

Form CT-1040NR/PY Required Fields

The following fields are required to be automatically populated or completed for taxpayers to continue filing, or must be completed in response to the selection of other fields.

Required to be Automatically-Populated Fields

Each page of each form submitted to DRS must include the following automatically populated fields:

1. **Document Identification Numbers** - Three occurrences of the Document Identification Number (DIN) must be on each page. The QR Code and two DINs must be on each scannable page. (See Document Identification Number and Quick Reference (QR) Code, on Page 4.)
2. **Social Security Number** - The Social Security Number must appear at the top of Form CT-1040NR/PY, Pages 2, 3, and 4; Supplemental Schedule CT-1040WH; Schedule CT-IT Credit, Pages 1 and 2; Schedule CT-PE; **and** Form CT-6251, Pages 1 and 2.
3. In addition, the following **Checklist for filing your Connecticut income tax return** must be included when hard copies of the form are printed. Taxpayers should not send the checklist to DRS with the return.

Do not send this sheet with your return.

Checklist for filing your Connecticut income tax return:

1. Do not send this sheet with your return. Be sure that Page 1 of your return is not printed on the back of this sheet.
2. Verify that the address lines on the return are correct and proper abbreviations are used.
3. If the Employer or Payer's Federal ID # is not listed on Page 2, Lines 20a through 20e, Column A, D00 withholding claimed will be disallowed and your return will not be successfully processed.
4. Do not attempt to remove or modify the solid boxes that print out on your return. Altering target marks may affect the processing of your return.
5. Do not send "Draft" or "Unapproved" versions of your return. This will delay or stop the processing of your return.
6. Do not make manual (hand written or typed) corrections to your return; this is a machine readable return. Changes may only be made by reentering information in your software and re-printing the return.
7. Do not use this return to change or amend previously filed returns. You must use Form CT-1040X to change or amend a previously filed Connecticut income tax return. (File Form CT-1040X electronically at www.ct.gov/TSC using the Taxpayer Service Center.)
8. **Do not attach or send copies of forms W-2 or 1099.**
9. Send D00 completed pages of CT-1040NR/PY, Supplemental Schedule CT-1040WH, Schedule CT-IT Credit, Schedule CT-PE, and Form CT-6251.
10. Make check payable to: Commissioner of Revenue Services
11. To ensure proper posting, write your SSN(s) (optional) and "2020 Form CT-1040NR/PY" on your check.
12. To mail your return, use the following addresses:
For all tax returns with payment:
Department of Revenue Services
PO Box 2977
Hartford CT 06104-2977

For refunds and tax returns without payment:
Department of Revenue Services
PO Box 2976
Hartford CT 06104-2976
13. Verify that all fields print completely and any preparer information is filled out and legible before filing this return. If you find any errors, do not make manual changes. Re-enter information in your software and re-print the return.
14. If you wish to directly deposit a refund into a checking or savings bank account, confirm that Lines 27a through 27d have been completed. You **PXW** enter bank information on both the federal and Connecticut returns for each to be correctly deposited.
15. When making payment using Form CT-1040V, **DO NOT** attach copies of your previously filed Form CT-1040NR/PY.

Do not send this sheet with your return.

NRPY1220V011555



Form CT-1040NR/PY - 2020
Connecticut Nonresident and Part-Year
Resident Income Tax Return (Rev. 12/20)

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Other tax year, beginning: and ending:

Y 6 N FJ N O)6 N HOH N 4:
211 - 92 - 9148 - -

GUNASEKHAR BANDI N Dec. N 3
N Dec. Y 1

3217 N RODNEY PARHAM RD N CT-8379 N CT-2210
N CT-1040 CRC N Federal Form 1310

LITTLE ROCK AR 72212 - •

Table with 3 columns: Line number, Description, and Amount. Includes lines 1 through 18 detailing federal adjusted gross income, deductions, and total tax.

Clip check here. Do not use staples. Do not send Forms W-2 or 1099, or Schedules CT K-1.



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19. Amount from Line 18

19. • 11

Forms W-2, W-2G, 1099, and Schedule CT K-1 Information

Col. A - Employer's Federal ID #	Col. B - CT Wages, Tips, etc.	Sch. CT K-1	Col. C - CT Income Tax Withheld
20a. 13 - 3924155	• 251	•	18
20b. -	• 0	•	0
20c. -	• 0	•	0
20d. -	• 0	•	0
20e. -	• 0	•	0
20f. Additional Connecticut withholding (from Supplemental Schedule CT-1040WH, Line 3)			20f. 0

