

Complete with Fiscal/Employer Agent's name and separate EIN.

Name (not your trade name)		Employer identification number (EIN) 850212	
Part 6: Report your FUTA tax liability by quarter only if line 12 is more than \$500. If not, go to Part 6.			
16 Report the amount of your FUTA tax liability for each quarter; do NOT enter the amount you deposited. If you had no liability for a quarter, leave the line blank.			
16a	1st quarter (January 1 – March 31)	16a	<input type="text"/>
16b	2nd quarter (April 1 – June 30)	16b	<input type="text"/>
16c	3rd quarter (July 1 – September 30)	16c	<input type="text"/>
16d	4th quarter (October 1 – December 31)	16d	<input type="text"/>
17	Total tax liability for the year (lines 16a + 16b + 16c + 16d = line 17)		17 <input type="text"/> Total must equal line 12.
Part 6: May we speak with your third-party designee?			
Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.			
<input type="checkbox"/>	Yes. Designee's name and phone number	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	No.	Select a 5-digit Personal Identification Number (PIN) to use when talking to IRS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Part 7: Sign here. You MUST complete both pages of this form and SIGN 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.			
<input checked="" type="checkbox"/>	Sign your name here	<input type="text"/>	Print your name here <input type="text"/>
		<input type="text"/>	Print your title here <input type="text"/>
	Date <input type="text"/>		Best daytime phone <input type="text"/>
Paid Preparer Use Only			
		Check if you are self-employed <input type="checkbox"/>	
Preparer's name	<input type="text"/>	PTIN	<input type="text"/>
Preparer's signature	<input type="text"/>	Date	<input type="text"/>
Firm's name (or yours if self-employed)	<input type="text"/>	EIN	<input type="text"/>
Address	<input type="text"/>	Phone	<input type="text"/>
City	<input type="text"/>	State	<input type="text"/>
		ZIP code	<input type="text"/>

Enter the Agent's aggregate liability for each quarter. For participants that become liable in a quarter after the first quarter, the participant's annual wages in the quarter the participant becomes liable are liable for FUTA.

If the Agent has a third party designee that the Agent permits to discuss this return on the Agent's behalf, enter the Third Party Designee's information in Part 6.

The preparer of the return must sign in Part 7.

Example of Page 2 of IRS Form 940
Used for Fiscal/Employer Agent
To File Employers' Annual FUTA Tax in Aggregate