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; Schedule CT-CHET; 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.

- 1. Be sure that Page 1 of your return is not printed on the back of this sheet.
- 2. Do not send "Draft" or "Unapproved" versions of your return. This will delay or stop the processing of your return.
- 3. 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.
- 4. Do not attach or send copies of forms W-2 or 1099.
- 5. Verify that the address lines on the return are correct and proper abbreviations are used.
- 6. If the Employer or Payer's Federal ID # is not listed on Page 2, Lines 18a through 18e, Column A, **all** withholding claimed will be disallowed and your return will not be successfully processed.
- 7. 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.
- 8. 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.)
- 9. Send **all** completed pages of CT-1040NRPY, Schedule CT-CHET, Supplemental Schedule CT-1040WH, Schedule CT-IT Credit, Schedule CT-PE, and Form CT-6251. Send **all** four pages of your completed return, both pages of your completed Schedule CT-CHET, and any other supporting schedules.
- 10. Make check payable to: Commissioner of Revenue Services
- 11. To ensure proper posting, write your SSN(s) (optional) 2022 Form CT-1040NRPY" 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 25a through 25d have been completed. You **must** enter bank information on both the federal and Connecticut returns for each to be correctly deposited. Alpha characters are not allowed in Routing or Account Number fields.
- 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.

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Other tax year, beginning:



Form CT-1040NR/PY - 2022 Connecticut Nonresident and Part-Year

Resident Income Tax Return (Rev. 12/22)

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and ending:

Y	S	N	FJ		N	MFS			N	НОН	N	QSS
---	---	---	----	--	---	-----	--	--	---	-----	---	-----

312 - 99 - 5554 - -

KRISHNA PRIYA DIRISALA N Dec. N P N Dec. Y N

15566 SE 5TH CT N CT-8379 N CT-2210 N CT-19IT

USA N CT-1040 CRC N Federal Form 1310

BELLEVUE WA 98007 -

1.	Federal adjusted gross income (from federal Form 1040, Line 11 or federal Form 1040-SR, Line 11)	1.	74652
2.	Additions to federal adjusted gross income (from Schedule 1, Line 40)	2.	0
3.	Add Line 1 and Line 2	3.	74652
4.	Subtractions from federal adjusted gross income (from Schedule 1, Line 52)	4.	0
5.	Connecticut adjusted gross income: Line 4 subtracted from Line 3.	5.	74652
6.	Income from Connecticut sources (from Schedule CT-SI, Line 30)	6.	1710
7.	Greater of Line 5 or Line 6. If less than zero, "0" is entered on Line 12.	7.	74652
8.	Income tax	8.	3737
9.	Line 6 divided by Line 5. If Line 6 is equal to or greater than Line 5, 1.0000 is entered.	9.	0.0229
10	Line 9 multiplied by Line 8	10.	86
11	. Credit for income taxes paid to qualifying jurisdictions (from Schedule 2, Line 61)	11.	0
12	Line 11 subtracted from Line 10. If Line 11 is greater than Line 10, "0" is entered.	12.	86
13	. Connecticut alternative minimum tax (from Form CT-6251)	13.	0
14	. Add Line 12 and Line 13.	14.	86
15	. Total allowable credits (from Schedule CT-IT Credit, Part 1, Line 11)	15.	0
16	Connecticut income tax: Line 15 subtracted from Line 14. If less than zero, "0" is entered.	16.	86
17	. Individual use tax (from Schedule 3, Line 62) If no tax is due, "0" is entered.	17.	0
18	. Total tax: Add Line 16 and Line 17.	18.	86





0

0

Form CT-1040NR/PY, Page 2 of 4





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28.

29.

86 19. Amount from Line 18 19 Forms W-2, W-2G, 1099, and Schedule CT K-1 Information Col. A - Employer's Federal ID # Col. B - CT Wages, Tips, etc. Col. C - CT Income Tax Withheld Sch. CT K-1

20a.	06 - 6000798	•	1710	• N	120
20b.	-	•	0	•	0
20c.	-	•	0	•	0
20d.	-	•	0	•	0
20e.	-	•	0	•	0

20f. Additional Connecticut withholding (from Supplemental Schedule CT-1040WH, Line 3) 0

20. Total Connecticut income tax withheld: Amounts in Column C.	20.	120
21. All 2022 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.	120
24. Overpayment: If Line 23 is more than Line 19, Line 19 subtracted from Line 23.	24.	34
25. Amount of Line 24 you want applied to your 2023 estimated tax	25.	0
26. Amount of Line 24 you want applied as a CHET contribution (from Schedule CT-CHET, Line 4)	26.	0
26a. Total contributions of refund to designated charities (from Schedule 4, Line 63)	26a.	0

27. 27. Refund: Lines 25, 26, and 26a subtracted from Line 24. 34

If you have not elected to direct deposit, a refund check will be issued and processing may be delayed. 27a. Acct. type Ck. N Sv. 27b. Rout. # 021100361 27c. Acct. # 766309311

27d. Refund going to a bank account outside the U.S. 27d. N 28. Tax due: If Line 19 is more than Line 23, Line 23 subtracted from Line 19.

