	Form CT-1040 Connecticut Resident Income Tax Return	For DRS Use Only 2011 CT-1040
	Complete return in blue or black ink only.	Taxpayers must sign declaration on reverse side.
For t	ne year January 1 - December 31, 2011, or other taxable year beginr	°
1	Filing Status - Check only one box. Filing jointly for federal and Connecticut only Single Filing jointly for federal and Connecticut only	onnecticut Connecticut only Head of Qualifying widow(er) with dependent child
_		e's name here and SSN below.
D d	Check if deceased	se Social Security Number Check if deceased
ailir	Your first name MI Last	name (If two last names, insert a space between names.) Suffix (Jr./Sr
ame, mailing or town here	If joint return, spouse's first name MI Last	name (If two last names, insert a space between names.) Suffix (Jr./Sr
nam v or t		
Print your SSN, name, mailing address, and citv or town here	Mailing address (number and street, apartment number, suite number, PO B	
ur S anc		
Print you address.	City, town, or post office (If town is two words, leave a space between the wo	rds.) State ZIP code
Prin		
→	Enter city or town of residence if different from above.	ZIP code
		these forms. Attach the form(s) to the front of the return.
	checked any boxes on Part 1. Form CT-8379	Form CT-1040CRC Whole Dollars Only
2	1. Federal adjusted gross income from federal Form 1040, Form 1040A, Line 21; or Form 1040EZ, Line 4	Line 37;
	2. Additions to federal adjusted gross income from Schedu	le 1, Line 39 2. 00
	3. Add Line 1 and Line 2.	3,,, 00
	4. Subtractions from federal adjusted gross income from S	<i>chedule 1</i> , Line 50 4. , , , , 00
•	5. Connecticut adjusted gross income: Subtract Line 4 f	rom Line 3. 5. 00
le. ns.	6. Income tax from tax tables or Tax Calculation Schedule: S	ee instructions, Page 18. 6. , , , , , , 00
stap forr	7. Credit for income taxes paid to qualifying jurisdictions from	n Schedule 2, Line 59 7. , , , , , 00
o not 1099	8. Subtract Line 7 from Line 6. If Line 7 is greater than Line	6, enter "0." 8. , , , , 00
2 P	9. Connecticut alternative minimum tax from Form CT-625	9,,, 00
k here d W-:	10. Add Line 8 and Line 9.	10. , , , 00
Clip check here. Do not staple. Do not send W-2 or 1099 forms.	11. Credit for property taxes paid on your primary residence Complete and attach <i>Schedule 3</i> on Page 4 or your cred	
Clip Do r	12. Subtract Line 11 from Line 10. If less than zero, enter "0	" 12. , , , , , , , , 00
_	13. Total allowable credits from Schedule CT-IT Credit, Part	I, Line 11 13,, 00
÷	14. Connecticut income tax: Subtract Line 13 from Line 12. If	less than zero, enter "0." 14,,, 00
	15. Individual use tax from Schedule 4, Line 69: If no tax is o	lue, enter "0." 15,, 00
	16. Add Line 14 and Line 15.	16 00

Due date: April 15, 2012 - Attach a copy of all applicable schedules and forms to this return.

For a faster refund, file your return electronically at www.ct.gov/DRS and choose direct deposit.

