Form CT-EITC SEQ

(Rev. 12/23) Earned Income Tax Credit Self-Employed Questionnaire

Complete in blue or black ink only.

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.

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

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

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

Section	1 - Taxpayer Information			
	Your first name and middle initial	Last name		Your Social Security Number
	If injut vature, and use's first name and middle initial	Lost name		Spouse's Social Security Number
_	If joint return, spouse's first name and middle initial	Last name		Spouse's Social Security Number
Taxpaye Informati	lat ct :			Employer Identification Number
Please ty	Business mailing address (number and street, apartment number, suite number, PO Box)			Home telephone number
or print				— — —
	City, town, or post office	State	ZIP code	Business telephone number
	Dusiness websits (if any)			Call talanhana number
	Business website (if any)			Cell telephone number — — —
Section	2 - Business Information: (Federal Sched	dulo K 1a Sah	adula C. ata)	
	·		<u> </u>	
Provide a c	lescription of your business (type of work, products so	old, services provi	ded, and hours of ope	ration):
1. Date	business began: / / Date business began in Connecticut: / /			
	Have you received any Forms 1099-MISC or 1099-NEC for income you earned in 2023?			
			•	
•	our occupation requires you to have a license, attach a copy of that license.			
4. Indica	if you use any of the following methods to advertise your business. Attach copies of advertisements along with any paid			
	wspaper Internet/website Flyers Other			
 Under Connecticut Law, you must keep adequate business records. See Informational Publication 2015(20), Connectic Income Tax Credit Recordkeeping Requirements for Self-employed Persons. Indicate which of the following types of re 				Publication 2015(20) Connecticut Farned
	to verify your business income and expenses.	Π.		
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				
		overing at lea	est two months o	f the tax year in guestion
0 1:	Attach copies of these records co	overing at lea	ist two months o	i the tax year in question.
	3 - Declaration and Signature			
belief, it is (DRS) is a	n: I declare under penalty of law that I have examine true, complete, and correct. I understand the penalty fine of not more than \$5,000 or imprisonment for not n II information of which the preparer has any knowledg	for willfully delive more than five yea	ring a false return or de	ocument to the Department of Revenue Services
Your signature				Date
Sign	Sign			
	puse's signature			Date
Keep a copy	Paid preparer's signature	Date	Telephone — —	Preparer's PTIN
for your	m's name, address, and ZIP code			FEIN