



17. **Total Tax** (enter amount from Line 16, on front of this return) 17. **205** **00**

	COLUMN A Employer Identification Number	COLUMN B Connecticut Wages, Tips, etc.	COLUMN C Connecticut Income Tax Withheld
18a. <b>W-2, W-2G, and 1099 Identification Information</b> (only enter information from your W-2, W-2G, and 1099 forms if Connecticut income tax was withheld).	get number from W-2	13,200 .00	100 .00
18b.		.00	.00
18c.		.00	.00
18d.		.00	.00
18e.		.00	.00
18f.		.00	.00
18g.		.00	.00
18h. Enter additional CT withholding from <i>Schedule CT-1040WH</i> , Line 3			.00

18. **Total Connecticut Income Tax Withheld** (add the amounts in Column C and enter here) 18. **100** **00**

19. All 2004 estimated tax payments and any overpayments applied from a prior year 19. **00** **00**

20. Payments made with Form CT-1040 EXT (Request for extension of time to file) 20. **00** **00**

21. **Total Payments** (Add Lines 18, 19, and 20) 21. **100** **00**

22. **Overpayment** (If Line 21 is more than Line 17, subtract Line 17 from Line 21.) 22. **105** **00**

23. Amount of Line 22 you want applied to your 2005 estimated tax 23. **00** **00**

<b>Contributions</b>	24a. AIDS Research	.00	24b. Organ Transplant	.00	
24c. Endangered Species/Wildlife	.00	24d. Breast Cancer Research	.00	24e. Safety Net Services	.00

24. **Total Contributions** of Refund to Designated Charities (add amounts from Lines 24a - 24e) 24. **00** **00**

25. **Refund** (Subtract Lines 23 and 24 from Line 22) For faster refund, choose Direct Deposit and complete Lines 25a, 25b, and 25c. 25. **105** **00**

25a. Type of Account:  Checking  Savings 25b. Routing Number \_\_\_\_\_

25c. Account Number \_\_\_\_\_

26. **Tax Due** (If Line 17 is more than Line 21, subtract Line 21 from Line 17) 26. **00** **00**

27. If Late: Enter Penalty (Multiply Line 26 by 10% (.10)) 27. **00** **00**

28. If Late: Enter Interest (Multiply Line 26 by number of months late or fraction thereof, then by 1% (.01)) 28. **00** **00**

29. Interest on underpayment of estimated tax (from Form CT-2210, see instructions, Page 17) 29. **00** **00**

30. **Total Amount Due** (Add Lines 26 through 29) 30. **00** **00**

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 to DRS is a fine of not more than \$5,000, or 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> Keep a copy for your records.	Your Signature	Date	Daytime Telephone Number
	Spouse's Signature (if joint return)	Date	Daytime Telephone Number
	Paid Preparer's Signature	Date	Telephone Number
	Firm's Name, Address, and ZIP Code		Preparer's SSN or PTIN
			FEIN

**Third Party Designee** - Complete the following if you wish to authorize DRS to contact another person about this return.

Designee's Name	Telephone Number	Personal Identification Number (PIN)
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**Schedule 3 - PROPERTY TAX CREDIT WORKSHEET**

Qualifying Property	Primary Residence	Auto 1	Auto 2 (Married Filing Jointly Only)
<b>Name of Connecticut Tax Town or District</b>	• _____	• _____	• _____
<b>Description of Property</b> If primary residence, enter street address. If motor vehicle, enter year, make, and model.	• _____ • _____	• _____ • _____	• _____ • _____
<b>List or Bill Number</b> (if available)	• _____	• _____	• _____
<b>Date(s) Paid</b> (See instructions, Page 26)	• ____ / ____ / <b>2004</b> • ____ / ____ / <b>2004</b>	• ____ / ____ / <b>2004</b> • ____ / ____ / <b>2004</b>	• ____ / ____ / <b>2004</b> • ____ / ____ / <b>2004</b>
<b>Amount Paid</b>	60. <span style="border: 1px solid black; padding: 2px;">    ,    ,    .00</span>	61. <span style="border: 1px solid black; padding: 2px;">    ,    ,    .00</span>	62. <span style="border: 1px solid black; padding: 2px;">    ,    ,    .00</span>
<b>63. Total Property Tax Paid</b> (Add Lines 60, 61, and 62.)			63. <span style="border: 1px solid black; padding: 2px;">    ,    ,    .00</span>
<b>64. Maximum property tax credit allowed</b>			• 64. <span style="border: 1px solid black; padding: 2px;">350.00</span>
<b>65. Enter the lesser of Line 63 or Line 64.</b>			• 65. <span style="border: 1px solid black; padding: 2px;">    .00</span>
<b>66. Enter the decimal amount</b> for your filing status and Connecticut AGI from the Property Tax Credit Table <b>exactly as it appears on Page 27.</b> (If zero, enter amount from Line 65 on Line 68.)			• 66. <span style="border: 1px solid black; padding: 2px;">.    </span>
<b>67. Multiply Line 65 by Line 66</b>			• 67. <span style="border: 1px solid black; padding: 2px;">    .00</span>
<b>68. Subtract Line 67 from Line 65.</b> Enter here and on Line 11.			68. <span style="border: 1px solid black; padding: 2px;">    .00</span>

**Schedule 4 - INDIVIDUAL USE TAX WORKSHEET**

Complete this worksheet to calculate your Connecticut Individual Use Tax liability.

COLUMN A	COLUMN B	COLUMN C	COLUMN D	COLUMN E	COLUMN F	COLUMN G
DATE OF PURCHASE	DESCRIPTION OF GOODS OR SERVICES	RETAILER OR SERVICE PROVIDER	PURCHASE PRICE	CT TAX DUE (.06 X Column D)	TAX, IF ANY, PAID TO ANOTHER JURISDICTION	BALANCE DUE (Column E minus Column F but not less than zero)
•						
•						
•						
•						
•						
•						
•						
•						
•						
•						
•						
• <b>Total of individual purchases under \$300 not listed above</b>						

69. **Individual Use Tax** (Add all amounts for Column G.) Enter here and on Form CT-1040, Line 15. • 69.     ,    ,    .00

Use envelope provided, with correct mailing label, or mail to:	
<b>For refunds and all other tax forms without payment:</b> Department of Revenue Services PO Box 2976 Hartford CT 06104-2976	<b>For all tax forms with payment:</b> Department of Revenue Services PO Box 2977 Hartford CT 06104-2977

Make your check or money order payable to: **“Commissioner of Revenue Services”**  
 To ensure proper posting, write your SSN(s) and “2004 Form CT-1040” on your check or money order.