SCHE	DULE	Н
(Form	1040)	

Department of the Treasury

Internal Revenue Service Name of employer

Household Employment Taxes

(For Social Security, Medicare, Withheld Income, and Federal Unemployment (FUTA) Taxes) ► Attach to Form 1040, 1040NR, 1040-SS, or 1041.

See separate instructions.

	ONIB NO. 1545-1971				
xes)	2007				
	Attachment				
	Sequence No. 44				
Social security number					
Employer identification number					

OMD No. 1545 1071

- A Did you pay **any one** household employee cash wages of \$1,500 or more in 2007? (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 H-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 2007 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 2006 or 2007 to all household employees?
 (Do not count cash wages paid in 2006 or 2007 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. (Calendar year taxpayers having no household employees in 2007 do not have to complete this form for 2007.)

Part I Social Security, Medicare, and Income Taxes

1	Total cash wages subject to social security taxes (see page H-4)		
2	Social security taxes. Multiply line 1 by 12.4% (.124)	2	
3	Total cash wages subject to Medicare taxes (see page H-4) 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	
		Q	
8	Net taxes (subtract line 7 from line 6)	0	

- 9 Did you pay total cash wages of \$1,000 or more in any calendar quarter of 2006 or 2007 to all household employees? (Do not count cash wages paid in 2006 or 2007 to your spouse, your child under age 21, or your parent.)
 - No. Stop. Enter the amount from line 8 above on Form 1040, line 62. If you are not required to file Form 1040, see the line 9 instructions on page H-4.
 - **Yes.** Go to line 10 on the back.

For Privacy Act and Paperwork Reduction Act Notice, see page H-7 of the instructions.	Cat. No. 12187K	Schedule H (Form 1040) 2007
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Sched	ule H (Form 1040) 2007										Page 2
Par	t II Federal Ur	nemployment (Fl	JTA) Tax								
										Yes	s No
10	Did you pay unemplo								10	_	<u> </u>
11	Did you pay all state	e unemployment con	tributions	for 2007 b	y April 15,	2008? Fiscal y	ear filers, see p	age H-4	11		
12	Were all wages that	t are taxable for FU	TA tax als	o taxable	for your st	ate's unemplo	yment tax?		12	2	
Next	: If you checked the	e "Yes" box on all	the lines a	above, co	mplete Sec	ction A.					
	If you checked the	e " No " box on any	of the line	es above,	skip Secti	on A and com	plete Section	В.			
				Sec	tion A						
13	Name of the state v	where you paid une	mplovmer								\top
14	State reporting num										
	1 0			. ,							
15	Contributions paid t	to your state unemp	oloyment f	fund (see	page H-5)	15					
16	Total cash wages s	ubject to FUTA tax	(see page	e H-5) .				16			<u> </u>
17	FUTA tax. Multiply I	ling 16 by 008 Ent	or the recu	ult hora ak	in Soction	R and go to li	26	17			
<u> 17</u>	FUTA tax. Wultiply	IIIIE TO DY .000. EIIIR			tion B	B, and go to in	ne 20 .	17			
18	Complete all colum	ns below that appl	y (if you n			e page H-5):					
(a)	(b)		(d)	(e)			(h)		(i	i)
Name	State reporting number as shown on state	(c) Taxable wages (as	State expe	rience rate	State	(f) Multiply col. (c)	(g) Multiply col. (c)	Subtract co from col. (Contrib paid to	
of state	unemployment tax	defined in state act)			experience rate	by .054	by col. (e)	zero or le	ss,	unemplo	oyment
	return		From	То				enter -0	•	fui	
			1		1	1					
19	Totals										
						1 1	I.				
20	Add columns (h) an					20					
21	Total cash wages s	ubject to FUTA tax	(see the I	ine 16 ins	tructions o	n page H-5)		21			+
00	Multiply line 01 by							22			
22	Multiply line 21 by 6	0.2% (.002)									+
23	Multiply line 21 by s	5.4% (.054)				23					
24	Enter the smaller o	, ,						24			
25	5 FUTA tax. Subtract line 24 from line 22. Enter the result here and go to line 26							25			
Par		sehold Employm			oro ana go			20			
rai											Τ
26	Enter the amount fro	om line 8. If you che	cked the '	"Yes" hox	on line C. c	of name 1 ente	r -0-	26			
20				100 500		n page 1, ente					<u> </u>
27	7 Add line 17 (or line 25) and line 26 (see page H-5)						27				
28	Are you required to										
		ter the amount fron	n line 27 a	above on I	orm 1040,	, line 62. Do n	ot complete				
	Part IV b				5 for data	ile					
Par		have to complete l					he line 28 ind	structions	on	nade	H-5
Part IV Address and Signature—Complete this part only if required. See the line 28 in: Address (number and street) or P.O. box if mail is not delivered to street address					Apt., room, or suite no.						
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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.