



Form CT-1040X

Amended Connecticut Income Tax Return for Individuals

2015

Complete this form in blue or black ink only. Type or print.

For January 1 - December 31, 2015, or other taxable year Year Beginning (MMDDYYYY) and Ending (MMDDYYYY).

Your first name	Middle initial	Last name	Deceased	Your Social Security Number (SSN)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
If joint return, spouse's first name	Middle initial	Last name	Deceased	Spouse's SSN
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mailing address (number and street)		Mailing address 2 (apartment number, PO Box)		
<input type="text"/>		<input type="text"/>		
City, town, or post office	State	ZIP code	Your telephone number	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
City or town of residence if different from above	State	ZIP code	DRS use only	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> (MMDDYYYY)	

Filing Status

On original return:

Single Head of household Married filing jointly Qualifying widow(er) Married filing separately

On this return:

Single Head of household Married filing jointly Qualifying widow(er) Married filing separately

Check the box below if you are amending your return as a result of federal or another state's changes to your income tax return or because you filed a timely-amended federal or other state's return. Enter the date of the federal or other state's final determination below. See instructions on Page 7.

Federal or state changes Date: (MMDDYYYY)

You must attach a copy of the IRS audit or other state's results, federal Form 1040X, Form 1045, the other state's amended return, supporting documentation, and proof of the final determination.

- Check if filing **Form CT-1040CRC**, *Claim of Right Credit*
- Check if filing **Form CT-8379**, *Nonobligated Spouse Claim*

Declaration: I declare under the penalty of law that I have examined this return 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 the Department of Revenue Services (DRS) is a fine of not more than \$5,000, 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.

Your signature	Date	Home/cell telephone number	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Your email address	<input type="text"/>		
Sign Here	Spouse's signature (if joint return)	Date (MMDDYYYY)	Daytime telephone number
Keep a copy of this return for your records.	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Paid preparer's signature	Date (MMDDYYYY)	Telephone number
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Preparer's SSN or PTIN	Firm's Federal Employer Identification Number (FEIN)	
<input type="text"/>	<input type="text"/>		
Firm's name, address, and ZIP code			
<input type="text"/>			

Make your check payable to **Commissioner of Revenue Services**. To ensure proper posting of your payment, write your Social Security Number(s) (SSN) (optional) and "2015 Form CT-1040X" on your check. The Department of Revenue Services (DRS) may submit your check to your bank electronically.

Mail to: **Department of Revenue Services
PO Box 2978
Hartford CT 06104-2978**



Your Social Security Number •

	A. Original amount or as previously adjusted	B. Net change increase or (decrease)	C. Correct amount
Income			
1. Federal adjusted gross income from federal Form 1040, Line 37; Form 1040A, Line 21; or Form 1040EZ, Line 4 1	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
2. Additions, if any: See instructions. 2	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
3. Add Line 1 and Line 2. 3	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
4. Subtractions, if any: See instructions. 4	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
5. Connecticut adjusted gross income: Subtract Line 4 from Line 3. 5	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
Residents go to Line 10; Nonresidents and part-year residents go to Line 6.			
Nonresidents and Part-Year Residents Only			
6. Enter your income from Connecticut sources from Schedule CT-SI. If less than or equal to zero, enter "0." 6	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
7. Enter the greater of Line 5 or Line 6. If zero, go to Line 10 and enter "0." 7	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
8. Income tax from Tax Calculation Schedule: See instructions. 8	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
9. Divide Line 6 by Line 5. If Line 6 is equal to or greater than Line 5, enter 1.0000. 9	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
Tax			
10. Income tax: See instructions. 10	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
11. Credit for income taxes paid to qualifying jurisdictions: See instructions. Residents and part-year residents only 11	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
12. Subtract Line 11 from Line 10. 12	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
13. Connecticut alternative minimum tax from Form CT-6251. 13	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
14. Add Line 12 and Line 13. 14	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
15. Credit for property tax paid on your primary residence or motor vehicle, or both: Residents only , see instructions. 15	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
16. Subtract Line 15 from Line 14. If less than or equal to zero, enter "0." 16	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
17. Total allowable credits from Schedule CT-IT Credit, Part I, Line 11 17	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
18. Connecticut income tax: Subtract Line 17 from Line 16. 18	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
19. Individual use tax: See instructions. 19	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
20. Total tax: Add Line 18 and Line 19. 20	<input type="text"/>	<input type="text"/>	<input type="text"/> .00



