Form NAA-02

2014 Connecticut Neighborhood Assistance Act Business Application

Each business firm requesting a tax credit under the Neighborhood Assistance Act (NAA) Program must complete and submit Form NAA-02 for each cash contribution for which a tax credit is being requested. Form NAA-02 may be mailed or hand-delivered (no faxes will be accepted) on or after September 15, 2014, but no later than October 1, 2014, to:

Department of Revenue Services Research Unit 25 Sigourney St Ste 2 Hartford CT 06106-5032

To electronically submit your application, email Form NAA-02 to **NAAProgram@ct.gov**.

The business must make its contribution during its income year that begins in 2014.

Business firms requesting a tax credit under the NAA program must be authorized to do business in Connecticut and subject to the Insurance Premiums Tax (Chapter 207), Corporation Business Tax (Chapter 208), the Public Services Companies taxes (Chapters 209, 210, 211 or 212) or the Business Entity Tax (Chapter 213a). For purposes of a business entity subject to the Business Entity Tax, the credit may only be used by the members or partners of the entity that are subject to the Corporation Business Tax.

For additional information, contact the Department of Revenue Services (DRS), Research Unit at **860-297-5687**.

CT Tax Registration Number

Part I - Business Firm Information

Business name

Business address	Number and street	PO Box		
City or town	State	ZIP code		
Name of contact person			Telephone number	
Title		Email address of conta	ct person	
May DRS approve this application thro	ugh an email to your contact person?	Yes	☐ No	
Enter income year beginning	, 201	,		
Type of business C Corporation	Other (specify)			
Tax type against which the credit will back to Corporation Business Tax	e used Insurance Premiums Tax	☐ Public Service Co	mpanies Tax	
Part II - Program Propos	al Information			
Organization/municipal agency				
Program title				
Municipality approving program				
Amount of cash contribution (\$256) minimum).		\$	
Authorized representative's name (print)		uthorized representative's	title	
Authorized representative's signature (Do	not use black ink))ate		