



**OP-236**  
**Connecticut Real Estate Conveyance Tax Return**  
(Rev. 10/16)

For Town Clerk Use Only	Town Code	Land Record	
	▶	Vol. ▶	Pg. ▶

Complete Form OP-236 in blue or black ink only.

1. Town  2. Location of property conveyed (number and street)  Amended return

3. Are there more than two grantors/sellers?  Yes If Yes, attach **OP-236 Schedule A - Grantors**, *Supplemental Information for Real Estate Conveyance Tax Return*.

4. Grantor/seller #1 (last name, first name, middle initial)  Taxpayer Identification Number   FEIN  
 SSN  
Grantor/seller address (street and number) after conveyance  City/town  State  ZIP code

5. Grantor/seller #2 (last name, first name, middle initial)  Taxpayer Identification Number   FEIN  
 SSN  
Grantor/seller address (street and number) after conveyance  City/town  State  ZIP code

6. Is the grantor a partnership, S corporation, LLC, estate, or trust?  Yes 8. If this conveyance is for no consideration or less than adequate consideration, which gift  Federal only  State only  
If Yes, attach **OP-236 Schedule A - Grantors** tax returns will be filed?  Both fed. & state  None

7. Is this conveyance between spouses?  Yes

9. Is there more than one grantee/buyer?  Yes If Yes, attach **OP-236 Schedule B - Grantees**, *Supplemental Information for Real Estate Conveyance Tax Return*.

10. Grantee/buyer (last name, first name, middle initial)  Taxpayer Identification Number   FEIN  
 SSN  
Grantee/buyer address (street and number) after conveyance  City/town  State  ZIP code

11. Date conveyed (MM - DD - YYYY)  12. Date recorded (MM - DD - YYYY)  13. Type of instrument:  
 Warranty  Quitclaim  Easement  Other

14. The grantor claims no tax is due because (See instructions.):  Conveyance was for no consideration or consideration was less than \$2,000.  
 Conveyance is exempt under Conn. Gen. Stat. §12-498. (See instructions.) Enter exemption code:   
If exemption code is 01 or 09, enter citation or docket number:

**Computation of Tax** - Enter consideration for conveyance on the appropriate line.

▶ 15. Consideration for unimproved land: See Instructions.	<input type="text"/>	x 0.0075 =	<input type="text"/>
▶ 16. Total consideration for residential dwelling: See Instructions.	<input type="text"/>		
▶ 16a. Portion of Line 16 that is \$800,000 or less: See Instructions.	<input type="text"/>	x 0.0075 =	<input type="text"/>
▶ 16b. Portion of Line 16 that exceeds \$800,000: See Instructions.	<input type="text"/>	x 0.0125 =	<input type="text"/>
▶ 17. Residential property other than residential dwelling	<input type="text"/>	x 0.0075 =	<input type="text"/>
▶ 18. Nonresidential property other than unimproved land	<input type="text"/>	x 0.0125 =	<input type="text"/>
▶ 19. Property conveyed by a delinquent mortgagor: See Instructions.	<input type="text"/>	x 0.0075 =	<input type="text"/>
▶ 20. Total State of Connecticut tax due: Add Lines 15, 16a through 19.	<input type="text"/>		<input type="text"/>

**Declaration:** I declare under penalty of law that I have examined this return (including any accompanying schedules and statements) 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 to the Department of Revenue Services (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.

Indicate who is signing this return:  Grantor  Grantor's attorney  Grantor's authorized agent

Name of person signing the return (type or print)	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of grantor's representative (type or print)	Connecticut juris number if applicable	Telephone number
<input type="text"/>	<input type="text"/>	<input type="text"/>

# Town Clerk Copy

**OP-236**

**Connecticut Real Estate Conveyance Tax Return**

(Rev. 10/16)

<b>For Town Clerk Use Only</b>	Town Code <input type="text"/>	Land Record Vol. <input type="text"/>	Pg. <input type="text"/>
--------------------------------	--------------------------------	---------------------------------------	--------------------------

