Department of Revenue Services State of Connecticut

Form CT-1120U

2007

(Rev. 12/07)

Unitary Corporation Business Tax Return

| Enter Income Year | _ | , 2007, and Ending | | •• | | | |
|--|--|------------------------------|-----------------------|----------|-------|--|------|
| Total Assets | 00 Name of Parent or Designate | | | | | arent or Designated CT F | |
| Gross Receipts | | | | . [| Conn | necticut Tax Registration Num | ber |
| | | and Street | PO Box | | | | |
| NAICS Code: See ins | City or Town | State | ZIP Code | • | DRS | Use Only — — — — — — — — — — — — — — — — — — — | n |
| Audited By F | | | | - | Fede | ral Employer ID Number (Fi | _ |
| | able Boxes 1. Address Change | 2 Unitary Patura Status: T E | inal | • | | | ŕ |
| | on within the group: Dissolved | | | | vor's | CT Tax Reg # | |
| | ear this group is filing a unitary return? | | | | | | ·/ |
| • | company pay, accrue, or incur interest of | • | | | ., | <u> </u> | |
| | est expenses to a related member? | ► Yes (Attach Form CT-1 | | | | ☐ No | |
| 6. Is the unitary gre | oup exchanging R & D tax credits? | ► Yes (Attach Form CT-1 | 120 XCH.) | | | ☐ No | |
| | oup annualizing its income? | Yes (Attach Form CT-1 | • | | | ☐ No | |
| | n filing Form CT-1120 PIC? | ► Yes (Attach Form CT-1 | | | | □ No | |
| Schedule of Corpo | orations Included in the Unitary Retur | | d, attach a schedule. | | | | |
| | Corporation Name | Nexus With CT (✓) CT Ta | x Registration Numb | oer | | FEIN | |
| 1. Common Parent | or Designated Connecticut Parent | | | <u> </u> | 00 | | |
| 2. | - | | | — 00 | 20 | | |
| | | | | | | | |
| 3. | ber must be included for parent and all affi | liates if applicable | | — 00 | 00 | | |
| Minimum Tax Ca | · | патез, п аррпсавте. | | | | | |
| | umber of corporations included in this | unitary ratura | | | 1 | | |
| | · | • | | | | | 00 |
| | fultiply Line 1 by \$250. | | | | | | 1 00 |
| | ch a Complete Copy of Form 11 | | s as Filed With th | e In | tern | al Revenue Service – | |
| | Computation of Tax on Net Incomplete D, Line 18) | | | <u> </u> | 1 | | 00 |
| , | fraction from Form CT-1120A , Sched | | | | 2 | 0. | |
| 1 | income: Multiply Line 1 by Line 2 | | | - | 3 | 0. | 00 |
| | carryover: See instructions | | | | 4 | | 00 |
| 5. Income subject to tax: Subtract Line 4 from Line 3. | | | | | 5 | | 00 |
| 0.7. 14 (1.1. 51. 75% (0.75) | | | | | 6 | | 00 |
| | Computation of Minimum Tax or | | | | | | |
| | se from Schedule E, Line 6, Column C | | | | 1 | | 00 |
| 2. Apportionment | fraction from Form CT-1120A, Schedu | le S | | | 2 | 0. | |
| | by Line 2 | | | | 3 | | 00 |
| 4. Number of months covered by this return | | | | | 4 | | |
| 5. Multiply Line 3 by Line 4. Divide the result by 12 | | | | | | | 00 |
| , | mills per dollar): Multiply Line 5 by .00 | | \$1,000,000 | <u> </u> | 6 | | 00 |
| | Computation of Amount Payable | | | | 4 - | | |
| | Schedule A, Line 6; Schedule B, Line | • | | - | 1a | | 00 |
| | uture usex credits: See instructions | | | | | | |
| i i | r the total of Lines 1a and 1c. If no tax of | | | | 1c | | 00 |
| | by 30% (0.30) | • | | | 2 | | 00 |
| ' ' | er of Line 2 or Minimum Tax | | | - | 3 | | 00 |
| | tion: Subtract Line 3 from Line 1 | | | | 4 | | 00 |
| | n Form CT-1120K, Part II, Line 11. Se | | | | 5 | | 00 |
| | payable: Subtract Line 5 from Line 1. | | | | 6 | | 00 |
| | cation for extension from Form CT-11 | | | | - | | 00 |
| | ates from Forms CT-1120 ESA, ESB, | | | | - | | 00 |
| | om prior year | • | | | - | | 00 |
| | Enter the total of Lines 7a, 7b, and | | | | 7 | | 00 |
| | due (overpaid): Subtract Line 7 from Li | | | | 8 | | 00 |
| | (9a)00 Interest ► (9b) | | | | 9 | | 00 |
| 1 | redited to 2008 estimated tax ► (10a) | | | | 10 | | 00 |
| | rith this return: Add Line 8 and Line | | | . ▶ | 11 | | 00 |
| | Commissioner of Revenue Service | | | | | | |
| Mail to: | Department of Revenue Services PO Box 2974, Hartford CT 06104- | | · | | | | |

