

**Form CT-1040**  
Connecticut Resident Income Tax Return

For DRS  
Use Only

20

**2013**  
**CT-1040**

Complete return in blue or black ink only.

Taxpayers must sign declaration on reverse side.

For the year January 1 - December 31, 2013, or other taxable year beginning: \_\_\_\_\_, 2013 and ending: \_\_\_\_\_.

**1 Filing Status - Check only one box.**

Single  Married filing jointly

Married filing separately

Head of household

Qualifying widow(er)  
with dependent child

Enter spouse's name here and SSN below.

Your Social Security Number

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Check if  
deceased

Spouse's Social Security Number

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Check if  
deceased

Your first name

\_\_\_\_\_ MI \_\_\_\_\_

Last name (If two last names, insert a space between names.)

\_\_\_\_\_ Suffix (Jr./Sr.) \_\_\_\_\_

If joint return, spouse's first name

\_\_\_\_\_ MI \_\_\_\_\_

Last name (If two last names, insert a space between names.)

\_\_\_\_\_ Suffix (Jr./Sr.) \_\_\_\_\_

Mailing address (number and street, apartment number, suite number, PO Box)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

City, town, or post office (If town is two words, leave a space between the words.)

\_\_\_\_\_ State \_\_\_\_\_ ZIP code \_\_\_\_\_ - \_\_\_\_\_

State

ZIP code

Enter city or town of residence if different from above.

\_\_\_\_\_ ZIP code \_\_\_\_\_

ZIP code

Print your SSN, name, mailing address, and city or town here.

Check if you filed **Form CT-2210** and checked any boxes on Part 1.

Check here if you are filing these forms. Attach the form(s) to the front of the return.

**Form CT-8379**

**Form CT-1040CRC**

**2**

1. Federal adjusted gross income from federal Form 1040, Line 37; Form 1040A, Line 21; or Form 1040EZ, Line 4

Whole Dollars Only  
1. \_\_\_\_\_ . 00

2. Additions to federal adjusted gross income from *Schedule 1*, Line 39

2. \_\_\_\_\_ . 00

3. Add Line 1 and Line 2.

3. \_\_\_\_\_ . 00

4. Subtractions from federal adjusted gross income from *Schedule 1*, Line 50

4. \_\_\_\_\_ . 00

5. **Connecticut adjusted gross income:** Subtract Line 4 from Line 3.

5. \_\_\_\_\_ . 00

6. Income tax from tax tables or Tax Calculation Schedule: See instructions, Page 19.

6. \_\_\_\_\_ . 00

7. Credit for income taxes paid to qualifying jurisdictions from *Schedule 2*, Line 59

7. \_\_\_\_\_ . 00

8. Subtract Line 7 from Line 6. If Line 7 is greater than Line 6, enter "0."

8. \_\_\_\_\_ . 00

9. Connecticut alternative minimum tax from Form CT-6251

9. \_\_\_\_\_ . 00

10. Add Line 8 and Line 9.

10. \_\_\_\_\_ . 00

11. Credit for property taxes paid on your primary residence, motor vehicle, or both: Complete and attach *Schedule 3* on Page 4 or your credit will be disallowed.

11. \_\_\_\_\_ . 00

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 due, enter "0."

15. \_\_\_\_\_ . 00

16. Add Line 14 and Line 15.

16. \_\_\_\_\_ . 00

Clip check here. Do not staple. Do not send W-2 or 1099 forms.

Due date: April 15, 2014 - 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/TSC](http://www.ct.gov/DRS/TSC) and choose direct deposit.

17. Enter amount from Line 16. 17.  . 00

3		Column A - Employer's federal ID No. from Box b of W-2, or payer's federal ID No. from Form 1099	Column B - Connecticut wages, tips, etc.	Column C - Connecticut income tax withheld
<b>W-2 and 1099 Information</b> Only enter information from your W-2 and 1099 forms if Connecticut income tax was withheld.	18a.	<input type="text"/>	.00	18a. <input type="text"/> . 00
	18b.	<input type="text"/>	.00	18b. <input type="text"/> . 00
	18c.	<input type="text"/>	.00	18c. <input type="text"/> . 00
	18d.	<input type="text"/>	.00	18d. <input type="text"/> . 00
	18e.	<input type="text"/>	.00	18e. <input type="text"/> . 00
	18f.	<input type="text"/>	.00	18f. <input type="text"/> . 00
	18g.	<input type="text"/>	.00	18g. <input type="text"/> . 00
		18h. Additional CT withholding from <i>Supplemental Schedule CT-1040WH</i>		18h. <input type="text"/> . 00

18. Total Connecticut income tax withheld: Add amounts in Column C and enter here. You **must complete Columns A, B, and C** or your withholding will be disallowed. 18.  . 00

19. All 2013 estimated tax payments and any overpayments applied from a prior year 19.  . 00

20. Payments made with Form CT-1040 EXT (Request for extension of time to file) 20.  . 00

20a. Connecticut earned income tax credit: From Schedule CT-EITC, Line 16. 20a.  . 00