1. Town <input type="text"/>	2. Location of property conveyed (number and street) <input type="text"/>	Amended return <input type="checkbox"/>
3. Are there more than two grantors/sellers? <input type="checkbox"/> Yes		
4. Grantor/seller #1 (last name, first name, middle initial) <input type="text"/>		
Grantor/seller address (street and number) after conveyance <input type="text"/>	City/town <input type="text"/>	State <input type="text"/> ZIP code <input type="text"/>
5. Grantor/seller #2 (last name, first name, middle initial) <input type="text"/>		
Grantor/seller address (street and number) after conveyance <input type="text"/>	City/town <input type="text"/>	State <input type="text"/> ZIP code <input type="text"/>
6. Is the grantor a partnership, S corporation, LLC, estate, or trust? <input type="checkbox"/> Yes	8. If this conveyance is for no consideration or less than adequate consideration, which gift tax returns will be filed? <input type="checkbox"/> Federal only <input type="checkbox"/> State only <input type="checkbox"/> Both fed. & state <input type="checkbox"/> None	
7. Is this conveyance between spouses? <input type="checkbox"/> Yes		
9. Is there more than one grantee/buyer? <input type="checkbox"/> Yes		
10. Grantee/buyer (last name, first name, middle initial) <input type="text"/>		
Grantee/buyer address (street and number) after conveyance <input type="text"/>	City/town <input type="text"/>	State <input type="text"/> ZIP code <input type="text"/>
11. Date conveyed (MM - DD - YYYY) <input type="text"/>	12. Date recorded (MM - DD - YYYY) <input type="text"/>	13. Type of instrument: <input type="checkbox"/> Warranty <input type="checkbox"/> Quitclaim <input type="checkbox"/> Easement <input type="checkbox"/> Other
14. The grantor claims no tax is due because (See instructions.): <input type="checkbox"/> Conveyance was for no consideration or consideration was less than \$2,000. <input type="checkbox"/> Conveyance is exempt under Conn. Gen. Stat. §12-498. (See instructions.) Enter exemption code: <input type="text"/>		
If exemption code is 01 or 09, enter citation or docket number: <input type="text"/>		

**Computation of Tax** - Enter consideration for conveyance on the appropriate line.

15. Consideration for unimproved land: See Instructions.	<input type="text"/>	<b>x 0.0075</b>	<b>=</b>	<input type="text"/>
16. Total consideration for residential dwelling: See Instructions.	<input type="text"/>			<input type="text"/>
16a. Portion of Line 16 that is \$800,000 or less: See Instructions.	<input type="text"/>	<b>x 0.0075</b>	<b>=</b>	<input type="text"/>
16b. Portion of Line 16 that exceeds \$800,000: See Instructions.	<input type="text"/>	<b>x 0.0125</b>	<b>=</b>	<input type="text"/>
17. Residential property other than residential dwelling	<input type="text"/>	<b>x 0.0075</b>	<b>=</b>	<input type="text"/>
18. Nonresidential property other than unimproved land	<input type="text"/>	<b>x 0.0125</b>	<b>=</b>	<input type="text"/>
19. Property conveyed by a delinquent mortgagor: See Instructions.	<input type="text"/>	<b>x 0.0075</b>	<b>=</b>	<input type="text"/>
20. Total State of Connecticut tax due: Add Lines 15, 16a through 19.	<input type="text"/>			

**Declaration:** I declare under penalty of law that I have examined this return (including any accompanying schedules and statements) 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 to the Department of Revenue Services (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.

Indicate who is signing this return: <input type="checkbox"/> Grantor <input type="checkbox"/> Grantor's attorney <input type="checkbox"/> Grantor's authorized agent		
Name of person signing the return (type or print)	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of grantor's representative (type or print)	Connecticut juris number if applicable	Telephone number
<input type="text"/>	<input type="text"/>	<input type="text"/>



**OP-236 Schedule A - Grantors**  
**Supplemental Information for Connecticut**  
**Real Estate Conveyance Tax Return**  
 (Rev. 10/16)

Use OP-236 Schedule A to provide the required information if there are additional grantors/sellers. If the grantor is a partnership, S corporation, limited liability company (LLC), estate, or trust, enter the name, address, and taxpayer identification number of the partners, shareholders, members, or beneficiaries. If a partner, shareholder, member or beneficiary of the grantor is an LLC or a qualified subchapter S corporation (QSS), enter the name of such entity, its address and tax identification number. Do **not** combine grantors/sellers and grantee/buyers on the same schedule.

Town	Was the transaction completed on one deed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date conveyed /      / m m    d d    y y y y
Location of property conveyed		Date recorded /      / m m    d d    y y y y
Name of grantor as shown on the deed		

Last name, first name, middle initial	Taxpayer identification number <input type="checkbox"/> SSN <input type="checkbox"/> FEIN
Address after conveyance	City or town                      State              ZIP code
Last name, first name, middle initial	Taxpayer identification number <input type="checkbox"/> SSN <input type="checkbox"/> FEIN
Address after conveyance	City or town                      State              ZIP code
Last name, first name, middle initial	Taxpayer identification number <input type="checkbox"/> SSN <input type="checkbox"/> FEIN
Address after conveyance	City or town                      State              ZIP code
Last name, first name, middle initial	Taxpayer identification number <input type="checkbox"/> SSN <input type="checkbox"/> FEIN
Address after conveyance	City or town                      State              ZIP code
Last name, first name, middle initial	Taxpayer identification number <input type="checkbox"/> SSN <input type="checkbox"/> FEIN
Address after conveyance	City or town                      State              ZIP code
Last name, first name, middle initial	Taxpayer identification number <input type="checkbox"/> SSN <input type="checkbox"/> FEIN
Address after conveyance	City or town                      State              ZIP code

