeric.
Part 2, Line 6, Column D	25	67	9	Use money format. (See Money Format, on Page 4.)
Part 2, Line 7, Column A	27	13	9	Alphanumeric.
Part 2, Line 7, Column B	27	28	18	Alphanumeric.
Part 2, Line 7, Column C	27	52	9	Alphanumeric.
Part 2, Line 7, Column D	27	67	9	Use money format. (See Money Format, on Page 4.)
Part 2, Line 8, Column D	29	67	9	Use money format. (See Money Format, on Page 4.)
Part 3, Line 1 - Voucher Number	35	21	8	Alphanumeric
Part 3, Line 1 - Original Holder	35	51	1	Pass 'O' if Original or blank
Part 3, Line 1 - Assignee	35	62	1	Pass 'A' if Assignee or blank
Part 3, Line 2 - Voucher Number	37	21	8	Alphanumeric
Part 3, Line 2 - Original Holder	37	51	1	Pass 'O' if Original or blank
Part 3, Line 2 - Assignee	37	62	1	Pass 'A; if Assignee or blank

Supplemental Schedule CT-1040WH Required Fields

Only taxpayers with more than five W-2, 1099, or Schedule CT-K1 may complete Supplemental Schedule CT-1040WH.

The following fields are required to be automatically populated or completed for taxpayers to continue filing, or must be completed in response to the selection of other fields.

Required to be Automatically-Populated Fields

The page of Schedule CT-CHET submitted to DRS must include the following automatically populated fields:

1. **Document Identification Numbers** - Three occurrences of the Document Identification Number (DIN) must be on each page. The QR Code and two DINs must be on each scannable page. (See Document Identification Number and Quick Reference (QR) Code, on Page 3 and 4.)

Data Format Instructions: Supplemental Schedule CT-1040WH Absolute Position Form

Supplemental Schedule CT-1040WH, Page 1

Field Name	Field Row	Field Column	Field Length	Formatting Notes
First Name	14	13	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Middle Initial	14	32	1	Use all UPPER CASE.
Last Name	14	37	20	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
SSN	14	61	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Spouse's First Name	18	13	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Spouse's Middle Initial	18	32	1	Use all UPPER CASE.
Spouse's Last Name	18	37	20	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Spouse's SSN	18	61	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Line 1	21	67	8	Alphanumeric.
Line 2a, Col A	28	16	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 2b, Col A	29	16	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 2c, Col A	30	16	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 2d, Col A	31	16	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 2e, Col A	32	16	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 2f, Col A	33	16	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 2g, Col A	34	16	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 2a, Col B	28	38	9	Use money format. (See Money Format, on Page 4.)
Line 2b, Col B	29	38	9	Use money format. (See Money Format, on Page 4.)
Line 2c, Col B	30	38	9	Use money format. (See Money Format, on Page 4.)
Line 2d, Col B	31	38	9	Use money format. (See Money Format, on Page 4.)
Line 2e, Col B	32	38	9	Use money format. (See Money Format, on Page 4.)
Line 2f, Col B	33	38	9	Use money format. (See Money Format, on Page 4.)
Line 2g, Col B	34	38	9	Use money format. (See Money Format, on Page 4.)

Supplemental Schedule CT-1040WH, Page 1 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Line 2a, Col C	28	65	9	Use money format. (See Money Format, on Page 4.) If Line 2a, Column C is populated, then corresponding Column A line must not be blank.
Line 2b, Col C	29	65	9	Use money format. (See Money Format, on Page 4.) If Line 2b, Column C is populated, then corresponding Column A line must not be blank.
Line 2c, Col C	30	65	9	Use money format. (See Money Format, on Page 4.) If Line 2c, Column C is populated, then corresponding Column A line must not be blank.
Line 2d, Col C	31	65	9	Use money format. (See Money Format, on Page 4.) If Line 2d, Column C is populated, then corresponding Column A line must not be blank.
Line 2e, Col C	32	65	9	Use money format. (See Money Format, on Page 4.) If Line 2e, Column C is populated, then corresponding Column A line must not be blank.
Line 2f, Col C	33	65	9	Use money format. (See Money Format, on Page 4.) If Line 2f, Column C is populated, then corresponding Column A line must not be blank.
Line 2g, Col C	34	65	9	Use money format. (See Money Format, on Page 4.) If Line 2g, Column C is populated, then corresponding Column A line must not be blank.
Line 3	37	65	9	Use money format. (See Money Format, on Page 4.)

