



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

# 2019

Complete this return in blue or black ink only. Do not use staples.

Enter Income Year Beginning ▶  -  and Ending ▶  -   
M M - D D - Y Y Y Y M M - D D - Y Y Y Y

Organization name  Connecticut Tax Registration Number

Number and street  PO Box  Federal Employer ID Number (FEIN)

City, town, or post office  State  ZIP code

### Check All Applicable Boxes:

▶  Organization is annualizing its income.

**Change of:**  Mailing address  Closing month (Attach explanation)

**Return status:**  Amended return  Initial return  Final return  
If final return:  Dissolved  Withdrawn  Merged/reorganized:  
Enter survivor's CT Tax Reg. Number.

**Type of organization:** ▶  Corporation ▶  Domestic trust ▶  Foreign trust  
▶  Other: Explain

1. Date unrelated trade or business began in Connecticut:  -   
M M - D D - Y Y Y Y

2. Nature of unrelated trade or business income activity:

3. **Corporation only:** Enter state of incorporation:  Date of organization:  -   
M M - D D - Y Y Y Y

Date qualified in Connecticut if not incorporated in Connecticut:  -   
M M - D D - Y Y Y Y

**DECLARATION:** I declare under penalty of law that I have examined this return (including any accompanying schedules and statements) 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.

|  |   |  |  |   |
|--|---|--|--|---|
| <b>Sign Here</b><br>Keep a copy of this return for your records. | Name of officer or fiduciary (print) <input type="text"/> | Signature of officer or fiduciary <input type="text"/>                           | Date (MMDDYYYY) <input type="text" value="-"/> - <input type="text" value="-"/>                                      |   |
|  | Officer's email address (print) <input type="text"/>      |  |  |   |
|  | Title <input type="text"/>                                | Telephone number <input type="text" value="-"/> - <input type="text" value="-"/> | May DRS contact the preparer shown below about this return? Yes <input type="checkbox"/> No <input type="checkbox"/> |   |
|  | Paid preparer's name (print) <input type="text"/>         | Paid preparer's signature <input type="text"/>                                   | Date (MMDDYYYY) <input type="text" value="-"/> - <input type="text" value="-"/>                                      | Preparer's SSN or PTIN <input type="text"/> |
|  | Firm's name and address <input type="text"/>              | Firm's FEIN <input type="text"/>   | Telephone number <input type="text" value="-"/> - <input type="text" value="-"/>                                     |   |

Please note that each form is year specific. To prevent any delay in processing your return, the correct year's form must be submitted to DRS.



Connecticut Tax Registration Number

– Attach a Complete Copy of Federal Form 990-T Including all Schedules as Filed With the Internal Revenue Service –

**Computation of Income**

|   |    |   |  |     |
|---|----|---|--|-----|
| 1. Federal unrelated business taxable income from 2019 federal Form 990-T, Part III, Line 39 .....              | 1. | ▶ |  | .00 |
| 2. Federal net operating loss deduction from 2019 federal Form 990-T, Part III, Line 36 .....                   | 2. | ▶ |  | .00 |
| 3. Federal deduction for Connecticut tax on unrelated business taxable income .....                             | 3. | ▶ |  | .00 |
| 4. Total: Add Lines 1, 2, and 3. ....   | 4. | ▶ |  | .00 |
| 5. Refund or credit for overpayment of Connecticut tax included in federal unrelated business taxable income .. | 5. | ▶ |  | .00 |
| 6. Unrelated business taxable income: Subtract Line 5 from Line 4. ....   | 6. | ▶ |  | .00 |

