Employer's Annual Information Return of Tip Income and Allocated Tips

Department of the Treasury Internal Revenue Service

See the separate instructions. Go to www.irs.gov/Form8027 for instructions and the latest information.

OMB No. 1545-0029

		Name of establishment			Employer identification number			
Check	k if : ded Return □	Number and street (don't enter a 1 .O. box). See instructions.			Type of establishment (check only one box)			
Final Return		City or town, state, and ZIP code			1 Evening meals only 2 Evening and other meals 3 Meals other than evening meals 4 Alcoholic beverages			
								Employer's name (see instructions)
Number and street (or P.O. box number, if mail isn't delivered to street address) Apt. or suite no				<u>'</u>				
City, sta	ate, and ZIP code (if	a foreign address, see instructions)						
Does t	this establishme	ent accept credit cards, debit cards, or other charges? Yes (lines 1	and 2 must b	e cor	npleted)	□ No	<u> </u>	
1	Total charged	tips for calendar year 2024		1				
2	Total charge re	eceipts showing charged tips (see instructions)		2				
3	Total amount of service charges of less than 10% paid as wages to employees			3				
4a	a Total tips reported by indirectly tipped employees			4a				
b	Note: Complete the Employer's Optional Worksheet for Tipped Employees in the instructions to determine potential unreported tips of your employees.			4b			+	
С				4c				
5 6	Multiply line 5 If you use a low Note: If you h	s from food and beverages (not less than line 2—see instructions). by 8% (0.08) or the lower rate shown here granted be wer rate, attach a copy of the IRS determination letter to this return. have allocated tips using a period other than the calendar year (senterly, etc.), mark an "X" on line 6 and enter the amount of allocated on line 7.	nimonthly,	6				
7	This amount establishment.	ps. If line 6 is more than line 4c, enter the excess here must be allocated as tips to directly tipped employees workin. Check the box below that shows the method used for the allocation. allocated to each employee in box 8 of the employee's Form W-2.	ng in this	7				
а	Allocation bas	ed on hours-worked method (see instructions for restriction) marked the checkbox on line 7a, enter the average number of empl per business day during the payroll period. (see instructions)						
b	Allocation bas	ed on gross receipts method						
С	Allocation bas	ed on good-faith agreement	🗆					
8 Under n		number of directly tipped employees at this establishment during 2024 declare that I have examined this return, including accompanying documents, and to the b		dae an	d helief it	is true cor	rect and	
complet		according that there examined this return, including accompanying documents, and to the t	out of my knowle	aye all	a bellet, Il	is iiu c , cor	rout, and	
Signature		Title	Da	Date				