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Withholding schedule: Only enter information from your Schedule CT K-1, W-2, and 1099 forms if Connecticut income tax was withheld.

	Column A: Employer Federal ID Number Do not include dashes.	Column B: CT Wages, Tips, etc.	Check if from Schedule CT K-1	Column C: CT Income Tax Withheld
70a. ▶	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/> .00
70b. ▶	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/> .00
70c. ▶	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/> .00
70d. ▶	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/> .00
70e. ▶	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/> .00
70f. Enter additional Connecticut withholding from Supplemental Schedule CT-1040WH, Line 3.			<input type="checkbox"/>	<input type="text"/> .00
70. Total Connecticut income tax withheld: Enter here and on Line 21, Column C.				<input type="text"/> .00

Payments

	A. Original amount or as previously adjusted	B. Net change increase or (decrease)	C. Correct amount
21. Connecticut tax withheld: Enter amount from Line 70. 21.	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
22. All 2015 estimated Connecticut income tax payments (including any overpayments applied from a prior year) and extension payments 22.	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
22a. Connecticut earned income tax credit: From Schedule CT-EITC, Line 16. Schedule must be attached. Residents only 22a.	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
22b. Claim of right credit: From Form CT-1040CRC, Line 6. Attach Form CT-1040CRC to the back of this return. ... 22b.	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
23. Amounts paid with original return, plus additional tax paid after it was filed: Do not include penalty and interest. 23.	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
24. Total payments: Add Lines 21, 22, 22a, 22b and 23. 24.	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
25. Overpayment, if any, as shown on original return or as previously adjusted. 25.			<input type="text"/> .00
26. Subtract Line 25 from Line 24. 26.			<input type="text"/> .00

Refund

27. If Line 26 is greater than Line 20, Column C, enter the amount overpaid. 27.	<input type="text"/>	<input type="text"/> .00
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Amount You Owe

28. If Line 20, Column C, is greater than Line 26 enter the amount of tax due. 28.	<input type="text"/>	<input type="text"/> .00
29. Interest: Multiply Line 28 by number of months or fraction of a month, then by 1% (.01)..... 29.	<input type="text"/>	<input type="text"/> .00
30. Amount you owe with this return: Add Line 28 and Line 29. Amount you owe 30.	<input type="text"/>	<input type="text"/> .00



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Reason(s) for amending return: Enter the line number for each item you are changing and give the reason for each change in the space below. Attach supporting forms and schedules for items changed. Write your name and SSN(s) on all attachments.

Schedule 1 - Modifications to Federal Adjusted Gross Income

Enter all amounts as positive numbers.

Additions to Federal Adjusted Gross Income

31. Interest on state and local government obligations other than Connecticut.	31.	▶		.00
32. Mutual fund exempt-interest dividends from non-Connecticut state or municipal government obligations other than Connecticut.	32.	▶		.00
33. Taxable amount of lump-sum distributions from qualified plans not included in federal adjusted gross income.	33.	▶		.00
34. Beneficiary's share of Connecticut fiduciary adjustment: Enter only if greater than zero.	34.	▶		.00
35. Loss on sale of Connecticut state and local government bonds.	35.	▶		.00
36. Domestic production activity deduction from federal form 1040, Line 35.	36.	▶		.00
37. Other - specify. <input type="text"/>	37.	▶		.00
38. Total additions: Add Lines 31 through 37. Enter here and on Page 2, Line 2, Column C.	38.	▶		.00