-		2	2011	For	m (CT-10	040 -	Page	e 2 of -	4		Y	our Soci	al Security	/ Numb	er •			- [<u>- [</u>		
1	17. Ente	r amou	int fro	om L	ine	e 16.									17.								. 00
3						leral II		from	Box b o n Form		2,	Coll Connecticut	u mn B wages, t	ips, etc.		Co	onnect		lumn	-	withh	ıeld	
N-2 =	and 1099	18a.			-[•	•		. 00	18a.		,			,			. 00
nfor	mation	18b.			-Г						•	•		. 00	18b.					1		\square	00
nforn	enter nation	18c.			-Г)		- 00	18c.		77			1		ī	. 0
	your W-2 1099 form	^s 18d.			-Г							•		. 00	18d.					1,		П	. 0
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		l Conn	ectic	ut in	com	ne tax	< with	neld:	Add ai	mount	ts in	ental Schedu Column C an vithholding w	d enter l	nere.			,], [. 0 . 0
	19. All 2	011 es	tima	ted t	ах	pavm	nents	and	anv ov	/erpa	vme	ents applied f	rom a r	prior vear	_ 19.					1			0
									-		-	or extension	-	-	20.],[<u>, </u>	0
										•				,			,], []			. 0
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	21. Tot a	al payr	nent	s: A	dd I	Lines	5 18, 1	9, 20), and	20a.					21.		!_			<u>, </u>			. 0
	22. Ove	rpaym	ent: I	lf Lin	ne 2	21 is r	nore	than	Line 1	l7, su	btra	act Line 17 fro	om Line	21.	22.		_,_			,			. 0
2	23. Am	ount of	Line	22 (ove	rpayr	ment	you v	want a	pplie	d to	o your 2012	estima	ted tax	23.		,			7			. 0
								•			es fr	om Schedule	5, Line	e 70	24.		,			,			. 0
	25. Ref For If yo	faster	refun	nd, u	se	direct	t depo	osit b	y com	pletin	g L e is	ines 25a, 25t sued by debi	o, and 2 t card c	25c. or check.	25.],[],		1	. 0
	25a. Che Savi	ngs	25b.	nur	nbe	er						25c. Acco											
	25d. Will			-								Yes	no 17		- 26								0
												ne 21 from Li	ne 17.		26.					, <u> </u>		ŀ	. 0
	27. If la 28. If la		-	-		-	-		-			nonths or frac	ction of	a month	27.		_,_						. 0
-		then b				. e. up	.,								28.					,			. 0
2							f esti	nate	d tax f	rom F	Forr	n CT-2210:			29.		,			,			. 0
;	30. Tot a	instruc al amo			-		es 26	thro	ugh 2	9.					30.		,			,			. 0
י 	schedule understai \$5,000, o	s and st nd the p r imprise yer is ba ature signature	ateme enalty onme ased e (if joir	ents) y for nt for on al	and willf r not Il inf	d, to th fully de t more	he bes eliveri e than	at of m ng a f five y	ny knov alse re ears, o	vledge eturn o r both.	e ano r do The	I this return (ind d belief, it is tru cument to DRS e declaration of as any knowled	e, comp S is a fine a paid p Ige. Date Date	lete, and c e of not me	orrect. ore tha	Ĭ n	Daytim (Daytim (Prepar) ne telep)	ohone	numbe			
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Complete applicable schedules on Pages 3 and 4 and send all four pages of the return to DRS.

2011 Form CT-1040 - Page 3 of 4 Yo Security	our So y Num		•		-		-		
Schedule 1 - Modifications to Federal Adjusted Gross Income See instructions, Page 22.		Ent	er al	l item	s as p	ositiv	/e nur	mbers.	
31. Interest on state and local government obligations other than Connecticut	31.			,		,			. 00
 Mutual fund exempt-interest dividends from non-Connecticut state or municipal government obligations 	32.			,		,			. 00
53/Aleserved.tok.tuksre/use/////////////////////////////////	//%			////	////	////	////	/////	////
 Taxable amount of lump-sum distributions from qualified plans not included in federal adjusted gross income 	34.],		,[. 00
35. Beneficiary's share of Connecticut fiduciary adjustment: Enter only if greater than zero.	35.								. 00
36. Loss on sale of Connecticut state and local government bonds	36.								. 00
37. Domestic production activity deduction from federal Form 1040, Line 35	37.								. 00
38. Other - specify •	38.								. 00
39. Total additions: Add Lines 31 through 38. Enter here and on Line 2.	39.								. 00
40. Interest on U.S. government obligations	40.			,					. 00
41. Exempt dividends from certain qualifying mutual funds derived from U.S. government obligations	41.								. 00
42. Social Security benefit adjustment: See Social Security Benefit Adjustment Worksheet, Page 24.	. 42.			,		,			. 00
43. Refunds of state and local income taxes	43.			,		,			. 00
44. Tier 1 and Tier 2 railroad retirement benefits and supplemental annuities	44.			,		,[. 00
45. 50% of military retirement pay	45.			,		,			. 00
46. Beneficiary's share of Connecticut fiduciary adjustment: Enter only if less than zero.	46.			,		,			. 00
47. Gain on sale of Connecticut state and local government bonds	47.			,		,[. 00
48. Connecticut Higher Education Trust (CHET) contributions Enter CHET account number:	48.			,		,			. 00
Do not add spaces or dashes. 49. Other - specify: Do not include out of state income.	49.			1					00
50. Total subtractions: Add Lines 40 through 49. Enter here and on Line 4.	49. 50.								. 00
Schedule 2 - Credit for Income Taxes Paid to Qualifying Jurisdictions You must attach a copy of your return filed with the qualifying jurisdiction(s) or your credit w	5		allo	wed.					

