

**Employer's Annual Federal
Unemployment (FUTA) Tax Return**

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions for Form 940-EZ for information on completing this form.

2003

You must complete this

Name (as distinguished from trade name)
J & C Corporation

Calendar year
2003

Trade name if any
234 Peachtree St
Atlanta, GA 30068

Employer identification number
21-3456789

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Answer the questions under Who May Use Form 940-EZ on page 2. If you cannot use Form 940-EZ, you must use Form 940.

- A** Enter the amount of contributions paid to your state unemployment fund. (see separate instructions) ▶ \$ 0% Rate
- B** (1) Enter the name of the state where you have to pay contributions ▶ GA
- (2) Enter your state reporting number as shown on your state unemployment tax return ▶ 28-HJ765773

If you will not have to file returns in the future, check here (see Who Must File in separate instructions), and complete and sign the return ▶

If this is an Amended Return, check here ▶

Part I Taxable Wages and FUTA Tax

1 Total payments (including payments shown on lines 2 and 3) during the calendar year for services of employees	1	53138	62
2 Exempt payments. (Explain all exempt payments, attaching additional sheets if necessary.) Section 125 Exemptions	2	666	00
3 Payments of more than \$7000 for services. Enter only amounts over the first \$7000 paid to each employee. (see separate instructions)	3	2710	00
4 Add lines 2 and 3	4	3376	00
5 Total taxable wages (subtract line 4 from line 1)	5	49762	62
6 FUTA Tax. Multiply the wages on line 5 by 0.008 and enter here. (If the result is over \$100, also complete Part II.)	6	398	10
7 Total FUTA tax deposited for the year, including any overpayment applied from a prior year	7	398	09
8 Balance due (subtract line 7 from line 6). Pay to the "United States Treasury." If you owe more than \$100, see Depositing FUTA Tax in separate instructions.	8	0	01
9 Overpayment (subtract line 6 from line 7). Check if it is to be: <input checked="" type="checkbox"/> Applied to next return or <input type="checkbox"/> Refunded	9		

Part II Record of Quarterly Federal Unemployment Tax Liability (Do not include state liability.) Complete only if line 6 is over \$100.

Quarter	First (Jan. 1 - Mar. 31)	Second (Apr. 1 - June 30)	Third (July 1 - Sept 30)	Fourth (Oct. 1 - Dec. 31)	Total for year
Liability for quarter	340.31		57.78		398.09

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions page Yes. Complete the following. No

Designee's name ▶ _____ Phone no. ▶ () _____ Personal Identification number (PIN) ▶

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 to employees.

Signature ▶ SAMPLE Title (Owner, etc.) ▶ _____ Date ▶ 09/22/03

For Privacy Act and Paperwork Reduction Act Notice, see separate **DETACH HERE** Cat. No. 10983G Form **940-EZ** (2003)

Form 940-EZ Payment Voucher

Department of the Treasury
Internal Revenue Service

Use this voucher only when making a payment with your return.

2003

Complete boxes 1, 2, and 3. Do not send cash, and do not staple your payment to this voucher. Make your check or money order payable to the "United States Treasury." Be sure to enter your employer identification number. "Form 940-EZ." and "2003" on your payment.

1 Enter your employer identification number. <u>21-3456789</u>	2 Enter the amount of your payment. ▶ Dollars <u>0</u> Cents <u>01</u>
	3 Enter your business name (individual name for sole proprietors). <u>J & C Corporation</u> Enter your address. <u>234 Peachtree St</u> Enter your city, state, and ZIP code. <u>Atlanta, GA 30068</u>