

Form CT-1040
Connecticut Resident Income Tax Return

For DRS
Use Only

20

2014
CT-1040

Complete return in blue or black ink only.

Taxpayers must sign declaration on reverse side.

For the year January 1 - December 31, 2014, or other taxable year beginning: _____, 2014 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

____ - ____

Enter city or town of residence if different from above.

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 **Form CT-8379:** Attach to the front of the return.

Check here if you are filing **Form CT-1040CRC:** Attach to the back of the return.

2 **Whole Dollars Only**

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

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 18.

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, 2015 - 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 and choose direct deposit.

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	• __ __ / __ __ / 2014 • __ __ / __ __ / 2014	• __ __ / __ __ / 2014 • __ __ / __ __ / 2014	• __ __ / __ __ / 2014 • __ __ / __ __ / 2014
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. • 3 0 0
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

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.

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

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 Relief	70f.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70g. CHET Baby Scholar	70g.	<input type="text"/> , <input type="text"/> , <input type="text"/> . 00
70. Total Contributions: Add Lines 70a through 70g. Enter amount here and on Line 24a.	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.		Make your check payable to: Commissioner of Revenue Services To ensure proper posting, write your SSN(s) (optional) and "2014 Form CT-1040" on your check.
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	