Form CT-1120AB

2003

Add Back and Exceptions to Add Back of Interest and Intangible Expenses

			FOR INCOM	E YEA	۱R				
		Beginning	2003, and E	Ending	l				
				(CT TAX F	REGIST	RATIO	N NUME	BER
Со	prporation Name							О	ОО
٦	ırpose								
ha cos nci cor	rm CT-1120AB, Add Back and Exceptions to Add Back to paid, accrued, or incurred interest expenses to a rests related to intangibles to a related member. All interest to a related member must be added back to incresponding deduction from net income, the taxpayer	elated member or in erest expenses and come. To be entitle	tangible expenses an intangible expenses and to an exception from	d cos and co	ts, and	l intere at are	est ex paid,	pense accru	s and ed, or
	ART I - Add Back - Total Interest Expenses Add Back								
1.	Total interest expenses paid to a related member and costs related to intangibles. Enter amount here Line 4.	e and on Form CT-	1120 , Schedule D,	1.					00
В	- Total Intangible Expenses Add Back								
1.				1.					00
>Δ	ART II - Exceptions to Add Back								
Α	- Exceptions to Interest Expenses Add Ba	ack							
1.	Enter total from Part III, Schedule A, Line 5. Enter here and on Form CT-1120, Schedule D, Line	e 12		1.					00
2.	Enter total from Part III, Schedule B, Line 5. Enter here and on Form CT-1120, Schedule D, Line	e 13		2.					00
3.	Enter total from Part III, Schedule C, Line 5. Enter here and on Form CT-1120, Schedule D, Line	e 14		3.					00
4.	Total Exceptions. Add Lines 1 through 3 and enter	the total here		4.					00
В	- Exceptions to Intangible Expenses Add	Back							
1.	Enter total from Part V, Schedule A, Line 5. Enter here and on Form CT-1120, Schedule D, Line	e 15		1.					00

PΑ	ART III - Exceptions to Intere	st Expenses Add Ba	ck					
1.	Can the taxpayer establish by clear and convincing evidence that a principal purpose of the payment of interest to a related member was not to avoid the payment of taxes due under Chapter 208 of the Connecticut General Statutes? If "Yes," attach such evidence for each payment to a related member.							
2.	2. Was the interest that the taxpayer paid to a related member paid according to a written contract that reflects an arm's length rate of interest and sets forth the terms of the loan? If "Yes," enter the date of the contract that gave rise to the interest deduction. If "No," the interest must be added back.							No
	Contract Date	_						
3.	Was the transaction giving rise to the pay a tax professional regarding the tax impl			tion by		Yes		No
Sc	hedule A - Exception for Interest Paid, A	Accrued, or Incurred to a Rela	ited Member That	is Tax	ed at a S	Simila	r Rate.	
Nar	me of Related Member Fed	eral Employer ID Number (FEIN) of	Related Member	Fiscal	Period of	Relate	ed Membe	r
Naı	me of state or foreign nation in which the related	member is subject to a tax on net	income					
Am	ount of interest income included in the measure	of net income subject to tax by the	e state or foreign nation	on				
• If cland	The related member has a net operating leading to the related member pays tax on a basis of tax, or a business and occupational tax. It is a comparison to the related members on Figure 1.	other than net income including more than one related membe		_			•	
1.	Amount of deductible interest claimed by ta	axpayer and paid to a related r	nember	1.				00
2.	Enter the taxable income of the related me	ember in this state or in anothe	r state	2.				00
3.	Enter the tax paid by the related member in	n this state or in another state		3.				00
4.	Divide Line 3 by Line 2			4.	•			+
5.	Exception Amount. If Line 4 is equal to o Line 1 here and on Part II A, Line 1. Other			5.				00
Sc	hedule B - Exception for Certain Relate	d Members That are Insuranc	e Companies					
1.	Is the related member that received the in Chapter 207 of the Connecticut General		ject to tax under		☐ Yes ☐ N			0
2.	2. Is the related member that received the interest income a company subject to a tax in another state that is comparable to the tax under Chapter 207 of the Connecticut General Statutes?					☐ Yes ☐ No		
		the above questions is "Yes," stions is "No," the taxpayer do				,		
	Name of Related Member	FEIN	State in W	hich		Amo	unt Dedu	cted
	Tame of Related Hellines	Liix	Taxes Were				Dodu	
I 1 [\cap