Schedule CT-PE Required Fields

The following fields are required to be automatically populated or completed for taxpayers to continue filing, or must be completed in response to the selection of other fields.

Required to be Automatically-Populated Fields

The page of Schedule CT-PE submitted to DRS must include the following automatically populated fields:

1. **Document Identification Numbers** - Three occurrences of the Document Identification Number (DIN) must be on each page. The QR Code and two DINs must be on each scannable page. (See Document Identification Number and Quick Reference (QR) Code, on Page 3 and 4.)

Data Format Instructions: Schedule CT-PE Absolute Position Form

Schedule CT-PE, Page 1

Field Name	Field Row	Field Column	Field Length	Formatting Notes
First Name	14	13	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Middle Initial	14	32	1	Use all UPPER CASE.
Last Name	14	37	20	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
SSN	14	61	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Spouse's First Name	18	13	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Spouse's Middle Initial	18	32	1	Use all UPPER CASE.
Spouse's Last Name	18	37	20	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Spouse's SSN	18	61	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Trust or Estate Name	22	13	40	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right. Leave blank if not present
FEIN	22	61	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 1a, Col A	32	21	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 1a, Col B	32	55	9	Use money format. (See Money Format, on Page 4.)
Line 1b, Col A	34	21	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 1b, Col B	34	55	9	Use money format. (See Money Format, on Page 4.)
Line 1c, Col A	36	21	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 1c, Col B	36	55	9	Use money format. (See Money Format, on Page 4.)
Line 1d, Col A	38	21	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 1d, Col B	38	55	9	Use money format. (See Money Format, on Page 4.)
Line 1e, Col A	40	21	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 1e, Col B	40	55	9	Use money format. (See Money Format, on Page 4.)
Line 1f, Col B	42	55	9	All numeric. DO NOT PRINT DASHES. Leave blank if not present.
Line 1	46	55	9	Use money format. (See Money Format, on Page 4.)

Form CT-6251 Required Fields

Only taxpayers who are subject to and required to pay the federal alternative minimum tax may complete Form CT-6251.

The following fields are required to be automatically populated or completed for taxpayers to continue filing, or must be completed in response to the selection of other fields.

Required to be Automatically-Populated Fields

Both pages of Form CT-6251 submitted to DRS must include the following automatically populated fields:

1. **Document Identification Numbers** - Three occurrences of the Document Identification Number (DIN) must be on each page. The QR Code and two DINs must be on each scannable page. (See Document Identification Number and Quick Reference (QR) Code, on Page 3 and 4.)
2. **Social Security Number** - The Social Security Number must appear at the top of Page 2.

Data Format Instructions: Form CT-6251 Absolute Position Form Form CT-6251, Page 1

