Form **940 for 2020:** Employer's Annual Federal Unemployment (FUTA) Tax Return Department of the Treasury — Internal Revenue Service

850113

OMB No. 1545-0028

| | Department of the freasury — Internal nevertice Service | OMB No. 1040 0020 | | | | | | | |
|---------------|--|--|--|--|--|--|--|--|--|
| Empl (EIN) | loyer identification number | Type of Return (Check all that apply.) | | | | | | | |
| Name | e (not your trade name) | a. Amended | | | | | | | |
| Trade | e name (if any) | b. Successor employer | | | | | | | |
| Addr | ess | c. No payments to employees in 2020 | | | | | | | |
| | Number Street Suite or room num | Stopped paying wages | | | | | | | |
| | | Go to www.irs.gov/Form940 for instructions and the latest information. | | | | | | | |
| | City State ZIP code | | | | | | | | |
| | Foreign country name Foreign province/county Foreign postal code | е | | | | | | | |
| Read t | the separate instructions before you complete this form. Please type or print within the | boxes. | | | | | | | |
| Part | | | | | | | | | |
| 1a | If you had to pay state unemployment tax in one state only, enter the state a | abbreviation . 1a | | | | | | | |
| 1b | If you had to pay state unemployment tax in more than one state, you a | Officer field. | | | | | | | |
| 2 | employer | 1b Complete Schedule A (Form 940) 2 Check here. | | | | | | | |
| | | Complete Schedule A (Form 940). | | | | | | | |
| Part | 2: Determine your FUTA tax before adjustments. If any line does NOT | apply, leave it blank. | | | | | | | |
| 3 | Total payments to all employees | 3 | | | | | | | |
| 4 | Payments exempt from FUTA tax | • | | | | | | | |
| | Check all that apply: 4a Fringe benefits 4c Retirement/ 4b Group-term life insurance 4d Dependent of | | | | | | | | |
| 5 | Total of payments made to each employee in excess of \$7,000 | | | | | | | | |
| 6 | Subtotal (line 4 + line 5 = line 6) | 6 | | | | | | | |
| 7 | Total taxable FUTA wages (line 3 – line 6 = line 7). See instructions | | | | | | | | |
| 8 | FUTA tax before adjustments (line 7 x 0.006 = line 8) | 8 | | | | | | | |
| Part | | | | | | | | | |
| 9 | If ALL of the taxable FUTA wages you paid were excluded from state une multiply line 7 by 0.054 (line $7 \times 0.054 = line 9$). Go to line 12 | • • | | | | | | | |
| 10 | If SOME of the taxable FUTA wages you paid were excluded from state une OR you paid ANY state unemployment tax late (after the due date for for complete the worksheet in the instructions. Enter the amount from line 7 of the vision of the vi | iling Form 940), | | | | | | | |
| 11 | If credit reduction applies, enter the total from Schedule A (Form 940) | 11 | | | | | | | |
| Part 4 | 4: Determine your FUTA tax and balance due or overpayment. If any li | ne does NOT apply, leave it blank. | | | | | | | |
| 12 | Total FUTA tax after adjustments (lines 8 + 9 + 10 + 11 = line 12) | 12 | | | | | | | |
| 13 | FUTA tax deposited for the year, including any overpayment applied from a | prior year . 13 | | | | | | | |
| 14 | Balance due. If line 12 is more than line 13, enter the excess on line 14. If line 14 is more than \$500, you must deposit your tax. | | | | | | | | |
| | • If line 14 is \$500 or less, you may pay with this return. See instructions | 14 | | | | | | | |
| 15 | Overpayment. If line 13 is more than line 12, enter the excess on line 15 and che | eck a box below 15 | | | | | | | |
| | ➤ You MUST complete both pages of this form and SIGN it. Check | one: Apply to next return. Send a refund. | | | | | | | |

