

Department of Taxation and Finance

IT-647-ATT

Eligible Farm Employee Information for the Farm Workforce Retention Credit

Attachment to Form IT-647

Submit this form with Form IT-647 if you have more employees to report in Schedule A of that form. See Form IT-647-I, *Instructions for Forms IT-647 and IT-647-ATT*, Schedule A, for assistance.

Name(s) as shown on return			Identifying num	Identifying number as shown on return	
Business name			Employer ident	Employer identification number (EIN)	
A Total number of employees listed	on this page (include this total o	n Form IT-647, line 2) .			
АВВ				C D	
Name of eligible farm employee		Employee work location	Social Security number of eligible farm employee	Hours worked for the tax year	
First name	Last name	ZIP code (first 5 digits only)			