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

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| Form OUZ | Ťip Ir |
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| Department of the Treasury Internal Revenue Service | |

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Form

► See separate instructions.

| Use IRS label. Make any necessary changes. Otherwise, please type or print. | Name of establishment Number and street (see instructions) City or town, state, and ZIP code | Employer identification number | Type of establishment (check only one box) 1 Evening meals only 2 Evening and other meals 3 Meals other than evening meals 4 Alcoholic beverages |
|---|--|--------------------------------|--|
| Employer's name (s | Establishment number (see instructions) | | |
| Number and street (P.O. box, if applicable) | | | |

City, state, and ZIP code (if a foreign address, see instructions)

| | | Check | k if: Amended Return | | |
|------|---|-------|----------------------|--------|--|
| crea | it cards or other charges? No | | FINAL | Return | |
| 1 | Total charged tips for calendar year 2002 | | 1 | | |
| 2 | Total charge receipts showing charged tips (see instructions) | | 2 | | |
| 3 | Total amount of service charges of less than 10% paid as wages to employees . | | 3 | | |
| 4a | Total tips reported by indirectly tipped employees | | 4a | | |
| b | Total tips reported by directly tipped employees | | 4b | | |
| | Note: Complete the Employer's Optional Worksheet for Tipped Employees on p of the instructions to determine potential unreported tips of your employees. | age 4 | | | |
| С | Total tips reported (add lines 4a and 4b) | | 4c | | |
| 5 | Gross receipts from food or beverage operations (not less than line 2-see instruction | ons). | 5 | | |
| 6 | Multiply line 5 by 8% (.08) or the lower rate shown here ► granted I IRS. (Attach a copy of the IRS determination letter to this return.) | • | 6 | | |
| | Note: If you have allocated tips using other than the calendar year (semimonthly, biv quarterly, etc.), mark an " X " on line 6 and enter the amount of allocated tips from records on line 7. | - | | | |
| 7 | Allocation of tips. If line 6 is more than line 4c, enter the excess here | | 7 | | |
| | ► This amount must be allocated as tips to tipped employees working in this establish Check the box below that shows the method used for the allocation. (Show the por any, attributable to each employee in box 8 of the employee's Form W-2.) | | | | |
| а | Allocation based on hours-worked method (see instructions for restriction). | | | | |
| | Note: If you marked the checkbox in line 7a, enter the average number of employee hour | rs | | | |
| b | worked per business day during the payroll period. (see instructions)Allocation based on gross receipts method | | | | |
| | Allocation based on good-faith agreement (Attach a copy of the agreement.) . | | | | |
| | | | | | |

8 Enter the total number of directly tipped employees at this establishment during 2002 ►

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.