51. Modified Connecticut adjusted gross income		_					51.	,		,				00
See instructions, Page 28.				lumn	Α	-			-	olum	n B		~	
52. Enter qualifying jurisdiction's name and two-letter code: See instructions, Page 28.	52.		 Nar 	ne		Co	de		• Na	ame			Co	de
53. Non-Connecticut income included on Line 51 and reported on a qualifying jurisdiction's income tax return: Complete <i>Schedule 2 Worksheet</i> , Page 28.							00							00
54. Divide Line 53 by Line 51. May not exceed 1.0000		y				•		,					•	
55. Income tax liability: Subtract Line 11 from Line 6.	55.					<u> </u>	00			7				00
56. Multiply Line 54 by Line 55.	56.			,			00	,		,				00
57. Income tax paid to a gualifying jurisdiction													_	
See instructions, Page 29.	57.						00			7				00
58. Enter the lesser of Line 56 or Line 57.	58.			,			00			,				00
59. Total credit: Add Line 58, all columns. Enter he	ere and	d on Line 7.				59.		,		,			00	_
Complete applicable schedule	s on	Page 4	and s	send	all fo	our pa	ages	of the	retur	n to	DRS	5.		

•	2011 Form CT-1040 - Page 4 of 4			Secu	Your S urity Nur		•	-		-		
Schedule 3 - Prope Qualifying Property	rty Tax Credit See instructions, F Primary Residence	Page 27.	Aut	o 1			(joint retu		Auto 2 alifying w	vidow(er) only))
Name of Connecticut Tax Town or District	•	•					•					
Description of Property If primary residence, enter street address. If motor vehicle, enter year,		•					•					
make, and model. Date(s) Paid	• / / 2011	•	/	/	2011		•		/	/ 20	11	
	• / / 2011	•	′ /		2011		•		' /	/ 20		
Amount Paid	60. 00	61.				00	62.				٦.	00
	id: Add Lines 60, 61, and 62.][]7		•		63.				٦.	00
64. Maximum property ta	x credit allowed						64.	•		30	0	00
65. Enter the lesser of Line	e 63 or Line 64.						65.	•].	00
	ount for your filing status and Connecti it appears on Page 28. If zero, enter th						66.	•].		
67. Multiply Line 65 by Line	e 66.						67.	•				00
	Line 65. Enter here and on Line 11. our return or your credit will be disallow	ved.					68.					00
	dual Use Tax - Do you owe u Individual Use Tax Worksheet on Page											
69a. Total use tax due at	1%: From Connecticut Individual Use Ta	ax Worksh	eet, Sectio	on A, Co	olumn 7		69a.		,			00
69b. Total use tax due at	6.35%: From Connecticut Individual Use	Tax Work	sheet, Sec	tion B,	Column	7	69b.		7			00
69c. Total use tax due at	7%: From Connecticut Individual Use Ta	ax Worksh	eet, Sectio	on C, Ce	olumn 7	7	69c.		,			00
69d. Total use tax due at	6%: From Connecticut Individual Use Ta	ax Worksh	eet, Sectio	on D, Ce	olumn 7	7	69d.		,			00
69. Individual use tax: Enter here and on L	Add Lines 69a through 69d. If no use ine 15.	e tax is du	e, enter "	0."		•	69.		,			00
Schedule 5 - Contri	ibutions to Designated Char	ities										
70a. AIDS Research	70a					. 00						
70b. Organ Transplant	70b					. 00						
70c. Endangered Species/	Wildlife 70c					. 00						
70d. Breast Cancer Resea	rch 70d	,				. 00						
70e. Safety Net Services	70e	·,		_,		. 00						
70f. Military Family Relief	Fund 70f	,		_,		00						
70. Total Contributions: A	dd Lines 70a through 70f. Enter amount	there and	on Line 2	4.		70.			<u> </u>			00

If any amounts are entered on Page 3 or 4, attach sheets to Pages 1 and 2, and send all four pages of the return to DRS.

Use the correct mailing address for returns requesting a refund or with a payment.									
For refunds and all other tax forms without payment:	For all tax forms with payment:								
Department of Revenue Services PO Box 2976 Hartford CT 06104-2976	Department of Revenue Services PO Box 2977 Hartford CT 06104-2977								

Make your check payable to **Commissioner of Revenue Services** To ensure proper posting, write your SSN(s) (optional) and "2011 Form CT-1040" on your check.