20. Total Connecticut income tax withheld: Amounts in Column C.	20.	18
21. All 2020 estimated tax payments and any overpayments applied from a prior year	21.	0
22. Payments made with Form CT-1040 EXT	22.	0
22a. Claim of right credit (from Form CT-1040 CRC, Line 6)	22a.	0
22b. Pass-through entity tax credit (from Schedule CT-PE, Line 1). Schedule must be attached.	22b.	0
23. Total payments and refundable credits: Add Lines 20, 21, 22, 22a and 22b.	23.	18
24. Overpayment: If Line 23 is more than Line 19, Line 19 subtracted from Line 23.	24.	7
25. Amount of Line 24 you want applied to your 2021 estimated tax	25.	0
26. Reserved for future use	26.	0
26a. Total contributions of refund to designated charities (from Schedule 4, Line 63)	26a.	0
27. Refund: Lines 25, 26, and 26a subtracted from Line 24. If you have not elected to direct deposit, a refund check will be issued and processing may be delayed.	27.	7
27a. Acct. type <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Sv. 27b. Rout. # 011900254 27c. Acct. # 385023043879		
27d. Refund going to a bank account outside the U.S. 27d. <input checked="" type="checkbox"/> N		
28. Tax due: If Line 19 is more than Line 23, Line 23 subtracted from Line 19.	28.	0
29. If late: Penalty entered. Line 28 multiplied by 10% (.10).	29.	0
30. If late: Interest entered. Line 28 multiplied by number of months or fraction of a month late, then by 1% (.01).	30.	0
31. Interest on underpayment of estimated tax (from Form CT-2210.)	31.	0
32. Total amount due: Add Lines 28 through 31.	32.	0.00

Declaration: I declare under penalty of law that I have examined this return and all accompanying schedules and statements, including reporting and payment of any use tax due, 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 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.

Your signature	Date	Home/cell telephone number
•	•	2034444779
Spouse's signature (if joint return)	Date	Daytime telephone number
•	•	•
Paid preparer's signature	Date	Telephone number
• SYAM PRIYA RAM SAGAR GU	• 022521	• 6789659522
Paid preparer's name		Paid Preparer's PTIN
SYAM PRIYA RAM SAGAR GUPTA TALL		P02082703
Firm's name, address and ZIP code		6HII-employed
ENDOW TAX LLC 135 FALLEN LEAF CT ALPHARETT GA 30005 -		N

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

Designee's name	Telephone number	Personal identification number (PIN)
•	•	•

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Sign Here
Keep a copy for your records.

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Schedule 1 - Modifications to Federal Adjusted Gross Income

33. Interest on state and local government obligations other than Connecticut	33.	0
34. Mutual fund exempt-interest dividends from non-Connecticut state or municipal government obligations	34.	0
35. Taxable amount of lump-sum distributions from qualified plans not included in federal adjusted gross IQFRPH	35.	0
36. Beneficiary's share of Connecticut fiduciary adjustment: Entered only if greater than zero.	36.	0
37. Loss on sale of Connecticut state and local government bonds	37.	0
38. Section 168(k) federal bonus depreciation deduction allowed for property placed in service during this year.	38.	0
38a. 80% of Section 179 federal deduction.	38a.	0
39. Other - specify •	39.	0
40. Total additions: Add Lines 33 through 39.	40.	0
41. Interest on U.S. government obligations	41.	0
42. Exempt dividends from certain qualifying mutual funds derived from U.S. government obligations	42.	0
43. Social Security benefit adjustment (from Social Security Benefit Adjustment Worksheet)	43.	0
44. Refunds of state and local income taxes	44.	0
45. Tier 1 and Tier 2 railroad retirement benefits and supplemental annuities	45.	0
46. Military retirement pay	46.	0
47. 25% of income received from Connecticut Teachers' Retirement System	47.	0
48. Beneficiary's share of Connecticut fiduciary adjustment: Entered only if less than zero.	48.	0
49. Gain on sale of Connecticut state and local government bonds	49.	0
50. CHET contributions made in 2020 or an excess carried forward from a prior year Acct. #	50.	0
50a. 25% of Section 168(k) federal bonus depreciation deduction added back in preceding three years.	50a.	0
50b. 28% of pension or annuity income.	50b.	0
51. Other - specify •	51.	0
52. Total subtractions: Add Lines 41 through 51.	52.	0

Schedule 2 - Credit for Income Taxes Paid to Qualifying Jurisdictions

53. Connecticut AGI during residency portion of taxable year	53.	0
	Col. A	Col. B
54. Qualifying jurisdiction's name and two-letter code	54. •	•
55. 100-Connecticut income included on Line 53 and reported on a qualifying jurisdiction's income tax return (from Schedule 2 Worksheet)	55.	0
56. Line 55 divided by Line 53. May not exceed 1.0000.	56.	0.0000
57. Apportioned income tax	57.	0
58. Line 56 multiplied by Line 57	58.	0
59. Allowable income tax paid to a qualifying jurisdiction	59.	0
60. Lesser of Line 58 or Line 59	60.	0
61. Total credit: Add Line 60, all columns.	61.	0