**Computation of Tax**

|   |    |   |    |     |
|---|----|---|----|-----|
| 1. Unrelated business taxable income from Line 6 above. If 100% Connecticut, enter also on Line 3. ....   | 1. | ▶ |    | .00 |
| 2. Apportionment fraction from <i>Schedule A</i> , Line 5 on Page 3. Carry to six places. ....            | 2. | ▶ | 0. |     |
| 3. Connecticut unrelated business taxable income: Line 1 or Line 1 multiplied by Line 2. ....             | 3. | ▶ |    | .00 |
| 4. Operating loss carryover from <i>Schedule B</i> , Line 20 on Page 4. Do not exceed 50% of Line 3. .... | 4. | ▶ |    | .00 |
| 5. Income subject to tax: Subtract Line 4 from Line 3. ....   | 5. | ▶ |    | .00 |
| 6. Tax: Multiply Line 5 by 7.5% (.075). ....  | 6. | ▶ |    | .00 |

**Computation of Amount Payable**

|   |     |   |  |     |
|---|-----|---|--|-----|
| 1. Tax: Include surtax if applicable. See instructions. ....                              | 1.  | ▶ |  | .00 |
| 2. <i>Reserved for future use</i> .....   | 2.  | ▶ |  |     |
| 3. Total Tax: Enter the amount from Line 1. ....  | 3.  | ▶ |  | .00 |
| 4. Tax credits from Form CT-1120K, Part III, Line 9. Do not exceed amount on Line 1. .... | 4.  | ▶ |  | .00 |
| 5. Balance of tax payable: Subtract Line 4 from Line 3. If zero or less, enter "0." ..... | 5.  | ▶ |  | .00 |
| 6a. Paid with application for extension from Form CT-990T EXT .....                       | 6a. | ▶ |  | .00 |
| 6b. Paid with estimates from Forms CT-990T ESA, ESB, ESC, & ESD .....                     | 6b. | ▶ |  | .00 |
| 6c. Overpayment from prior year .....   | 6c. | ▶ |  | .00 |
| 6. Tax Payments: Enter the total of Lines 6a, 6b, and 6c. ....                            | 6.  | ▶ |  | .00 |
| 7. Balance of tax due (overpaid): Subtract Line 6 from Line 5. ....                       | 7.  | ▶ |  | .00 |
| 8a. Penalty .....   | 8a. | ▶ |  | .00 |
| 8b. Interest .....  | 8b. | ▶ |  | .00 |
| 8c. Form CT-1120I Interest .....  | 8c. | ▶ |  | .00 |
| 8. Total penalty and interest: Enter the total of Lines 8a, 8b, and Line 8c. ....         | 8.  | ▶ |  | .00 |
| 9a. Amount to be credited to 2020 estimated tax .....                                     | 9a. | ▶ |  | .00 |
| 9b. Amount to be refunded .....   | 9b. | ▶ |  | .00 |
| 9. Total credited and refunded .....  | 9.  | ▶ |  | .00 |

**For faster refund, use Direct Deposit by completing Lines 9c, 9d, and 9e.**

|  |       |
|--|-------|
| 9c. Checking <input type="checkbox"/> Savings <input type="checkbox"/> 9d. Routing # ▶   |       |
| 9e. Account # ▶  |       |
| 9f. Will this refund go to a bank account outside the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No 9g. Bank name ▶ |       |
| 10. Balance due with this return: Add Line 7 and Line 8. ....  | 10. ▶ |





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**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   | Item                        | Column A<br>Connecticut | Column B<br>Everywhere | Column C<br>Divide Column A by Column B.<br>Carry to six places |
|--|-----------------------------|-------------------------|------------------------|---|
| Property<br>(Average value)  | 1a. Inventories.....        | .00                     | .00                    |   |
|  | 1b. Tangible property.....  | .00                     | .00                    |   |
|  | 1c. Real property.....      | .00                     | .00                    |   |
|  | 1d. Capitalized rent.....   | .00                     | .00                    |   |
|  | <b>1. Total</b> .....       | .00                     | .00                    | 0.  |
| Receipts   | 2a. Sales of tangibles..... | .00                     | .00                    |   |
|  | 2b. Services.....           | .00                     | .00                    |   |
|  | 2c. Rentals.....            | .00                     | .00                    |   |
|  | 2d. Other.....              | .00                     | .00                    |   |
|  | <b>2. Total</b> .....       | .00                     | .00                    | 0.  |
| Wages, salaries,<br>and other<br>compensation  | <b>3. Total</b> .....       | .00                     | .00                    | 0.  |
| <b>4. Total:</b> Add Lines 1, 2, and 3 in Column C. ....   |                             |                         |                        | 0.  |
| <b>5. Apportionment fraction:</b> Divide Line 4 by number of factors used. Enter here; on<br>Schedule C, Line 4; and on Page 2, <i>Computation of Tax</i> , Line 2. .... |                             |                         |                        | 0.  |