Name of Related Member	FEIN	State in Which Taxes Were Paid	Amount Deducted	
1.				00
2.				00
3.				00
4.				00
5. Total. Enter here and on Part II A, Line 2.				00

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Schedule C - Exception for Interest Paid to Related Members Subject to tax in Foreign Nations Was any interest directly or indirectly paid, accrued, or incurred to a related member in a □ No ☐ Yes foreign nation which has in force a comprehensive income tax treaty with the United States? If the answer to this question is "Yes," complete the following schedule. If the answer to this question is "No," the taxpayer does not qualify for this exception. **Description of Treaty** Name of Related Member Name of Foreign Nation **Amount Deducted** 00 1. 2. 00 3. 00 4. 00 5 Total. Enter here and on Part II A, Line 3. 00 PART IV - Unitary Election If a taxpayer is subject to the interest expenses add back, the taxpayer may elect to calculate its tax on a unitary basis including all members of the unitary group, provided the taxpayer clearly establishes that there are substantial intercorporate business transactions among the included corporations. The election to file on a unitary basis shall be irrevocable for and applicable for five successive income years. Does the taxpayer file on a unitary basis in another state? ☐ Yes □ No If the answer to the above question is "Yes," are all the same companies that are filing on a unitary basis in another state included in the Connecticut Form CT-1120U, Unitary Corporation Business ☐ Yes □ No Tax Return? If "Yes," the taxpayer may elect to file on a unitary basis subject to the following: • The unitary group must file on Form CT-1120U, located on the DRS Web site; • The unitary group must use a three factor apportionment formula consisting of property, payroll, and double weighted gross receipts under Conn. Gen. Stat. §12-218(c); • Each corporation included in the unitary group is subject to the \$250 minimum tax; • The unitary group is subject to the 20% (.20) surtax; • The unitary group may not use net operating losses that have been carried forward. Only losses incurred by the unitary group in the first year of the unitary election (and thereafter) can be used on the unitary return; • The unitary group may not use credits that have been carried forward. Only credits earned by the unitary group in the first year of the unitary election (and thereafter) can be used on the unitary return; • The unitary group must complete Form CT-1120Q, Connecticut Corporate Unitary Questionnaire, located on the DRS Web site. The questionnaire must be attached to Form CT-1120U; and • The election to file on a unitary basis is irrevocable for five successive income years. PART V - Intangible Expenses and Costs With a Related Member Did the taxpayer deduct intangible expenses and costs in connection with a transaction with a related member involving: The direct or indirect acquisition, use, maintenance or management, ownership, sale, exchange, or any other disposition of intangible property; b.) Factoring transactions or discounting transactions; Yes Royalty, patents, technical and copyright fees; or

If the answer to any of the above questions is "Yes," the total expenses must be added back and reported on Part I B; and **Form CT-1120**, *Schedule D*, Line 5.

П No

Yes

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Did the taxpayer deduct directly or indirectly, interest expenses and costs in connection with a transaction with a related member that involved the direct or indirect acquisition, maintenance,

management, ownership, sale, exchange, or disposition of intangible property?

d.) Licensing fees?

Schedule A

1.	Did the related member during the same income year directly or indirectly pay the amount deducted to an unrelated third-party?	Yes	☐ No
2.	Did the taxpayer and the Commissioner agree in writing that the taxpayer did not have to add back expenses?	Yes	☐ No

If the answer to either of the above questions is "Yes," complete the schedule below:

	Name of Related Member FEIN		Amount Deducted	
1.				00
2.				00
3.				00
4.				00
5.	5. Total. Enter here and on Part II B, Line 1.			00