Field Name	Field Row	Field Column	Field Length	Formatting Notes
First Name	14	13	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Middle Initial	14	32	1	Use all UPPER CASE.
Last Name	14	37	20	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
SSN	14	61	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Spouse's First Name	18	13	15	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Spouse's Middle Initial	18	32	1	Use all UPPER CASE.
Spouse's Last Name	18	37	20	Use all UPPER CASE. The only punctuation allowed is a dash. Pad with spaces on the right.
Spouse's SSN	18	61	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Line 1	20	67	9	Use money format. (See Money Format, on Page 4.)
Line 2	21	67	9	Use money format. (See Money Format, on Page 4.)
Line 3	22	67	9	Use money format. (See Money Format, on Page 4.)
Line 4	23	67	9	Use money format. (See Money Format, on Page 4.)
Line 5	24	67	9	Use money format. (See Money Format, on Page 4.)
Line 6	26	67	9	Use money format. (See Money Format, on Page 4.)
Line 7	28	67	9	Use money format. (See Money Format, on Page 4.)
Line 8	29	67	9	Use money format. (See Money Format, on Page 4.)
Line 9	30	67	9	Use money format. (See Money Format, on Page 4.)
Line 10	32	67	9	Use money format. (See Money Format, on Page 4.)
Line 11	34	67	9	Use money format. (See Money Format, on Page 4.)
Line 12	42	67	9	Use money format. (See Money Format, on Page 4.)
Line 13	43	67	9	Use money format. (See Money Format, on Page 4.)
Line 14	44	67	9	Use money format. (See Money Format, on Page 4.)
Line 15	45	67	9	Use money format. (See Money Format, on Page 4.)
Line 16	46	67	9	Use money format. (See Money Format, on Page 4.)
Line 17	47	67	9	Use money format. (See Money Format, on Page 4.)

Form CT-6251, Page 1 - continued

Field Name	Field Row	Field Column	Field Length	Formatting Notes
Line 18	48	70	6	Must be in decimal format with one digit to the left of the decimal and four digits to the right. Maximum value is 1.0000 (100%) and minimum value is 0.0000 (do not allow a negative number). Pad with zeros on the right if required.
Line 19	49	67	9	Use money format. (See Money Format, on Page 4.)
Line 20	50	67	9	Use money format. (See Money Format, on Page 4.)
Line 21	51	67	9	Use money format. (See Money Format, on Page 4.)
Line 22	53	67	9	Use money format. (See Money Format, on Page 4.)
Line 23	55	67	9	Use money format. (See Money Format, on Page 4.)

Form CT-6251, Page 2

Field Name	Field Row	Field Column	Field Length	Formatting Notes
SSN	7	60	9	Duplicated from Page 1. All numeric. DO NOT PRINT DASHES.
Line 24	13	67	9	Use money format. (See Money Format, on Page 4.)
Line 25	14	67	9	Use money format. (See Money Format, on Page 4.)
Line 26	15	67	9	Use money format. (See Money Format, on Page 4.)
Line 27	16	67	9	Use money format. (See Money Format, on Page 4.)
Line 28	17	67	9	Use money format. (See Money Format, on Page 4.)
Line 29	18	67	9	Use money format. (See Money Format, on Page 4.)
Line 30	21	67	9	Use money format. (See Money Format, on Page 4.)
Line 31	23	67	9	Use money format. (See Money Format, on Page 4.)
Line 32	24	67	9	Use money format. (See Money Format, on Page 4.)
Line 33	25	67	9	Use money format. (See Money Format, on Page 4.)
Line 34	26	67	9	Use money format. (See Money Format, on Page 4.)
Line 35	27	67	9	Use money format. (See Money Format, on Page 4.)
Line 36	28	67	9	Use money format. (See Money Format, on Page 4.)
Line 37	30	67	9	Use money format. (See Money Format, on Page 4.)
Line 38	31	67	9	Use money format. (See Money Format, on Page 4.)
Line 39	32	67	9	Use money format. (See Money Format, on Page 4.)
Line 40	33	67	9	Use money format. (See Money Format, on Page 4.)
Line 41	34	67	9	Use money format. (See Money Format, on Page 4.)
Line 42	35	67	9	Use money format. (See Money Format, on Page 4.)
Line 43	36	67	9	Use money format. (See Money Format, on Page 4.)
Line 44	37	67	9	Use money format. (See Money Format, on Page 4.)
Line 45	39	67	9	Use money format. (See Money Format, on Page 4.)
Line 46	40	67	9	Use money format. (See Money Format, on Page 4.)
Line 47	42	67	9	Use money format. (See Money Format, on Page 4.)
Line 48	43	67	9	Use money format. (See Money Format, on Page 4.)
Line 49	44	67	9	Use money format. (See Money Format, on Page 4.)
Line 50	45	67	9	Use money format. (See Money Format, on Page 4.)
Line 51	48	67	9	Use money format. (See Money Format, on Page 4.)
Line 52	51	67	9	Use money format. (See Money Format, on Page 4.)

