

Form CT-EITC SEQ

Earned Income Tax Credit Self-Employed Questionnaire

2024

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

Taxpayer Information Please type or print.	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 telephone number
	Business website (if any)		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):

- Date business began: / / Date business began in Connecticut: / /
- Have you received any Forms 1099-MISC or 1099-NEC for income you earned in 2024?
☐ No ☐ Yes If **Yes**, attach a copy of each 1099-MISC or 1099-NEC.
- If your occupation requires you to have a license, attach a copy of that license.
- 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
- 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	Preparer's PTIN
	Firm's name, address, and ZIP code			FEIN