Subtractions From Federal Adjusted Gross Income

39. Interest on U.S. government obligations.	39.	▶		.00
40. Exempt dividends from certain qualifying mutual funds derived from U.S. government obligations.	40.	▶		.00
41. Social Security benefit adjustment from <i>Social Security Benefit Adjustment Worksheet</i>	41.	▶		.00
42. Refunds of state and local income taxes.	42.	▶		.00
43. Tier 1 and Tier 2 railroad retirement benefits and supplemental annuities.	43.	▶		.00
44. Military retirement pay.	44.	▶		.00
45. 10% of income recieved from the Connecticut teacher's retirement system.	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. Contributions to a Connecticut Higher Education Trust (CHET) account Enter CHET account number: ▶ <input type="text"/> ... Do not add spaces or dashes.	48.	▶		.00
49. Other - specify: Do not include out-of-state income. <input type="text"/> ...	49.	▶		.00
50. Total subtractions: Add Lines 39 through 49. Enter here and on Line 4, Column C.	50.	▶		.00



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Schedule 2 - Credit for Income Taxes Paid to Qualifying Jurisdictions - Residents and Part-Year Residents Only

See instructions for Form CT-1040 or Form CT-1040NR/PY. You must attach a copy of your return filed with the qualifying jurisdiction(s) or your credit will be disallowed.

51. **Modified Connecticut Adjusted Gross Income.** 51. ▶ .00

For each column, enter the following:

	Column A		Column B	
	Name	Code	Name	Code
52. Enter qualifying jurisdiction's name and two-letter code. 52.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
53. Non-Connecticut income included on Line 51 and reported on a qualifying jurisdiction's income tax return from <i>Schedule 2 Worksheet</i> 53.	<input type="text"/>	<input type="text"/> .00	<input type="text"/>	<input type="text"/> .00
54. Divide Line 53 by Line 51. May not exceed 1.0000. 54.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
55. Income tax liability: Subtract Line 15, Column C, from Line 10, Column C. 55.	<input type="text"/>	<input type="text"/> .00	<input type="text"/>	<input type="text"/> .00
56. Multiply Line 54 by Line 55. 56.	<input type="text"/>	<input type="text"/> .00	<input type="text"/>	<input type="text"/> .00
57. Income tax paid to a qualifying jurisdiction. 57.	<input type="text"/>	<input type="text"/> .00	<input type="text"/>	<input type="text"/> .00
58. Enter the lesser of Line 56 or Line 57. 58.	<input type="text"/>	<input type="text"/> .00	<input type="text"/>	<input type="text"/> .00
59. Total credit: Add Line 58, all columns. Enter here and on Line 11, Column C. 59. ▶ <input type="text"/> .00				

Schedule 3 - Property Tax Credit (Connecticut full-year residents only) See instructions.

Qualifying Property	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 (MMDDYYYY)	Amount Paid
60. Primary Residence	<input type="text"/>	<input type="text"/>	<input type="text"/>	60. ▶ <input type="text"/> .00
61. Auto 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	61. ▶ <input type="text"/> .00
62. Auto 2 - Married filing jointly or qualifying widow(er) only.	<input type="text"/>	<input type="text"/>	<input type="text"/>	62. ▶ <input type="text"/> .00
63. Total property tax paid: Add Lines 60, 61, and 62.				63. ▶ <input type="text"/> .00
64. Maximum property tax credit allowed.				64. <input type="text"/> 300 .00
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 2014 Property Tax Credit Table. 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 15, Column C. 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? Complete the *Connecticut Individual Use Tax Worksheet* on Page 32 of the Form CT-1040 instruction booklet, or Page 37 of the Form CT-1040NR/PY instruction booklet, 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"/> .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"/> .00
69c. Total use tax due at 7.75%: From <i>Connecticut Individual Use Tax Worksheet, Section C, Column 7</i>	69c. ▶ <input type="text"/> .00
69. Individual use tax: Add Lines 69a through 69c. If no use tax is due, enter "0." Enter here and on Line 19, Column C.	69. <input type="text"/> .00