III. 2-D Barcode Requirements

Inclusion of a 2D barcode on the form is required.

Barcode Location and Properties

1. The location reserved for the barcode is within the box defined on the lower half of page 1.
The recommended size is 1½ inches high by 5 inches wide. Maximize the size of the barcode in the available space. Make the barcode as large as possible while staying within the confines of the box.
2. The barcode type is Normal PDF417.
3. The error correction level is 4.
4. The DPI is a minimum of 300 DPI

Barcode Data

1. The barcode contains text data consisting of a list of fields. Each field is terminated (delimited) by a carriage return (CR) character.
2. Ordinals - Form and field count. **Do not omit any fields**, even if they are zero or blank.
CT-1040 has exactly 138 fields
CT-1040NR/PR has exactly 133 fields
Schedule CT-EITC has exactly 52 fields
Schedule CT-CHET has exactly 32 fields
Schedule CT-IT Credit has exactly 28 fields
Supplemental Schedule CT-1040WH has exactly 16 fields
Schedule CT-PE has exactly 13 fields
Schedule CT-6251 has exactly 17 fields
3. The fields must be in **exactly** the order specified in the tables below.
4. For each field, print the data **exactly** as it appears on the form (refer to the data formatting notes), except for the following instances:
 - For beginning and ending dates, use the numeric format MMDDYYYY rather than spelling out the month. (Do not include slashes, dashes, or spaces. Always include a two-digit month, two-digit day, and four-digit year.)
 - For the filing status, print S for Single, J for Filing Jointly, M for Filing Separately, H for Head of Household, or W for Qualified Widow(er).
 - For direct deposit account information print C for checking account, S for savings account, or leave blank if no direct deposit.
 - **NR/PY form only** For the Non-resident/Part Year resident field, print N for non-resident or P for part-year resident.
 - It is permissible, but not required, to trim excess spaces from the right/left of each field. (Doing so can reduce the total number of characters in the barcode, which can make the barcode easier to read.)

Form CT-1040 Barcode Fields

Print all fields in order. Do not omit any fields. Terminate each field with a carriage return (CR) character. Also see CT-1040 Barcode Fields document which includes the field length and field requirements for each ordinal.

