Department of Revenue Services State of Connecticut PO Box 2937 Hartford CT 06104-2937

Form REG-1 Business Taxes Registration Application

(Rev. 12/12) DRS use only Connecticut Tax Registration Number 1. Reason for Filing Form REG-1 Check the applicable box: Opening a new business including but not limited to: a. An existing out-of-state business opening a location in Connecticut; b. Selling at a craft show, flea market, fair, or other venue in Connecticut or selling over the Internet; or c. An existing out-of-state business having employees in Connecticut (including nonresident contractors and loan-out companies). Opening a new location. Enter your Connecticut Tax Registration No: _ Registering for additional taxes. Enter your Connecticut Tax Registration No: ☐ Reopening a closed business. Enter Connecticut Tax Registration No. of the closed business: Purchasing an ongoing business. The buyer of an existing business may be responsible for tax liabilities of the previous owner. See the Informational Publication on Successor Liability for Sales and Use Taxes, Admissions and Dues Tax, and Connecticut Income Tax Withholding, on the DRS website. Enter Connecticut Tax Registration No. of the previous owner: Forming a business entity under Connecticut law or a non-Connecticut entity required to register with or to obtain a certificate of authority from the Connecticut Secretary of the State before transacting business in Connecticut. ☐ Establishing a passive investment company (PIC). ☐ Changing organization type. Enter your current Connecticut Tax Registration No: Hiring household employees and intend to withhold Connecticut income tax. Other (explain); see Who Needs to Complete REG-1. 2. Business Information: Type of organization ☐ Sole proprietorship Corporation ☐ Single member LLC (SMLLC) ☐ Single member LLC taxed as a corporation ☐S Corporation ☐ General partnership ☐ Single member LLC taxed as an S corporation ☐ Qualified subchapter S subsidiary (QSSS) ☐ Limited liability partnership (LLP) Limited liability company (LLC) taxed as a partnership Limited liability company (LLC) taxed as a corporation ☐ Limited partnership (LP) Limited liability company (LLC) taxed as an S corporation ☐ Limited partnership taxed as a corporation ☐ Other (explain): 3. Nature of Business Activity Check the box(es) that best describe your business: ☐ Wholesaler ☐ Manufacturer ☐ Service provider Retailer Other (explain): 4. Major Business Activity Describe your major business activities: 5. Business Name and Address Organization name: Enter the name of the sole proprietor, partnership, corporation, or LLC. Federal Employer Identification Number, if applicable Business trade name CT Secretary of the State Business ID No., if applicable Business Location: Enter the physical address of the business. A post office box or rural route number is not acceptable. Home-based businesses and flea market or craft show vendors must enter a home address. Address line 1 Address line 2 City State ZIP code Mailing address line 1 (Street or PO Box) Address line 2 State ZIP code Business telephone number Email address Bank name

6. List All Owners, Partners, Corpo	orate Officers, or LLC Mem	nbers Attach a sepa	arate sheet if neede	d.	
Name (last, first, middle initial)			Title		
Home address line 1 (street)		Home address line	2		
City State ZIP code		ZIP code	Home telephone	e number	
SSN	Data of hirth	Bank name	()		
55N	Date of birth / /	Bank name			
Name (last, first, middle initial)			Title		
Home address line 1 (street)		Home address line	2		
City	State	ZIP code	Home telephone	e number	
			()		
SSN	Date of birth / /	Bank name			
Name (last, first, middle initial)			Title		
Home address line 1 (street)		Home address line	2		
City	State	ZIP code	Home telephone	e number	
SSN	Date of birth	Bank name	()		
	1 1				
Name (last, first, middle initial)			Title		
Home address line 1 (street)		Home address line	2		
City	State	ZIP code	Home telephone	e number	
SSN	Date of birth / /	Bank name	1		
7. Income Tax Withholding Are you an employer that transacto pay wages to resident employed. If you have a Connecticut tax regiand intend to file withholding for the here: Are you an out-of-state company income tax for your Connecticut reduction. Do you intend to withhold Connective ment distributions, or gamblic Do you pay nonresident athletes and you only have household employou only have agricultural employed on the have agricultural employed	es or nonresident employee estration number for withhold his new location under that range and skip to Section 8; voluntarily registering to with esident employees who wor esticut income tax from pension g distributions?	es who work in Con ling for another loca number, enter that resorted the otherwise continued nhold Connecticut k outside of Connecticut on plans, annuity plants, annuity plan	necticut? ation number e. cticut? lans, necticut? ne tax? ral Employees, ng, annually?	☐ Yes	NoNoNoNoNoNoNoNoNoNo
enter the date you will start withh	nolding Connecticut income	tax	·····	m m - d	- <u>d</u> - <u>y</u> <u>y</u>
If you use a payroll service, enter					

