

ANNUAL EMPLOYER PAYROLL TAX RETURN

Form TX-940

Employer Name: _____
Trade Name (DBA): _____
Address: _____
City, State, Zip: _____
Employer ID Number (EIN): _____
Tax Year Ending: _____
Report Due Date: _____

Part 1: Taxable Wages and Calculations		Amount
1	Total compensation paid to employees during the calendar year	
2	Exempt payments (withholdings, health benefits, retirement plans)	
3	Total taxable wages (Subtract Line 2 from Line 1)	
4	Taxable wages in excess of maximum cap per employee	
5	Net taxable payroll subject to assessment (Subtract Line 4 from Line 3)	

Part 2: Tax Liability & Balance Due		Amount
6	Gross Payroll Tax Liability (Multiply Line 5 by approved tax rate)	
7	Total tax deposits made during the calendar year	
8	Balance Due (If Line 6 is greater than Line 7, subtract Line 7 from Line 6)	
9	Overpayment (If Line 7 is greater than Line 6, subtract Line 6 from Line 7)	

Part 3: Signatures and Declaration _____
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.
Employer Signature: _____
Title: _____
Date: _____
Phone: _____