ORDINAL	FIELD NAME	ORDINAL	FIELD NAME	ORDINAL	FIELD NAME	ORDINAL	FIELD NAME
1	DIN (Note 1)	39	Line 13	77	Paid Preparer Name	114	Line 57 Col. B
2	Beginning Date (Note 2)	40	Line 14	78	FEIN	115	Line 58 Col. A
3	Ending Date (Note 2)	41	Line 15	79	Line 31	116	Line 58 Col. B
4	SSN	42	Line 16	80	Line 32	117	Line 59
5	Spouse SSN	43	Line 18a Col. A	81	Line 33	118	T/P or Spouse > 65Check Box
6	Filing Status (Note 3)	44	Line 18a Col. C	82	Line 34	119	Dependant on Fed Ret Check Box
7	First Name	45	Line 18b Col. A	83	Line 35	120	Line 60
8	Middle Initial	46	Line 18b Col. C	84	Line 36	121	Line 61
9	Last Name	47	Line 18c Col. A	85	Line 36a	122	Line 62
10	Suffix	48	Line 18c Col. C	86	Line 37	123	Line 63
11	Deceased (Note 4)	49	Line 18d Col. A	87	Line 38	124	Line 68
12	Spouse First Name	50	Line 18d Col. C	88	Line 39	125	Line 69a
13	Spouse Middle Initial	51	Line 18e Col. A	89	Line 40	126	Line 69b
14	Spouse Last Name	52	Line 18e Col. C	90	Line 41	127	Line 69c
15	Spouse Suffix	53	Line 18f	91	Line 42	128	Line 69d
16	Spouse Deceased (Note 4)	54	Line 18	92	Line 43	129	Line 70a
17	Address 1	55	Line 19	93	Line 44	130	Line 70b
18	Address 2	56	Line 20	94	Line 45	131	Line 70c
19	City	57	Line 20a	95	Line 46	132	Line 70d
20	State	58	Line 20b	96	Line 47	133	Line 70e
21	Zip	59	Line 20c	97	CHET Account Number (Note 6)	134	Line 70f
22	CT-8379	60	Line 21	98	Line 48	135	Line 70g
23	Form CT-2210	61	Line 22	99	Line 48a	136	Line 70h
24	CT-1040 CRC	62	Line 23	100	Line 49	137	Line 70
25	City of Residence	63	Line 24	101	Line 50	138	Taxpayer Email
26	Zip Code of Residence	64	Line 24a	102	Line 51		
27	Line 1	65	Line 25	103	Line 52 Col. A (Note 7)		
28	Line 2	66	Line 25a (Note 5)	104	Line 52 Col. B (Note 7)		
29	Line 3	67	Line 25b	105	Line 53 Col. A		
30	Line 4	68	Line 25c	106	Line 53 Col. B		
31	Line 5	69	Line 25d	107	Line 54 Col. A		
32	Line 6	70	Line 26	108	Line 54 Col. B		
33	Line 7	71	Line 27	109	Line 55 Col. A		
34	Line 8	72	Line 28	110	Line 55 Col. B		
35	Line 9	73	Line 29	111	Line 56 Col. A		
36	Line 10	74	Line 30	112	Line 56 Col. B		
37	Line 11	75	Home/Cell Telephone	113	Line 57 Col. A		
38	Line 12	76	Preparer's PTIN				

Form CT-1040NR/PY Barcode Fields

Print all fields in order. Do not omit any fields. Terminate each field with a carriage return (CR) character. Also see CT-1040NR/PY Barcode Fields document which includes the field length and field requirements for each ordinal.

