Form CT-1065/CT-1120SI Supplemental Attachment

(Rev. 12/17)

Complete this form in blue or black ink only.

#### Part I Schedule B – PE Member Composite Return Attach supplemental attachment(s), if needed.

Column A  Member # From Part IV	Column B  Identification Number  See instructions.			Column D Multiply Column C by 6.99% (0.0699)		Column E Members' Credit Schedule CT K-1, Part IV, Line 5, Col. B		Column F Connecticut Income Tax Liability Column D minus Column E	
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>▶</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
	<b>&gt;</b>	<b>&gt;</b>	00	0	0	<b>&gt;</b> 0	0	<b>&gt;</b>	00
D, E, and F. Enter the to	hment Subtotal - Total Columns C, otal of all supplemental attachments 1120SI, Part I, Schedule B, Line 9.		00	0	0	O	0		00

## Part I Schedule D – Connecticut-Sourced Income From Subsidiary PE(s)

Only a parent PE must complete this schedule.

- Refer to federal Schedule K-1 and Schedule CT K-1 for amounts to enter in Columns A, B, and C.
- Amounts reported in Column B are subject to the passive activity limitations, at-risk limitations, and capital loss limitations.

Name of		Colu		Colur		Column C CT Income Tax Liability Schedule CT K-1, Part III, Line 1		
Name of Subsidiary PE	FEIN	Amount on Fede	Reported eral K-1	Amount Connecticu				
<b>&gt;</b>	<b>•</b>	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
<b>&gt;</b>	<b>•</b>	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
<b>&gt;</b>	<b>•</b>	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
•	<b>•</b>	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
<b>&gt;</b>	<b>•</b>	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
•	<b>•</b>	<b>•</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
<b>&gt;</b>	<b>•</b>	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
•	<b>•</b>	<b>•</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
<b>&gt;</b>	<b>•</b>	<b>•</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
•	<b>•</b>	<b>•</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
<b>&gt;</b>	<b>•</b>	<b>•</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
<b>&gt;</b>	<b>•</b>	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
•	<b>•</b>	<b>•</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
<b>&gt;</b>	<b>•</b>	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
<b>&gt;</b>	<b>&gt;</b>	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
<b>&gt;</b>	<b>&gt;</b>	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	
Supplemental Attachment Subto and C. Enter the total of all supp Form CT-1065/CT-1120SI, Part I, S	lemental attachments		00		00		00	

# Part IV - Member Information

Member #	Member Name and Address See instructions for order in which to list and for member type codes.	Member Type Code	FEIN or SSN	Profit Sharing % Enter as a decimal.	Loss Sharing % Enter as a decimal.	Capital Ownership % Enter as a decimal.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>•</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>•</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>•</b>		<b>•</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.
<b>&gt;</b>		<b>&gt;</b>	<b>&gt;</b>	▶.	▶.	▶.

#### Part V – Member's Share of Connecticut Modifications

		Member		Member		Member		Member	
Additions: Enter all amounts as positive numbers.		#		#		#		#	
Interest on state and local government obligations other than Connecticut	1.	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
Mutual fund exempt-interest dividends from non-Connecticut state or municipal government obligations	2.	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
Certain deductions relating to income exempt from Connecticut income tax	3.	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
4. Reserved for future use	4.								
5. Other - specify:	5.	<b>&gt;</b>	00	<b>•</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
Subtractions: Enter all amounts as positive numbe	rs.								
6. Interest on U.S. government obligations	6.	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
Exempt dividends from certain qualifying mutual funds derived from U.S. government obligations	7.	<b>&gt;</b>	00	<b>•</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
Certain expenses related to income exempt from federal income tax but subject to Connecticut tax	8.	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
9. Reserved for future use	9.								
10. Other - specify:	10.	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00

# Part VI – Connecticut-Sourced Portion of Items From Federal Schedule K-1 of Form 1065 or Form 1120S Include member's share of Connecticut modifications from Part V.

		Member		Member		Member		Member	
		#		#		#		#	
Ordinary business income (loss)	1.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
2. Net rental real estate income (loss)	2.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
3. Other net rental income (loss)	3.	<b>&gt;</b> 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
4. Guaranteed payments	4.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
5. Interest income	5.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
6a. Ordinary dividends	6a.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
6b. Qualified dividends	6b.	<b>&gt;</b> 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
7. Royalties	7.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
8. Net short-term capital gain (loss)	8.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
9a. Net long-term capital gain (loss)	9a.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
9b. Collectibles (28%) gain (loss)	9b.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
9c. Unrecaptured section 1250 gain	9c.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
10. Net section 1231 gain (loss)	10.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
11. Other income (loss): Attach statement	11.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
12. Section 179 deduction	12.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00
13. Other deductions: Attach statement	13.	▶ 0	00	<b>&gt;</b>	00	<b>&gt;</b>	00	<b>&gt;</b>	00

## Part VII - Connecticut Income Tax Credit Summary

	y			
	Member	Member	Member	Member
	#	#	#	#
Reserved for future use	1.			
2. Reserved for future use.	2.			
3. Angel investor tax credit	3.	00 -	00 -	00 🕨
4. Insurance reinvestment fund tax credit	4.	00 -	00 -	00 🕨
5. Total credits: Add Line 3 and Line 4	5.	00	00	00 00