| Nam | e (not | your trade name) | | | | | Employer ide | ntificati | on number (EIN | 1) |
|------|--|--|---|-------------------------------|---------|--------------|-----------------|-----------|----------------|-----------------|
| Part | 5: | Report your Fl | UTA tax liability by quarte | r only if line 12 is | s more | than \$500. | If not, go to | Part (| 6. | |
| | • | ort the amount of arter, leave the li | f your FUTA tax liability for ine blank. | [,] each quarter; do | NOT e | nter the an | nount you de | posite | d. If you had | no liability fo |
| | 16a | 1st quarter (Janu | uary 1 – March 31) | | 16a | | | | | |
| | 16b | 2nd quarter (Apr | ril 1 – June 30) | | 16b | | | | | |
| | 16c | 3rd quarter (July | / 1 – September 30) | | 16c | | | | | |
| | 16d | 4th quarter (Octo | ober 1 – December 31) . | | 16d | | | | | |
| 17 | Tota | l tax liability for t | the year (lines 16a + 16b + 1 | 6c + 16d = line 17 |) 17 | | | | Total must | equal line 12. |
| Part | 6: | May we speak | with your third-party des | ignee? | | | | | | |
| | _ | ou want to allow letails. | an employee, a paid tax pr | eparer, or anothe | r perso | n to discus | s this return v | vith th | e IRS? See th | ne instructions |
| | Y | es. Designee | e's name and phone number | | | | | | | |
| | | Select a 5 | 5-digit personal identification | n number (PIN) to ເ | use whe | n talking to | the IRS. | | | |
| | | No. | | | | | | | | |
| Part | 7: | Sign here. You | MUST complete both page | ges of this form | and SI | GN it. | | | | |
| | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that no part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments made to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign your name here Print your | | | | | | | oloyment | | |
| | | | | | title | | | | | |
| | | Date / | / | | Best | daytime ph | one | | | |
| | Paic | d Preparer Use | e Only | | | | Ch | eck if | you are self-e | mployed |
| | Prep | arer's name | | | | | PTIN | | | |
| | Prepa signa | arer's ature | | | | | Date | | ′ / | |
| | | 's name (or yours f-employed) | | | | | EIN | | | |
| | Addr | ress | | | | | Phone | | | |
| | City | | | State | | | ZIP code | | | |

Page **2** Form **940** (2020)

Form 940-V, Payment Voucher

Purpose of Form

Complete Form 940-V if you're making a payment with Form 940. We will use the completed voucher to credit your payment more promptly and accurately, and to improve our service to you.

Making Payments With Form 940

To avoid a penalty, make your payment with your 2020 Form 940 **only if** your FUTA tax for the fourth quarter (plus any undeposited amounts from earlier quarters) is \$500 or less. If your total FUTA tax after adjustments (Form 940, line 12) is more than \$500, you must make deposits by electronic funds transfer. See *When Must You Deposit Your FUTA Tax?* in the Instructions for Form 940. Also see sections 11 and 14 of Pub. 15 for more information about deposits.



Use Form 940-V when making any payment with Form 940. However, if you pay an amount with Form 940 that should've been deposited, you may be subject to a penalty. See Deposit

Penalties in section 11 of Pub. 15.

Specific Instructions

Box 1—Employer identification number (EIN). If you don't have an EIN, you may apply for one online by visiting the IRS website at www.irs.gov/EIN. You may also apply for an EIN by faxing or mailing Form SS-4 to the IRS. If you haven't received your EIN by the due date of Form 940, write "Applied For" and the date you applied in this entry space.

Box 2—Amount paid. Enter the amount paid with Form 940.

Box 3—Name and address. Enter your name and address as shown on Form 940.

- Enclose your check or money order made payable to "United States Treasury." Be sure to enter your EIN, "Form 940," and "2020" on your check or money order. Don't send cash. Don't staple Form 940-V or your payment to Form 940 (or to each other).
- Detach Form 940-V and send it with your payment and Form 940 to the address provided in the Instructions for Form 940.

Note: You must also complete the entity information above Part 1 on Form 940.



Detach Here and Mail With Your Payment and Form 940. ▼



| [∞] 940-V | | | Payment Voucher | OMB No. 1545-0028 | | |
|--|--|---|---|-------------------------|------------------|-------------|
| Department of the Treasury Internal Revenue Service | ► Don't staple or attach this voucher to your payment. | | | 2020 | | |
| Enter your employer identification number (EIN). | | 2 | 2 Enter the amount of your payment. ► Make your check or money order payable to "United States Treasury" | | | Cents |
| | | 3 | Enter your business name (individual name if sole proprietor). Enter your address. Enter your city, state, and ZIP code; or your city, foreign country name, to | foreign province/county | /, and foreign p | ostal code. |

Privacy Act and Paperwork Reduction Act Notice.

We ask for the information on this form to carry out the Internal Revenue laws of the United States. We need it to figure and collect the right amount of tax. Chapter 23, Federal Unemployment Tax Act, of Subtitle C, Employment Taxes, of the Internal Revenue Code imposes a tax on employers with respect to employees. This form is used to determine the amount of the tax that you owe. Section 6011 requires you to provide the requested information if you are liable for FUTA tax under section 3301. Section 6109 requires you to provide your identification number. If you fail to provide this information in a timely manner or provide a false or fraudulent form, you may be subject to penalties.

You're not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books and records relating to a form or instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law.

Generally, tax returns and return information are confidential, as required by section 6103. However, section 6103 allows or requires the IRS to disclose or give the information shown on your tax return to others as described in the Code. For example, we may disclose

your tax information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and possessions to administer their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is:

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 940 simpler, we would be happy to hear from you. You can send us comments from www.irs.gov/FormComments. Or you can send your comments to Internal Revenue Service, Tax Forms and Publications Division, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Don't send Form 940 to this address. Instead, see Where Do You File? in the Instructions for Form 940.