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**Schedule B — Connecticut Apportioned Operating Loss Carryover Applied to 2019**

|     |  |     |  |     |
|-----|--|-----|--|-----|
| 1.  | 2000 Connecticut net operating loss available for use in 2019 .....  | 1.  |  | .00 |
| 2.  | 2001 Connecticut net operating loss available for use in 2019 .....  | 2.  |  | .00 |
| 3.  | 2002 Connecticut net operating loss available for use in 2019 .....  | 3.  |  | .00 |
| 4.  | 2003 Connecticut net operating loss available for use in 2019 .....  | 4.  |  | .00 |
| 5.  | 2004 Connecticut net operating loss available for use in 2019 .....  | 5.  |  | .00 |
| 6.  | 2005 Connecticut net operating loss available for use in 2019 .....  | 6.  |  | .00 |
| 7.  | 2006 Connecticut net operating loss available for use in 2019 .....  | 7.  |  | .00 |
| 8.  | 2007 Connecticut net operating loss available for use in 2019 .....  | 8.  |  | .00 |
| 9.  | 2008 Connecticut net operating loss available for use in 2019 .....  | 9.  |  | .00 |
| 10. | 2009 Connecticut net operating loss available for use in 2019 .....  | 10. |  | .00 |
| 11. | 2010 Connecticut net operating loss available for use in 2019 .....  | 11. |  | .00 |
| 12. | 2011 Connecticut net operating loss available for use in 2019 .....  | 12. |  | .00 |
| 13. | 2012 Connecticut net operating loss available for use in 2019 .....  | 13. |  | .00 |
| 14. | 2013 Connecticut net operating loss available for use in 2019 .....  | 14. |  | .00 |
| 15. | 2014 Connecticut net operating loss available for use in 2019 .....  | 15. |  | .00 |
| 16. | 2015 Connecticut net operating loss available for use in 2019 .....  | 16. |  | .00 |
| 17. | 2016 Connecticut net operating loss available for use in 2019 .....  | 17. |  | .00 |
| 18. | 2017 Connecticut net operating loss available for use in 2019 .....  | 18. |  | .00 |
| 19. | 2018 Connecticut net operating loss available for use in 2019 .....  | 19. |  | .00 |
| 20. | <b>Total:</b> Add Lines 1 through 19. Enter here and on <i>Computation of Tax</i> , Line 4.<br>Do not exceed 50% of <i>Computation of Tax</i> , Line 3. .... | 20. |  | .00 |

**Schedule C — Computation of Net Operating Loss Carryforward**

|    |  |    |    |     |
|----|--|----|----|-----|
| 1. | Enter amount from <i>Computation of Income</i> , Line 6, if less than zero. ....                                     | 1. |    | .00 |
| 2. | Add back specific deduction from 2019 federal Form 990-T, Part III, Line 38.....                                     | 2. |    | .00 |
| 3. | Subtotal: Add Line 1 and Line 2. ....  | 3. |    | .00 |
| 4. | Apportionment fraction from <i>Schedule A</i> , Line 5.....  | 4. | 0. |     |
| 5. | <b>2019 Connecticut net operating loss available for carryforward:</b><br>Line 3 or Line 3 multiplied by Line 4..... | 5. |    | .00 |