| C | ماريان ماد | Computation of Not Income | | | | | | | | | |
|--|--|---|--|------------------------|----------------|----------|--------|--|-----------------|-------------------|--------|
| | | D – Computation of Net Income | | | | _ | _ | | | | 1 00 |
| | Federal taxable income (loss) before net operating loss and special deductions | | | | | | | | | | 00 |
| | 2. Interest income wholly exempt from federal tax | | | | | | | | | 00 | |
| | Unallowable deduction for corporation tax from Schedule F, Line 8 | | | | | | | | | 00 | |
| | | | | | | | | | | | 00 |
| | • | e expenses and costs paid to a related mo | | | | | | ,,,,,,,,,,, | ,,,,, | | 00 |
| _ | | d for future use | | | | | _ | <u>/////////////////////////////////////</u> | | <u> </u> | |
| | | dd Lines 1 through 5 | | | | | 7 | | | | 00 |
| | | deduction from Form CT-1120 ATT, So | | | | | | | | | 00 |
| | 9. Capital loss carryover (if not deducted in computing federal capital gain) | | | | | | | | | 00 | |
| | 10. Capital gain from sale of preserved land | | | | | | | | | 00 | |
| 11. | Federal | bonus depreciation recovery from Form | CT-1120 ATT, Schedule J, Lin | e 7 | | ▶ | 11 | | | | 00 |
| | | ons to interest add back from Form CT-1 | | | | | | | | | 00 |
| | | ons to interest add back from Form CT-1 | | | | | | | | | 00 |
| 14. | Exception | ons to interest add back from Form CT-1 | 120AB , Part II A, Line 3 | | | ▶ | 14 | | | | 00 |
| 15. | Exception | ns to add back of intangible expenses pa | aid to a related member | | | | | | | | |
| | | rm CT-1120AB, Part II B, Line 1 | | | | | | | | | 00 |
| | | ttach explanation | | | | | 16 | | | | 00 |
| | | dd Lines 8 through 16 | | | | | 17 | | | | 00 |
| 18. | Net Inco | me: Subtract Line 17 from Line 7. Enter | here and on <i>Schedule A</i> , Line 1. | | | ▶ | 18 | | | | 00 |
| Sc | chedule | E – Computation of Minimum Tax | Base | С | olumn A | | Co | lumn B | | Column | С |
| | | See instructions. | | Begir | nning of Year | | End | of Year | | | |
| 1 | Capital st | tock from federal Schedule L, Line 22a ar | nd Line 22h | | 00 |) | | | 00 | (Column A p | |
| | | and undivided profits from federal Schedul | | | 00 |) | 00 | | 00 | Column E | , |
| | • | s reserves: Attach schedule | | |) | | | 00 | Divided by | 2 | |
| | | The received Attack Confederation | | 00 |) | | | 00 | | 00 | |
| | Holdings of stock of private corporations: Attach schedule. Enter average in Column C. | | | | | | 00 | | 00 | | |
| | _ | Subtract Line 5, Column C, from Line 4, C | | nedule B | | | | | | | 00 |
| | | | | | | | | | | | |
| Schedule F - Taxes | | | | | | Column A | | | Column E | } ////// | |
| | Payroll | | | | | | | | 00 | | |
| | Real prop | , | | | | | | | 00 | | |
| | Personal | <u>' ' ' ' </u> | | | | | | | 00 | | |
| | Sales and | | | | | | | | 00 | | |
| | 5. Other: See instructions. | | | | | | ,,,,,, | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 00 | | |
| 6. Connecticut corporation business deducted in the computation of federal taxable income | | | | | | | | | | 00 | |
| 7. Tax on or measured by income or profits imposed by other states or political subdivisions deducted in the computation of federal taxable income: Attach schedule. | | | | | | | | | 00 | | |
| Total unallowable deduction for corporation business tax purposes: Add Line 6 and Line 7, Column B. Enter here and on Schedule D, Line 3. | | | | | | | | 00 | | | |
| my Rev | knowledg enue Ser | : I declare under penalty of law that I have and belief, it is true, complete, and corryices (DRS) is a fine of not more than \$5, payer is based on all information of which | ect. I understand the penalty fo ,000, or imprisonment for not mo | r willfull ore than | v delivering a | false | retu | rn or docu | ment | t to the Departme | ent of |
| | Corporate Officer's Name (Print) Corporate Officer's Signature | | Da | ite | | | | contact the preparer | | | |
| Sign Here | | Title Telephone Number | | | oor | | | | elow about this | | |
| Keep a copy | | Title Telephone Number | | | Jer | 1.0.0 | | | Yes 🗌 No 🗌 | | |
| | | Paid Preparer's Name (Print) | Paid Preparer's Signature | | Da | ate | | Preparer's SSN or PTIN | | | |
| | ir records | | | IN | | | | Telephone Number | | | |