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Schedule 3 - Individual Use Tax

62a. Use tax at 1% (from Connecticut Individual Use Tax Worksheet, Section A, Column 7)	62a.	0
62b. Use tax at 6.35% (from Connecticut Individual Use Tax Worksheet, Section B, Column 7)	62b.	0
62c. Use tax at 7.75% (from Connecticut Individual Use Tax Worksheet, Section C, Column 7)	62c.	0
62d. Use tax at 2.99% (from Connecticut Individual Use Tax Worksheet, Section D, Column 7)	62d.	0
62. Individual use tax: Add Lines 62a, 62b, 62c, and 62d.	62. •	0

Schedule 4 - Contributions to Designated Charities

63a. AR	63a.	0
63b. 27	63b.	0
63c. ES/W	63c.	0
63d. BCR	63d.	0
63e. 616	63e.	0
63f. O5	63f.	0
63g. CBS	63g.	0
63h. MHCIA	63h.	0
63. Total Contributions: Add Lines 63a through 63h.	63.	0

Taxpayer email

Schedule CT-SI

Nonresident or Part-Year Resident

Schedule of Income From Connecticut Sources

2020

Complete this schedule if you were a nonresident or part-year resident of Connecticut and attach it to Form CT-1040NR/PY. Do not use staples. Complete in blue or black ink only. 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 the Department of Revenue Services (DRS).

Your first name and middle initial GUNASEKHAR	Last name BANDI	Your Social Security Number 2 1 1 : 9 2 : 9 1 4 8
If joint return, spouse's first name and middle initial	Last name	Spouse's Social Security Number

See 2020 Connecticut Nonresident and Part-Year Resident Income Tax Return Instructions online before completing this schedule.

Part 1 - Connecticut Income - Part-Year Residents: Complete Schedule CT-1040AW, Part-Year Resident Income Allocation. Add Columns B and D for each line of Schedule CT-1040AW and enter the totals on Lines 1 through 30 below. Nonresidents: Enter the income received from Connecticut sources.

1. Wages, salaries, tips, etc.	▶ 1.	251	
2. Taxable interest	▶ 2.		
3. Ordinary dividends	▶ 3.	0	
4. Alimony received	▶ 4.		
5. Business income or (loss)	▶ 5.		
6. Capital gain or (loss)	▶ 6.	0	
7. Other gains or (losses)	▶ 7.		
8. Taxable amount of IRA distributions	▶ 8.		
9. Taxable amounts of pension and annuities	▶ 9.		
10. Rental real estate, royalties, partnerships, S corporations, trusts, etc.	▶ 10.	0	
11. Farm income or (loss)	▶ 11.		
12. Unemployment compensation	▶ 12.		
13. Taxable amount of social security benefits	▶ 13.		
14. Other income: See instructions.	▶ 14.		
15. Gross income from Connecticut sources: Add Lines 1 through 14.	▶ 15.	251	00

Part 2 - Adjustments to Connecticut Income - Enter adjustments directly related to income reported above.

16. Educator expenses	▶ 16.		
17. Certain business expenses of reservists, performing artists, and fee-basis government officials	▶ 17.		
18. Health savings account deduction	▶ 18.		
19. Moving expenses for members of the armed forces	▶ 19.		
20. Deductible part of self-employment tax	▶ 20.		
21. Self-employed SEP, SIMPLE, and qualified plans	▶ 21.		
22. Self-employed health insurance deduction	▶ 22.		
23. Penalty on early withdrawal of savings	▶ 23.		
24. Alimony paid. Recipient's last name ▶ _____ SSN ▶ _____ - _____ - _____ ▶	▶ 24.		
25. IRA deduction	▶ 25.		
26. Student loan interest deduction	▶ 26.		
27. Tuition and fees	▶ 27.		
28. Reserved for future use	▶ 28.		
29. Total adjustments: Add Lines 16 through 27.	▶ 29.		
30. Income from Connecticut sources: Subtract Line 29 from Line 15. Enter the amount here and on Form CT-1040NR/PY, Line 6.	▶ 30.	251	00

Employee Apportionment Worksheet - Complete Lines A through G only when the income from employment is earned both inside and outside Connecticut and the exact amount of Connecticut income is not known. Do not complete Lines A through G if you know the exact amount of your Connecticut-sourced income.

A. Working days (or other basis) outside Connecticut	A		
B. Working days (or other basis) inside Connecticut	B		
C. Total working days: Add Line A and Line B.	C		
D. Nonworking days (Holidays, weekends, etc.)	D		
E. Connecticut ratio: Divide Line B by Line C. Round to four decimal places.	E		
F. Total income being apportioned	F		
G. Connecticut income: Multiply Line E by Line F. Enter here and on Schedule CT-SI, Line 1. Basis, if other than working days: _____	G		