

Department of Taxation and Finance

## **Claim for Alternative Fuels Credit**



All filers must enter tax period:

	ning

ending

Legal name of corporatio	n
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Employer identification number (EIN)

Attach this form to your tax return (See Form CT-40-I, Instructions for Form CT-40, for assistance)

Crec	lit summary information (See instructions; complete Sections 1 al	nd 2 a	as appropriate before compl	etir	ng thi	s summary.)	
1	Alternative fuels credit from preceding tax years (see instructions)			. •	1		
2	Alternative fuels credit received from affiliates (see instructions)			. •	2		
3	Credit available before transfer and recapture (add lines 1 and 2)			. •	3		
4	Alternative fuels credit transferred to affiliates (see instructions)				4		
5	Credit available after transfer to affiliates (subtract line 4 from line 3) .			. •	5		
6	Recapture of alternative fuels credit (from line 17)			. •	6		
7	Credit available after transfer and recapture (see instructions)						
8	Enter your franchise tax due before credits (see instructions)						
9	Enter any other credits applied before this credit for this tax period (see instr.) •	9					
10	Subtract line 9 from line 8	10					
11	Tax limitation (see instructions)	11					
12	Alternative fuels credit limitation (subtract line 11 from line 10; if the						
	result is negative, enter <b>0</b> )	12					
13	Credit used (see instructions)			. •	13		
14	Unused credit to be carried forward (subtract line 13 from line 7)				14		

Section 1 – C	Section 1 – Computation of credit recapture on alternative fuel vehicle refueling property (see instructions)								
A Tax year credit allowed	B Total recovery period of property	C Years in service prior to recapture year	D Recapture years (column B - column C)	E Recapture % (column D ÷ column B)	<b>F</b> Original credit allowed			<b>G</b> Credit recapture (column E × column F)	
							•		
						+	•		
15 Recaptured	alternative fuel ve	hicle refueling pro	perty credit (add co	olumn G amounts)	•	15			
16 Partners in a partnership: enter your share of the recapture of the credit (see instructions)					16				
17 Total recapt	17 Total recaptured credit (add lines 15 and 16; enter here and on line 6; S corporations, see instructions)								

## Section 2 – Election to transfer credits (Article 9-A taxpayers only) (see instructions)

Part	art A – Alternative fuels credits received from affiliates (see instructions; attach additional sheets if necessary)								
	Tax year	Transferor corporation name	EIN		Credit received				
18					•				
19					•				
20					•				
21	<b>Total credit</b>	received from affiliates (add lines 18, 19, and 20; include total	from attached sheets,						
	if anv: ente	r here and on line 2)		21					

Certification of transferor corporation (for line 18): I certify that I am an authorized person for the transferor named above. On behalf of that corporation, I elect to transfer to the taxpayer the amount of credit shown above.

Signature of authorized person	Official title	Transferor corporation name	Date
	I	I	



<b>Certification of transferor corporation</b> (for line 19): I certify that I am an authorized person for the transferor named on page 1. On behalf of that corporation, I elect to transfer to the taxpayer the amount of credit shown on page 1.					
Signature of authorized person	Official title	Transferor corporation name	Date		

**Certification of transferor corporation** (*for line 20*): I certify that I am an authorized person for the transferor named on page 1. On behalf of that corporation, I elect to transfer to the taxpayer the amount of credit shown on page 1.

Signature of authorized person	Official title	Transferor corporation name	Date

**Certification of transferee corporation** (*for line 21*): I certify that I am an authorized person for the taxpayer. On behalf of that corporation, I elect to receive from the affiliated corporation(s) named on page 1 the amount of credit shown on line 21 on page 1.

	1 () 1 9		1 0
Signature of authorized person	Official title	Transferee corporation name	Date

Part E	Part B – Alternative fuels credits transferred to affiliates (see instructions; attach additional sheets if necessary)							
	Tax year	Transferee corporation name	EIN		Credit transferred			
22								
23								
24								
25	Total credit	transferred to affiliates (add lines 22, 23, and 24; include total free	om attached sheets,					
if any; enter here and on line 4)				25				

**Certification of transferee corporation** (*for line 22*): I certify that I am an authorized person for the transferee corporation named above. On behalf of that corporation, I elect to receive from the taxpayer the amount of credit shown above.

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Signature of authorized person	Official title	Transferee corporation name	Date			

**Certification of transferee corporation** (*for line 23*): I certify that I am an authorized person for the transferee corporation named above. On behalf of that corporation, I elect to receive from the taxpayer the amount of credit shown above.

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Signature of authorized person	Official title	Transferee corporation name	Date

**Certification of transferee corporation** (for line 24): I certify that I am an authorized person for the transferee corporation named above. On behalf of that corporation. I elect to receive from the taxpaver the amount of credit shown above.

Signature of authorized person O	Official title	Transferee corporation name	Date		

## **Certification of transferor corporation** (*for line 25*): I certify that I am an authorized person for the taxpayer. On behalf of that corporation, I elect to transfer to the affiliated corporation(s) named above the amount of credit shown on line 25 above.

corporation, release to transfer to the annualed corporation(3) named above the annual of creat shown on the 25 above.				
Signature of authorized person	Official title	Transferor corporation name	Date	

