Tax Year 2024 940 MeF ATS Scenario 3 Crocus Company Inc 00-3000002

The information below identifies the contents of this scenario.

- •Form 940
- •Form 940 Schedule R

This return is for a corporation, and uses the most current copies of Form 940 and Form 940 Schedule R available at this time. The return should use the Reporting Agent signature method and results in a balance due.

850113 Form **940 for 2024:** Employer's Annual Federal Unemployment (FUTA) Tax Return Department of the Treasury - Internal Revenue Service OMB No. 1545-0029 **Employer identification number** 0 0 3 0 0 2 Type of Return (EIN) (Check all that apply.) Crocus Company Inc Name (not your trade name) a. Amended **b.** Successor employer Trade name (if any) c. No payments to employees in 2024 4th Flower Street Address d. Final: Business closed or Suite or room number stopped paying wages Go to www.irs.gov/Form940 for Houston TX77002 instructions and the latest information. City Foreign country name Foreign province/county Foreign postal code Read the separate instructions before you complete this form. Please type or print within the boxes. Tell us about your return. If any line does NOT apply, leave it blank. See instructions before completing Part 1. If you had to pay state unemployment tax in one state only, enter the state abbreviation. If you had to pay state unemployment tax in more than one state, you are a multi-state 1h Check here 1b Complete Schedule A (Form 940) Check here. If you paid wages in a state that is subject to CREDIT REDUCTION. 2 Complete Schedule A (Form 940). Part 2: Determine your FUTA tax before adjustments. If any line does NOT apply, leave it blank 560,000 00 3 Total payments to all employees 3 0 00 4 Payments exempt from FUTA tax 4 Retirement/Pension Other Check all that apply: 4a Fringe benefits 4e Dependent care **4b** Group-term life insurance 4d 5 Total of payments made to each employee in excess of 0 00 00 **Subtotal** (line 4 + line 5 = line 6). 6 560,000 00 Total taxable FUTA wages (line 3 – line 6 = line 7). See instructions. 3,360 00 **FUTA** tax before adjustments (line $7 \times 0.006 = line 8$) . . 8 Determine your adjustments. If any line does NOT apply, leave it blank. If ALL of the taxable FUTA wages you paid were excluded from state unemployment tax, multiply line 7 by 0.054 (line $7 \times 0.054 = \text{line 9}$). Go to line 12 9 10 If SOME of the taxable FUTA wages you paid were excluded from state unemployment tax, OR you paid ANY state unemployment tax late (after the due date for filing Form 940), complete the worksheet in the instructions. Enter the amount from line 7 of the worksheet . 10 11 **If credit reduction applies**, enter the total from Schedule A (Form 940) 11 Part 4: Determine your FUTA tax and balance due or overpayment. If any line does NOT apply, leave it blank. 3,360 00 Total FUTA tax after adjustments (lines 8 + 9 + 10 + 11 = line 12) 12 12 1,428 00 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. 00 1,932 If line 14 is \$500 or less, you may pay with this return. See instructions 00 Overpayment. If line 13 is more than line 12, enter the excess on line 15 and check a box below 15 15

J Send a refund.

You MUST complete both pages of this form and SIGN it.

Apply to next return.

Check one:

Nan	ne (not	your trade name)					1 -		on number (EIN)		
Crocus Company Inc								00 - 3000002				
Par	t 5:	Report your FU	JTA tax liability by quarter on	ly if line	12 is more	than \$500.	If not, go to	Part 6	ò.			
16	Report the amount of your FUTA tax liability for each quarter; do NOT enter the amount you deposited. If you had no lia a quarter, leave the line blank.									no liability fo		
	16a	1st quarter (Janu	uary 1 – March 31)		. 16a		800	00				
	16b	2nd quarter (Apr	il 1 – June 30)		. 16b		800	00				
	16c	3rd quarter (July	1 – September 30)		. 16c		800	00				
	16d	4th quarter (Octo	ober 1 – December 31)		. 16d		960	00				
17		ıl tax liability for t	he year (lines 16a + 16b + 16c +	16d = lin	e 17) 17		3,360	00	Total must	equal line 12.		
Par	t 6:	May we speak	with your third-party designe	e?								
	-	ou want to allow letails.	an employee, a paid tax prepar	er, or an	other perso	n to discuss	s this return w	ith the	e IRS? See th	e instructions		
		Yes. Designee	's name and phone number	45						<u> </u>		
		Select a 5	5-digit personal identification nur	nber (PIN) to use whe	en talking to	the IRS.					
	r	No.										
Par	t 7:	Sign here. You	MUST complete both pages	of this fo	rm and SI	GN it.						
	best fund	of my knowledge claimed as a cred	ury, I declare that I have examine and belief, it is true, correct, and it was, or is to be, deducted fron all information of which preparer	complete	e, and that r ments made nowledge.	o part of any	y payment mad	de to a	state unemp	loyment		
		n your ne here			nan Prin	ne here t your						
					- title	here						
		Date /			Bes	t daytime ph	one					
	Pai	d Preparer Use	Only				Ch	eck if y	ou are self-e	mployed		
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	Prep	parer's name			PTIN		P222222	22				
		eparer's nature m's name (or yours elf-employed) Bloom CPA Firm						/	/			
									33-33333	34		
	Addı	dress 11th Test Street					Phone		281-555-1	111		
	City		Houston	State		TX	ZIP code		77002			

Page **2** Form **940** (2024)

Schedule R (Form 940): Allocation Schedule for Aggregate Form 940 Filers

OMB No. 1545-0029

(Rev. December 2024)

Department of the Treasury — Internal Revenue Service

Employer identification number (EIN) 0 0 - 3 0 0 0 0 2						
Name as shown on Form 940	Crocus Company Inc					
Type of filer (check one):	Section 3504 Agent Certified Professional Employer Organization (CPEO)					

Report for calendar year:						
(Same as Form 940):						
2024						
2024						

Read the instructions before you complete Schedule R. Type or print within the boxes. Complete a separate line for the amounts allocated to each of your clients. The term "client" as used on this form includes the term "customer." See the instructions.

	(a) Client's employer identification number (EIN)		o) ate viation Form ne 1a, edule A n 940)	(CPEO use only)	(d) Total taxable FUTA wages allocated to the listed client EIN from Form 940, line 7	(e) Total adjustments to FUTA tax allocated to the listed client EIN from Form 940, line 9 or line 10	(f) Credit reduction amount allocated to the listed client EIN from Form 940, line 11	(g) Total FUTA tax after adjustments allocated to the listed client EIN from Form 940, line 12	(h) Total FUTA tax deposits from Form 940, line 13, plus any payment made with the return allocated to the listed client EIN
1	00-3000001	Т	Х		140000 • 00			840 • 00	357 . 00
2	00-3000003	Т	Х		140000 • 00			840 . 00	357 . 00
3	00-3000004	Т	Χ		140000 • 00			840 - 00	357 • 00
4									
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11									
12							•	<u> </u>	
13									
14						•			
15									
	Subtotals for clients. Add all amounts on lines 1 through 15.				420000 00			2520 00	1071 00
	Enter the combined subtotal from line 23 of all Continuation Sheets for Schedule R (Form 940).								
	Enter Form 940 amounts for your employees.				140000 00			840 . 00	357 00
	Totals. Add lines 16, 17, and 18. The column totals must match the related lines on the aggregate Form 940.				560000 00			3360 00	1428 00

For Paperwork Reduction Act Notice, see the instructions.

www.irs.gov/Form940

Cat. No. 53082A

Schedule R (Form 940) (Rev. 12-2024)