

Part II Federal Unemployment (FUTA) Tax

| | Yes | No |
|--|-----------|----|
| 10 Did you pay unemployment contributions to only one state? If you paid contributions to a credit reduction state, see instructions and check "No." | 10 | |
| 11 Did you pay all state unemployment contributions for 2019 by April 15, 2020? Fiscal year filers, see instructions | 11 | |
| 12 Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax? | 12 | |

Next: If you checked the **"Yes"** box on **all** the lines above, complete Section A.
 If you checked the **"No"** box on **any** of the lines above, skip Section A and complete Section B.

Section A

| | |
|---|-----------------|
| 13 Name of the state where you paid unemployment contributions ▶ _____ | |
| 14 Contributions paid to your state unemployment fund | 14 _____ |
| 15 Total cash wages subject to FUTA tax | 15 _____ |
| 16 FUTA tax. Multiply line 15 by 0.6% (0.006). Enter the result here, skip Section B, and go to line 25 | 16 _____ |

Section B

17 Complete all columns below that apply (if you need more space, see instructions):

| (a) Name of state | (b) Taxable wages (as defined in state act) | (c) State experience rate period | | (d) State experience rate | (e) Multiply col. (b) by 0.054 | (f) Multiply col. (b) by col. (d) | (g) Subtract col. (f) from col. (e). If zero or less, enter -0-. | (h) Contributions paid to state unemployment fund |
|----------------------|--|-------------------------------------|----|------------------------------|-----------------------------------|--------------------------------------|---|--|
| | | From | To | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| | |
|---|-----------------|
| 18 Totals | 18 _____ |
| 19 Add columns (g) and (h) of line 18 | 19 _____ |
| 20 Total cash wages subject to FUTA tax (see the line 15 instructions) | 20 _____ |
| 21 Multiply line 20 by 6.0% (0.060) | 21 _____ |
| 22 Multiply line 20 by 5.4% (0.054) | 22 _____ |
| 23 Enter the smaller of line 19 or line 22 (If you paid state unemployment contributions late or you're in a credit reduction state, see instructions and check here) <input type="checkbox"/> | 23 _____ |
| 24 FUTA tax. Subtract line 23 from line 21. Enter the result here and go to line 25 | 24 _____ |

Part III Total Household Employment Taxes

| | |
|---|-----------------|
| 25 Enter the amount from line 8. If you checked the "Yes" box on line C of page 1, enter -0- | 25 _____ |
| 26 Add line 16 (or line 24) and line 25 | 26 _____ |
| 27 Are you required to file Form 1040 or 1040-SR? <input type="checkbox"/> Yes. Stop. Include the amount from line 26 above on Schedule 2 (Form 1040 or 1040-SR), line 7a. Don't complete Part IV below. <input type="checkbox"/> No. You may have to complete Part IV. See instructions for details. | |

Part IV Address and Signature - Complete this part only if required. See the line 27 instructions.

Address (number and street) or P.O. box if mail isn't delivered to street address _____ Apt., room, or suite no. _____

City, town or post office, state, and ZIP code _____

Under penalties of perjury, I declare that I have examined this schedule, including accompanying statements, and to the best of my knowledge and belief, it is true, correct, and complete. 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. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Employer's signature _____ Date _____

| | | | | | |
|-------------------------------|----------------------------|----------------------|------|---|------|
| Paid Preparer Use Only | Print/Type preparer's name | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN |
| | Firm's name ▶ | Firm's EIN ▶ | | | |
| | Firm's address ▶ | Phone no. | | | |
| | | | | | |