Department of Revenue Services State of Connecticut PO Box 5014 Hartford CT 06102-5014

## Form CT-990T Connecticut Unrelated Business Income Tax Return

2008

(Rev. 12/08)

Complete this return in blue or black ink only.

Enter inc	ome year beginni	ng ▶	, 2008, a	and ending ►			
DRS use only	Organization name	(please type or print)		•	CT Tax	Registration N	ımber
Audited by	Address	number and street	PO Box		DRS u	se only	- 20
	City or town		State	ZIP code	Federa	al Employer ID Nu	
Init	d Complete All Appl	iachla Daves		<u> </u>		_	
	d Complete All Appl			lizing its income check h			
		Closing month (Attach exp					turn
		Withdrawn Merged/reorg					
		oration Domestic trus					
		ness began in Connecticut: ousiness income activity:					
1		te of incorporation:			n·		
	•	incorporated in Connecticut		Date of organization			
Date qualifie		· · · · · · · · · · · · · · · · · · ·			/ D		
Computat	ion of Income	olete Copy of Form 990-T li	nciuding all Schedule	s as Filed With the Interi	nai Reve	enue Service –	
		axable income from 2008 fee	deral Form 990-T Part	II Line 34	▶ 1		00
		eduction from 2008 federal F			_		00
1		cticut tax on unrelated busin			-		00
					-		00
		nent of Connecticut tax inclu					00
		ncome: Subtract Line 5 from			-		00
Computat							100
		ncome from Line 6 above. It	f 100% Connecticut, e	enter also on Line 3	▶ 1		00
2. Apport	ionment fraction from I	Form CT-990T, Schedule A,	Line 5. Carry to six pla	aces	▶ 2	0.	'
3. Conne	cticut unrelated busine	ess taxable income: Line 1 o	r Line 1 multiplied by L	ine 2	▶ 3		00
4. Operat	ing loss carryover fron	n Form CT-990T, Schedule	<i>B</i> , Line 9		▶ 4		00
5. Income	e subject to tax: Subtra	act Line 4 from Line 3			▶ 5		00
6. <b>Tax:</b> M	ultiply Line 5 by 7.5%	(.075)			▶ 6		00
	ion of Amount Paya						
	•	x, Line 6					00
		from Line 1					00
		120K, Part III, Line 9. Do not					00
		tract Line 4 from Line 3. If ze					00
	• • •	ension from Form CT-990T E					00
		rms CT-990T ESA, ESB, ES					00
		r					00
		tal of Lines 6a, 6b, and 6c					00
1		d): Subtract Line 6 from Line					00
	enalty ►(8a)	00 Interest ►(8b) 09 estimated tax ►(9a)					00
1		rn: Add Line 7 and Line 8					00
10. Balan	ce due with this retur	n: Add Line / and Line o			10		00
Make check	payable to: Commiss	ioner of Revenue Services	. Attach check to return v	with paper clip. Do not stapl	e.		
Mail to: Dep	partment of Revenue Se	ervices, State of Connecticut, I	PO Box 5014, Hartford C	CT 06102-5014			
Declaratio	n: I declare under po	enalty of law that I have ex	camined this return (in	cluding any accompany	ing sche	edules and staten	nents) and, to
		elief, it is true, complete, a					
		Services (DRS) is a fine o					or both. The
declaration	Signature of officer or f	ther than the taxpayer is ba	ased on all information		ias any		
Ciam Hana	Signature of officer or i	lauciary		Date		May DRS contact the	
Sign Here	Title			Talanhana ni irah ar		See instructions.	and rotall!
Кеер а сору	Title			Telephone number		☐ Yes	□ No
of this	Detales			( )			
return for your	Paid preparer's signatu	ıre		Date		Preparer's SSN o	or PTIN
records.	Firm's name and addre	ss		FEIN		Telephone number	er

Schedule A — Unrelated Business Income Apportionment: See instructions.

Complete this schedule if the taxpayer's unrelated trade or business is conducted at a regular place of business outside Connecticut.

Factor	ltem	Column A Connecticut			Column B Everywhere		Column C Divide Column A by Column B. Carry to six places	
	1. (a) Inventories		00			00		
Property	(b) Tangible property		00			00		
(Average value)	(c) Real property		00			00		
(Average value)	(d) Capitalized rent	00				00		
	1. Total		00			00	0.	
	2. (a) Sales of tangibles		00			00		
	(b) Services		00			00		
Receipts	(c) Rentals		00			00		
·	(d) Other		00			00		
	2. Total		00			00	0.	/////
Wages, salaries, and other compensation	3. Total		00			00	0.	
	4. Total: Add Lines 1, 2, and 3 in	Column C.					0.	
	5. Apportionment fraction: Divide on Schedule C, Line 4; and als	Line 4 by number of fac					0.	
Schedule B — Conn	ecticut Apportioned Operating Loss			,				
1. 2000 Connecticut ne	1			00				
2. 2001 Connecticut ne	2. 2001 Connecticut net operating loss available for use in 2008							00
3. 2002 Connecticut net operating loss available for use in 2008								00
4. 2003 Connecticut net operating loss available for use in 2008								00
5. 2004 Connecticut net operating loss available for use in 2008								00
6. 2005 Connecticut net operating loss available for use in 2008								00
7. 2006 Connecticut net operating loss available for use in 2008								00
8. 2007 Connecticut ne	2007 Connecticut net operating loss available for use in 2008							00
9. Total: Add Lines 1 th	9. <b>Total:</b> Add Lines 1 through 8. Enter here and on <i>Computation of Tax</i> , Line 4							00
Schedule C — Comp	outation of Net Operating Loss Carry	forward						
1. Enter amount from C	. Enter amount from Computation of Income, Line 6, if less than zero.							00
2. Add back specific de	2. Add back specific deduction from 2008 federal Form 990-T, Part II, Line 33							00
3. Subtotal: Add Line 1	Subtotal: Add Line 1 and Line 2.							00
4. Apportionment fraction from Schedule A, Line 5						0.		1
5. 2008 Connecticut net operating loss available for carryforward: Multiply Line 3 by Line 4								00