29. If late: Penalty entered. Line 28 multiplied by 10% (.10). 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. 32. Total amount due: Add Lines 28 through 31. 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.

| Date | D

Your signature •	Date	4702611895	
Spouse's signature (if joint return)	Date	Daytime telephone number	
•	•	•	
Paid preparer's signature Date	Telephone number	Paid Preparer's PTIN	
• SYAM PRIYA RAM SAGAR GU • 031523	6789659522	P02082703	
Paid preparer's name		FEIN	
SYAM PRIYA RAM SAGAR GUPTA TALL		843171965	
Firm's name, address and ZIP code GLOBAL TAXES LLC		Self-employed	
245 ROONEY CT E BRUNSWI	NJ 08816 -	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)
•	•	•
NRE		

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Schedule 1 - Modifications to Federal Adjusted Gross Income			
33. Interest on state and local government obligations other than Connect	icut	33.	0
34. Mutual fund exempt-interest dividends from non-Connecticut state or r	government		
obligations	34.	0	
35. Taxable amount of lump-sum distributions from qualified plans not incl	uded in fe	deral adjusted gross	
income		35.	0
36. Beneficiary's share of Connecticut fiduciary adjustment: Entered only	if greater t	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		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. govern	ment obligations 42.	Ö
43. Social Security benefit adjustment (from Social Security Benefit Adjust	•	•	0
44. Refunds of state and local income taxes		44.	0
45. Tier 1 and Tier 2 railroad retirement benefits and supplemental annuiti	es	45.	0
46. Military retirement pay		46.	0
47. 50% of income received from Connecticut Teachers' Retirement Syste	em	47.	0
48. Beneficiary's share of Connecticut fiduciary adjustment: Entered only	if less thar	n zero. 48.	0
49. Gain on sale of Connecticut state and local government bonds		49.	0
50. CHET contributions made in 2022 or			
an excess carried forward from a prior year Acct. #		50.	0
EO2 250/ of Castian 160/// fadaral hange depresiation deduction added ha	ale in nraa	ading four voors FOs	0
50a. 25% of Section 168(k) federal bonus depreciation deduction added ba	ick in prec	• •	0
50b. 100% 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	5		
53. Connecticut AGI during residency portion of taxable year		53.	0
		Cal A	Cal D
		Col. A	Col. B
54. Qualifying jurisdiction's name and two-letter code 54.	•	•	
55. Non-Connecticut income included on Line 53 and reported on a		0	0
qualifying jurisdiction's income tax return (from Schedule 2 Worksheet)	55.	0	0
56. Line 55 divided by Line 53. May not exceed 1.0000.	56.	0.0000	0.0000
, , , , , , , , , , , , , , , , , , , ,			
57. Apportioned income tax	57.	0	0
		0	0
58. Line 56 multiplied by Line 57	58.	0	0
59. Allowable income tax paid to a qualifying jurisdiction	59.	0	0
60. Lesser of Line 58 or Line 59	60.	0	0
61. Total credit: Add Line 60, all columns.		61.	0
or. Total Grount Add Line OU, all Columns.		UI.	O

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Taxpayer email



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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. OT	63b.	0
63c. ES/W	63c.	0
63d. BCR	63d.	0
63e. SNS	63e.	0
63f. MR	63f.	0
63g. CBS	63g.	0
63h. MHCIA	63h.	0
63. Total Contributions: Add Lines 63a through 63h.	63.	0

NRPY1222V041555

Your first name and middle initial

KRISHNA PRIYA

Schedule CT-SI

myconne CT

Your Social Security Number 3 1 2

9 9

(Rev. 12/22)

Nonresident or Part-Year Resident **Schedule of Income From Connecticut Sources**

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).

Last name

DIRISALA

If joint return, spouse's first name and middle initial Last name S		Spouse's Social Security Number					
				<u> : :</u>			
	Visit portal.ct.gov/DRS/Individuals/Individual-Income-Tax before completing this schedule.						
Ac	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.	1,710			
2.	Taxable interest		2.				
3.	Ordinary dividends	\blacktriangleright	3.				
4.	Alimony received		4.				
5.	Business income or (loss)		5.				
6.	Capital gain or (loss)	\blacktriangleright	6.				
7.	Other gains or (losses)		7.				
8.	Taxable amount of IRA distributions	\blacktriangleright	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)	\blacktriangleright	11.				
12.	Unemployment compensation	\blacktriangleright	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.	1,710	00		
-	rt 2 - Adjustments to Connecticut Income - Enter adjustments directly related to income		ortec	d above.			
16.	Educator expenses		16.				
17.	Certain business expenses of reservists, performing artists, and fee-basis government officials		17.				
l .	Health savings account deduction		18.				
l .	Moving expenses for members of the armed forces		19.				
20.	Deductible part of self-employment tax		20.				
l .	Self-employed SEP, SIMPLE, and qualified plans		21.				
22.	Self-employed health insurance deduction		22.				
23.	Penalty on early withdrawal of savings	\blacktriangleright	23.				
24.	Alimony paid. Recipient's last name ► SSN ► =	\blacktriangleright	24.				
25	IRA deduction		25.				
26.	Student loan interest deduction		26.				
27.	Archer MSA deduction		27.				
28.	Other adjustments	\blacktriangleright	28.				
29.	Total adjustments: Add Lines 16 through 28.	\blacktriangleright	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.	1,710	00		
an	nployee Apportionment Worksheet - Complete Lines A through G only when the income for doutside Connecticut and the exact amount of Connecticut income is not known. Do not come exact amount of your Connecticut-sourced income.						
Α.	Working days (or other basis) outside Connecticut		Α				
В.	Working days (or other basis) inside Connecticut		В				
C.	Total working days: Add Line A and Line B.		С				
D.	Nonworking days (Holidays, weekends, etc.)		D				
E.	Connecticut ratio: Divide Line B by Line C. Round to four decimal places.		Е				
F.	Total income being apportioned		F				
G.	Connecticut income: Multiply Line E by Line F. Enter here and on Schedule CT-SI, Line 1		G				
				REV 02/07/23	PRO		