21. **Total payments:** Add Lines 18, 19, 20, and 20a. 21.  . 00

4 22. Overpayment: If Line 21 is more than Line 17, subtract Line 17 from Line 21. 22.  . 00

23. Amount of Line 22 overpayment you want **applied to your 2014 estimated tax** 23.  . 00

24. Total contributions of refund to designated charities from *Schedule 5, Line 70* 24.  . 00

25. **Refund:** Subtract Lines 23 and 24 from Line 22. For faster refund, use direct deposit by completing Lines 25a, 25b, and 25c. If you do not elect direct deposit, **complete Line 25e to have your refund issued as a debit card.** 25.  . 00

25a. Checking  Savings  25b. Routing number  25c. Account number

25d. Will this refund go to a bank account outside the U.S.?  Yes

25e. Refund as a debit card?  Yes -- If you do not elect direct deposit or debit card, a refund check will be issued and processing may be delayed.

5 26. **Tax due:** If Line 17 is more than Line 21, subtract Line 21 from Line 17. 26.  . 00

27. If late: Enter penalty. Multiply Line 26 by 10% (.10). 27.  . 00

28. If late: Enter interest. Multiply Line 26 by number of months or fraction of a month late, then by 1% (.01). 28.  . 00

29. Interest on underpayment of estimated tax from Form CT-2210: See instructions, Page 21. 29.  . 00

30. **Total amount due:** Add Lines 26 through 29. 30.  . 00

6 Declaration: I declare under penalty of law that I have examined this return (including any accompanying schedules and statements) and, to the best of my knowledge and belief, it is true, complete, and correct. I understand the penalty for willfully delivering a false return or document to DRS is a fine of not more than \$5,000, or imprisonment for not more than five years, or both. The declaration of a paid preparer other than the taxpayer is based on all information of which the preparer has any knowledge.

Sign Here - Keep a copy for your records.

Your signature	Date	Home/cell telephone number
Your email address		
Spouse's signature (if joint return)	Date	Daytime telephone number
Paid preparer's signature	Date	Telephone number
Firm's name, address, and ZIP code		Preparer's SSN or PTIN
		FEIN
Third Party Designee - Complete the following to authorize DRS to contact another person about this return.		
Designee's name	Telephone number	Personal identification number (PIN)

Complete applicable schedules on Pages 3 and 4 and send all four pages of the return to DRS.

Thank You



**Schedule 3 - Property Tax Credit** See instructions, Page 30.

Qualifying Property	Primary Residence	Auto 1	Auto 2 (joint returns or qualifying widow(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	•    __ / __ / 2013 •    __ / __ / 2013	•    __ / __ / 2013 •    __ / __ / 2013	•    __ / __ / 2013 •    __ / __ / 2013
Amount Paid	60. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00	61. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00	62. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00
63. Total property tax paid: Add Lines 60, 61, and 62.			63. <input type="text"/> , <input type="text"/> , <input type="text"/> . 00
64. Maximum property tax credit allowed			64. • <b>3 0 0</b>
65. Enter the lesser of Line 63 or Line 64.			65. • <input type="text"/> . 00
66. Enter the decimal amount for your filing status and Connecticut AGI from the <i>Property Tax Credit Table</i> exactly as it appears on Page 31. If zero, enter the amount from Line 65 on Line 68.			66. • <input type="text"/> . <input type="text"/>
67. Multiply Line 65 by Line 66.			67. • <input type="text"/> . 00
68. Subtract Line 67 from Line 65. Enter here and on Line 11. Attach <i>Schedule 3</i> to your return or your credit will be disallowed.			68. <input type="text"/> . 00

**Schedule 4 - Individual Use Tax**

Do you owe use tax for on-line or other purchases where you paid no sales tax? See instructions, Page 32.

**Failure to report and pay use tax is subject to as much as a \$5,000 fine, imprisonment for as much as 5 years, or both.**

Complete the *Connecticut Individual Use Tax Worksheet* on Page 32 to calculate your use tax liability.

69a. Total use tax due at 1%: From <i>Connecticut Individual Use Tax Worksheet, Section A, Column 7.</i>	69a.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00
69b. Total use tax due at 6.35%: From <i>Connecticut Individual Use Tax Worksheet, Section B, Column 7</i>	69b.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00
69c. Total use tax due at 7%: From <i>Connecticut Individual Use Tax Worksheet, Section C, Column 7</i>	69c.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00
69. Individual use tax: Add Lines 69a through 69c. If no use tax is due, you must enter "0" here and on Line 15.	• 69.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00

**Schedule 5 - Contributions to Designated Charities** - See more information on Page 6.

70a. AIDS Research	70a.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70b. Organ Transplant	70b.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70c. Endangered Species/Wildlife	70c.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70d. Breast Cancer Research	70d.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70e. Safety Net Services	70e.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70f. Military Family Relief	70f.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70. Total Contributions: Add Lines 70a through 70f. Enter amount here and on Line 24.	70.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00

Complete and send all four pages of the return to DRS.

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

Make your check payable to **Commissioner of Revenue Services**  
To ensure proper posting, write your SSN(s) (optional) and "2013 Form CT-1040" on your check.