ORDINAL	FIELD NAME	ORDINAL	FIELD NAME	ORDINAL	FIELD NAME	ORDINAL	FIELD NAME
1	DIN (Note 1)	38	Line 11	76	Line 32	112	Line 57 Col. B
2	Beginning Date (Note 2)	39	Line 12	77	Home/Cell Telephone	113	Line 58 Col. A
3	Ending Date (Note 2)	40	Line 13	78	Preparer's PTIN	114	Line 58 Col. B
4	SSN	41	Line 14	79	Paid Preparer Name	115	Line 59 Col. A
5	Spouse SSN	42	Line 15	80	FEIN	116	Line 59 Col. B
6	Filing Status (Note 3)	43	Line 16	81	Line 33	117	Line 60 Col. A
7	First Name	44	Line 17	82	Line 34	118	Line 60 Col. B
8	Middle Initial	45	Line 18	83	Line 35	119	Line 61
9	Last Name	46	Line 20a Col. A	84	Line 36	120	Line 62a
10	Suffix	47	Line 20a Col. C	85	Line 37	121	Line 62b
11	Deceased (Note 4)	48	Line 20b Col. A	86	Line 38	122	Line 62c
12	Spouse First Name	49	Line 20b Col. C	87	Line 38a	123	Line 62d
13	Spouse Middle Initial	50	Line 20c Col. A	88	Line 39	124	Line 63a
14	Spouse Last Name	51	Line 20c Col. C	89	Line 40	125	Line 63b
15	Spouse Suffix	52	Line 20d Col. A	90	Line 41	126	Line 63c
16	Spouse Deceased (Note 4)	53	Line 20d Col. C	91	Line 42	127	Line 63d
17	Address 1	54	Line 20e Col. A	92	Line 43	128	Line 63e
18	Address 2	55	Line 20e Col. C	93	Line 44	129	Line 63f
19	City	56	Line 20f	94	Line 45	130	Line 63g
20	State	57	Line 20	95	Line 46	131	Line 63h
21	Zip	58	Line 21	96	Line 47	132	Line 63
22	City of Residence	59	Line 22	97	Line 48	133	Taxpayer Email
23	Zip Code of Residence	60	Line 22a	98	Line 49		
24	CT-8379	61	Line 22b	99	CHET Account Number (Note 7)		
25	Form CT-2210	62	Line 23	100	Line 50		
26	Sch. CT-1040 CRC	63	Line 24	101	Line 50a		
27	NR/PY (Note 5)	64	Line 25	102	Line 51		
28	Line 1	65	Line 26	103	Line 52		
29	Line 2	66	Line 26a	104	Line 53		
30	Line 3	67	Line 27	105	Line 54 Col. A (Note 8)		
31	Line 4	68	Line 27a (Note 6)	106	Line 54 Col. B (Note 8)		
32	Line 5	69	Line 27b	107	Line 55 Col. A		
33	Line 6	70	Line 27c	108	Line 55 Col. B		
34	Line 7	71	Line 27d	109	Line 56 Col. A		
35	Line 8	72	Line 28	110	Line 56 Col. B		
36	Line 9	73	Line 29	111	Line 57 Col. A		
37	Line 10	74	Line 30				
		75	Line 31				

Schedules CT-EITC / CT-CHET / CT-IT Barcode Fields

Print all fields in order. Do not omit any fields. Terminate each field with a carriage return (CR) character. Also see CT-1040 Barcode Fields document which includes the field length and field requirements for each ordinal.

<u>Schedule CT-EITC</u>		<u>Schedule CT-EITC - cont.</u>		<u>Schedule CT-CHET</u>		<u>Schedule CT-IT</u>	
ORDINAL	FIELD NAME	ORDINAL	FIELD NAME	ORDINAL	FIELD NAME	ORDINAL	FIELD NAME
1	DIN (NOTE 1)	37	Line 6c, Column A	1	DIN (NOTE 1)	1	DIN (NOTE 1)
2	Line 1	38	Line 6c, Column B	2	#1 First Name	2	Line 6 Col. D
3	Line 2	39	Line 7a, Column A	3	#1 Middle Initial	3	Line 6 Col. E
4	Line 3	40	Line 7a, Column B	4	#1 Last Name	4	Line 8 Col. D
5	Line 4	41	Line 7b, Column A	5	#1 Advisor	5	Line 8 Col. E
6	Child 1, First Name	42	Line 7b, Column B	6	#1 Advisor Acct # 1st 9	6	Line 10 Col. D
7	Child 1, Middle Initial	43	Line 7c, Column A	7	#1 Advisor Acct # Last 2	7	Line 10 Col. E
8	Child 1, Last Name	44	Line 7c, Column B	8	#1 Direct	8	Line 1 Col. C
9	Child 1, SSN	45	Line 8	9	#1 Direct Acct # 1st 4	9	Line 1 Col. D
10	Child 1, Birth Year	46	Line 10	10	#1 Direct Acct # Last 11	10	Line 2 Col. C
11	Child 1, Relationship	47	Line 11	11	Line 1	11	Line 2 Col. D
12	Child 1, Months	48	Line 12	12	#2 First Name	12	Line 3 Col. C
13	Child 1, Student	49	Line 13	13	#2 Middle Initial	13	Line 3 Col. D
14	Child 1, Disabled	50	Line 14	14	#2 Last Name	14	Line 4 Col. C
15	Child 2, First Name	51	Line 15	15	#2 Advisor	15	Line 4 Col. D
16	Child 2, Middle Initial	52	Line 16	16	#2 Advisor Acct # 1st 9	16	Line 5 Col. C
17	Child 2, Last Name			17	#2 Advisor Acct # Last 2	17	Line 5 Col. D
18	Child 2, SSN			18	#2 Direct	18	Line 6 Col. C
19	Child 2, Birth Year			19	#2 Direct Acct # 1st 4	19	Line 6 Col. D
20	Child 2, Relationship			20	#2 Direct Acct # Last 11	20	Line 7 Col. C
21	Child 2, Months			21	Line 2	21	Line 7 Col. D
22	Child 2, Student			22	#3 First Name	22	Line 8
23	Child 2, Disabled			23	#3 Middle Initial	23	Voucher Num.
24	Child 3, First Name			24	#3 Last Name	24	Original Holder
25	Child 3, Middle Initial			25	#3 Advisor	25	Assignee
26	Child 3, Last Name			26	#3 Advisor Acct # 1st 9	26	Voucher Num,
27	Child 3, SSN			27	#3 Advisor Acct # Last 2	27	Original Holder
28	Child 3, Birth Year			28	#3 Direct	28	Assignee
29	Child 3, Relationship			29	#3 Direct Acct # 1st 4		
30	Child 3, Months			30	#3 Direct Acct # Last 11		
31	Child 3, Student			31	Line 3		
32	Child 3, Disabled			32	Line 4		
33	Line 6a, Column A						
34	Line 6a, Column B						
35	Line 6b, Column A						
36	Line 6b, Column B						

