

Form CT-EITC SEQ

Earned Income Tax Credit Self-Employed Questionnaire

2021

Complete in blue or black ink only.

If requested, mail completed Form CT-EITC SEQ and all documents to:

Form CT-EITC SEQ is only to be completed and submitted upon request by the DRS. Do not file Form CT-EITC SEQ with your tax return. Keep a copy of the completed form for your records.

Department of Revenue Services
 State of Connecticut
 PO Box 2980
 Hartford, CT 06104-2980

Enter all applicable information in Sections 1, 2, and 3 and attach copies of all required documents.

Section 1 - Taxpayer Information

Taxpayer Information	Your first name and middle initial	Last name	Your Social Security Number ____-____-____
	If joint return, spouse's first name and middle initial	Last name	Spouse's Social Security Number ____-____-____
	Name of business		Employer Identification Number ____-____
	Business mailing address (number and street, apartment number, suite number, PO Box)		Home telephone number ____-____
	City, town, or post office	State	ZIP code
	Business website (if any)		Business telephone number ____-____
		Cell telephone number ____-____	

Section 2 - Business Information: (Federal Schedule K-1s, Schedule C, etc.)

Provide a description of your business (type of work, products sold, services provided, and hours of operation): _____

1. Date business began: _____ / ____ / _____ Date business began in Connecticut: _____ / ____ / _____
2. Have you received any Forms 1099-MISC or 1099-NEC for income you earned in 2021?
 No **Yes** If **Yes**, attach a copy of each 1099-MISC or 1099-NEC.
3. If your occupation requires you to have a license, attach a copy of that license.
4. Indicate if you use any of the following methods to advertise your business. Attach copies of advertisements along with any paid receipts.
 Newspaper Internet/website Flyers Other _____
5. Under Connecticut Law, you must keep adequate business records. See **Informational Publication 2015(20), Connecticut Earned Income Tax Credit Recordkeeping Requirements for Self-employed Persons**. Indicate which of the following types of records you keep to verify your business income and expenses.
 Accounting records Computer records Insurance Business bank account(s) Ledgers
 Rental expenses Car/truck expenses Log books Suppliers (name and address)
 Paid invoices/receipts Other _____

Attach copies of these records covering at least two months of the tax year in question.

Section 3 - Declaration and Signature

Declaration: I declare under penalty of law that I have examined the information contained on this questionnaire 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 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.

Sign Here	Your signature	Date	
	Spouse's signature	Date	
Keep a copy for your records.	Paid preparer's signature	Date	Telephone ____-____
	Firm's name, address, and ZIP code		Preparer's PTIN
			FEIN