

**SCHEDULE H
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Household Employment Taxes

(For Social Security, Medicare, Withheld Income, and Federal Unemployment (FUTA) Taxes)

▶ **Attach to Form 1040, 1040NR, 1040NR-EZ, 1040-SS, or 1041.**

▶ **See separate instructions.**

OMB No. 1545-0074

1999

Attachment
Sequence No. **44**

Name of employer	Social security number : : :
	Employer identification number : : : : : : : : : :

A Did you pay **any one** household employee cash wages of \$1,100 or more in 1999? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions on page 3 before you answer this question.)

- Yes.** Skip lines B and C and go to line 1.
- No.** Go to line B.

B Did you withhold Federal income tax during 1999 for any household employee?

- Yes.** Skip line C and go to line 5.
- No.** Go to line C.

C Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 1998 or 1999 to household employees? (**Do not** count cash wages paid in 1998 or 1999 to your spouse, your child under age 21, or your parent.)

- No. Stop.** Do not file this schedule.
- Yes.** Skip lines 1-9 and go to line 10 on the back.

Part I Social Security, Medicare, and Income Taxes

1	Total cash wages subject to social security taxes (see page 3)	1		
2	Social security taxes. Multiply line 1 by 12.4% (.124)			2
3	Total cash wages subject to Medicare taxes (see page 3)	3		
4	Medicare taxes. Multiply line 3 by 2.9% (.029)			4
5	Federal income tax withheld, if any			5
6	Total social security, Medicare, and income taxes (add lines 2, 4, and 5)			6
7	Advance earned income credit (EIC) payments, if any			7
8	Net taxes (subtract line 7 from line 6)			8

9 Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 1998 or 1999 to household employees? (**Do not** count cash wages paid in 1998 or 1999 to your spouse, your child under age 21, or your parent.)

- No. Stop.** Enter the amount from line 8 above on Form 1040, line 55. If you are not required to file Form 1040, see the line 9 instructions on page 4.
- Yes.** Go to line 10 on the back.

Part II Federal Unemployment (FUTA) Tax

		Yes	No
10	Did you pay unemployment contributions to only one state?	10	
11	Did you pay all state unemployment contributions for 1999 by April 17, 2000? Fiscal year filers, see page 4	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	State reporting number as shown on state unemployment tax return ▶		
15	Contributions paid to your state unemployment fund (see page 4)	15	
16	Total cash wages subject to FUTA tax (see page 4)	16	
17	FUTA tax. Multiply line 16 by .008. Enter the result here, skip Section B, and go to line 26	17	

Section B

18 Complete all columns below that apply (if you need more space, see page 4):

(a) Name of state	(b) State reporting number as shown on state unemployment tax return	(c) Taxable wages (as defined in state act)	(d) State experience rate period		(e) State experience rate	(f) Multiply col. (c) by .054	(g) Multiply col. (c) by col. (e)	(h) Subtract col. (g) from col. (f). If zero or less, enter -0-.	(i) Contributions paid to state unemployment fund
			From	To					

19	Totals	19	
20	Add columns (h) and (i) of line 19	20	
21	Total cash wages subject to FUTA tax (see the line 16 instructions on page 4)	21	
22	Multiply line 21 by 6.2% (.062)	22	
23	Multiply line 21 by 5.4% (.054)	23	
24	Enter the smaller of line 20 or line 23	24	
25	FUTA tax. Subtract line 24 from line 22. Enter the result here and go to line 26	25	

Part III Total Household Employment Taxes

26	Enter the amount from line 8	26	
27	Add line 17 (or line 25) and line 26	27	
28	Are you required to file Form 1040? <input type="checkbox"/> Yes. Stop. Enter the amount from line 27 above on Form 1040, line 55. Do not complete Part IV below. <input type="checkbox"/> No. You may have to complete Part IV. See page 4 for details.		

Part IV Address and Signature—Complete this part only if required. See the line 28 instructions on page 4.

Address (number and street) or P.O. box if mail is not 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.

Employer's signature _____ Date _____