8. Sales and Use Taxes Do you sell, or will you be selling, goods in Connecticut (either wholesale or retail)?	☐ Yes	□ No				
Do you rent equipment or other tangible personal property to individuals or businesses in Connecticut?	☐ Yes	□ No				
Do you serve meals or beverages in Connecticut?		□ No				
Do you provide a taxable service in Connecticut? See the Informational Publication,	_ 100					
Getting Started in Business, and the Special Notice on Legislative Changes Affecting the Sales and Use Taxes, on the DRS website, for a list of taxable services	☐ Yes	□No				
If you answered Yes to any of the sales and use taxes questions,	□ 162	DINO				
enter the date you will start selling or leasing goods or taxable services.	m m - d	- d y y				
8a Prepaid Wireless Service E 9-1-1 Do you sell prepaid wireless service in Connecticut?	☐ Yes	□No				
If you answered Yes , enter the date you will start to sell these in Connecticut						
9. Room Occupancy Tax		<u> </u>				
Do you provide lodging rooms for rent in a hotel, motel, or rooming house in Connecticut for 30 consecutive days or less?	☐ Yes	□ No				
If you answered Yes , enter the date you will start to provide rooms for rent for lodging purposes in Connecticut.	<u></u>	- d - v v				
		u y y				
10. Business Entity Tax Do not complete this section if the entity is liable for the corporation business tax. The business entity tax applies to all of the following business types formed under Connecticut law and to those non-Connecticut entities required to register with or obtain a certificate of authority from the Connecticut Secretary of the State before transacting business in the state, whether or not the business has registered or filed a certificate of authority, as the case may be, with the Connecticut Secretary of the State.						
 S corporations (Qualified subchapter S subsidiaries (QSSS) are not liable for the business entity tax.); Limited liability companies (LLCs or SMLLCs) — any limited liability company that is, for federal income to Treated as a partnership if it has two or more members; or Disregarded as an entity separate from its owner if it has a single member; Limited liability partnerships (LLPs); and Limited partnership (LPs). 	ax purposes	s, either:				
Are you a business entity as described above? Enter state you are organized under: Enter date of organization		- <u>- v</u>				
If not organized in Connecticut, enter the earlier of the date you started business in Connecticut or the date you registered with the Connecticut Secretary of the State						
Enter the month your tax year closes:	m m d	d y y				
11. Corporation and Unrelated Business Income Taxes						
Corporation Business Tax Do not complete this section if the entity is liable for the business er	ıtitv tax.					
Are you a corporation?	•	□ No				
Are you an LLC, SMLLC, or other association taxed as a corporation?	☐ Yes	☐ No				
Is this corporation exempt from federal income tax?		☐ No				
Have you received a determination from the Internal Revenue Services (IRS) that this corporation is exempt from federal income tax?		□ No				
If Yes , enclose a copy of your IRS letter of determination.						
Enter state you are organized under: Enter date of organization	<u></u>	- -				
If not a Connecticut corporation, enter the earlier of the date you started business in Connecticut or the date you registered with the Connecticut Secretary of the State.						
Enter the month the corporate year closes:	III U	u y y				
Unrelated Business Income Tax Are you a federally exempt organization that has unrelated business income attributable to a trade or business in Connecticut?	☐ Yes	□ No				
If you answered Yes , enter the date the unrelated business income tax liability started	<u></u>					
Passive Investment Company (PIC) Is this corporation a passive investment company as defined in Conn. Gen. Stat.§12-213(a)(27)?	☐ Yes	□ No				
Enter the date the PIC was organized.	<u></u>	- - - - - - - - - - -				
Enter Connecticut tax registration number of the PIC's related financial service or insurance company: _		~ y y				

12.	Busine	ess Use Tax							
	-	If you are registered for or are registering for sales and use taxes, you do not need to complete this section.							
	includii	ss use tax is due when a business purchases taxable gong the purchase or lease of assets, consumable goods, and proin Connecticut without paying Connecticut sales tax.							
		u be purchasing taxable goods or services for use in Connec							
	paying	Connecticut sales tax?			. [J Yes			
	If you a	If you answered Yes to the business use tax question, enter the tax liability start date							
	If you a	answered No , you must complete the <i>Business Use Tax Dec</i>	laration section be	low.					
	Business Use Tax Declaration: By registering for any of the taxes listed in this application, you have indicated to the Department of Revenue Services (DRS) that you may have a business use tax liability. Therefore, based on your application, you will be automatically registered for the business use tax unless you complete the following declaration.								
	I,(name of taxpayer or authorized representative of taxpayer), acknowledge I have read and understand the information concerning the business use tax and declare I will not be liable for business use tax. Please initial here								
13.	Regist	ration Fee Schedule							
Enter the registration fee amount indicated. If you are liable for either sales and use taxes or room occupancy tax, or both, as indicated in Sections 8 or 9, you must pay a \$100 registration fee. Enter the appropriate registration fee(s) from Addendum A if you are registering for the cigarette tax. You must include the total registration fee due with Form REG-1 or your registration application will not be processed and will be returned. Make your check payable to: Commissioner of Revenue Services. If you register by mail, send Form REG-1 with your payment to: Department of Revenue Services, PO Box 2937, Hartford CT 06104-2937									
						Registration Fee			
а	. If regi	stering for sales and use taxes or room occupancy tax, e	nter \$100.*		a.				
b	b. If registering for cigarette tax , see Addendum A.				b.				
С	c. Total registration fee due: Add Line a and Line b.				C.				
* No fee is required for room occupancy tax if you are registered or are registering for sales and use taxes.									
14.	All Ap	olicants Must Sign the Following Declaration							
I declare under penalty of law that I have examined this application and, to the best of my knowledge and belief, it is true, complete, and correct. I understand the penalty for willfully delivering a false application to DRS is a fine of not more than \$5,000, or imprisonment for not more than five years, or both.									
and	gn here d keep a	Signature of owner, partner, LLC member, or corporate officer	Date	Telephone (numb	oer			
records.		Print name of owner, partner, LLC member, or corporate officer	Title						