Schedules CT-1040WH / CT-PE / CT-6251 Barcode Fields

Print all fields in order. Do not omit any fields. Terminate each field with a carriage return (CR) character. Also see CT-1040 Barcode Fields document which includes the field length and field requirements for each ordinal.

Schedule CT-1040WH

ORDINAL	FIELD NAME
1	DIN (NOTE 1)
2	Line 2a, Col A
3	Line 2a, Col C
4	Line 2b, Col A
5	Line 2b, Col C
6	Line 2c, Col A
7	Line 2c, Col C
8	Line 2d, Col A
9	Line 2d, Col C
10	Line 2e, Col A
11	Line 2e, Col C
12	Line 2f, Col A
13	Line 2f, Col C
14	Line 2g, Col A
15	Line 2g, Col C
16	Line 3

Schedule CT-PE

ORDINAL	FIELD NAME
1	DIN (NOTE 1)
2	Line 1a Col. A
3	Line 1a Col. B
4	Line 1b Col. A
5	Line 1b Col. B
6	Line 1c Col. A
7	Line 1c Col. B
8	Line 1d Col. A
9	Line 1d Col. B
10	Line 1e Col. A
11	Line 1e Col. B
12	Line 1f Col. B
13	Line 1

Schedule CT-6251

ORDINAL	FIELD NAME
1	DIN (NOTE 1)
2	Line 1
3	Line 2
4	Line 4
5	Line 5
6	Line 10
7	Line 12
8	Line 13
9	Line 18
10	Line 20
11	Line 22
12	Line 23
13	Line 24
14	Line 25
15	Line 27
16	Line 32
17	Line 52

Barcode Field Notes

Note 1 - The DIN is printed at the top and bottom of the page.

Note 2 - Print dates in MMDDYYYY format.

Note 3 - Print S for Single, J for Filing Jointly (FJ), M for Filing Separately (FS), H for Head of Household (HH), or W for Qualifying Widow(er) (QW).

Note 4 - Print Y for deceased. N otherwise.

Note 5 - Print C for checking, S for savings.

Note 6 - Print account number in NNNNNNNNNNNNNNNN format.

Note 7 - Print only the two-letter jurisdiction code.