

**Note:** *The draft you are looking for begins on the next page.*



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Almost every form and publication has a page on IRS.gov with a friendly shortcut. For example, the Form 1040 page is at [IRS.gov/Form1040](https://www.irs.gov/Form1040); the Pub. 501 page is at [IRS.gov/Pub501](https://www.irs.gov/Pub501); the Form W-4 page is at [IRS.gov/W4](https://www.irs.gov/W4); and the Schedule A (Form 1040/SR) page is at [IRS.gov/ScheduleA](https://www.irs.gov/ScheduleA). If typing in a link above instead of clicking on it, be sure to type the link into the address bar of your browser, not a Search box.

If you wish, you can submit comments to the IRS about draft or final forms, instructions, or publications at [IRS.gov/FormsComments](https://www.irs.gov/FormsComments). We cannot respond to all comments due to the high volume we receive and may not be able to consider many suggestions until the subsequent revision of the product.

If you have comments on reducing paperwork and respondent (filer) burden, with respect to draft or final forms, please respond to the relevant information collection through the Federal Register process; for more info, click [here](#).

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

**2020**

▶ See the separate instructions.  
 ▶ Go to [www.irs.gov/Form8027](http://www.irs.gov/Form8027) for instructions and the latest information.

|   |   |  |
|---|---|--|
| Check if:<br>Amended Return <input type="checkbox"/><br>Final Return <input type="checkbox"/>   | Name of establishment _____<br>Number and street (don't enter a P.O. box). See instructions. _____<br>City or town, state, and ZIP code _____ | Employer identification number _____<br><br>Type of establishment (check only one box)<br><input type="checkbox"/> 1 Evening meals only<br><input type="checkbox"/> 2 Evening and other meals<br><input type="checkbox"/> 3 Meals other than evening meals<br><input type="checkbox"/> 4 Alcoholic beverages |
| Employer's name (see instructions) _____<br>Number and street (or P.O. box number, if mail isn't delivered to street address) _____ Apt. or suite no. _____<br>City, state, and ZIP code (if a foreign address, see instructions) _____ |   | Establishment number (see instructions) _____  |

Does this establishment accept credit cards, debit cards, or other charges?  Yes (lines 1 and 2 **must** be completed)  No

|   |           |  |  |
|---|-----------|--|--|
| <b>1</b> Total charged tips for calendar year 2020 . . . . .  | <b>1</b>  |  |  |
| <b>2</b> Total charge receipts showing charged tips (see instructions) . . . . .  | <b>2</b>  |  |  |
| <b>3</b> Total amount of service charges of less than 10% paid as wages to employees . . . . .  | <b>3</b>  |  |  |
| <b>4a</b> Total tips reported by indirectly tipped employees . . . . .  | <b>4a</b> |  |  |
| <b>b</b> Total tips reported by directly tipped employees . . . . .<br><b>Note:</b> Complete the <b>Employer's Optional Worksheet for Tipped Employees</b> in the instructions to determine potential unreported tips of your employees.  | <b>4b</b> |  |  |
| <b>c</b> Total tips reported (add lines 4a and 4b) . . . . .  | <b>4c</b> |  |  |
| <b>5</b> Gross receipts from food and beverages (not less than line 2—see instructions) . . . . .   | <b>5</b>  |  |  |
| <b>6</b> Multiply line 5 by 8% (0.08) or the lower rate shown here ▶ _____ granted by the IRS.<br>If you use a lower rate, attach a copy of the IRS determination letter to this return . . . . .<br><b>Note:</b> If you have allocated tips using other than the calendar year (semimonthly, biweekly, quarterly, etc.), mark an "X" on line 6 and enter the amount of allocated tips from your records on line 7. | <b>6</b>  |  |  |
| <b>7</b> Allocation of tips. If line 6 is more than line 4c, enter the excess here . . . . .<br>▶ This amount must be allocated as tips to tipped employees working in this establishment. Check the box below that shows the method used for the allocation. Show the portion, if any, allocated to each employee in box 8 of the employee's Form W-2.   | <b>7</b>  |  |  |
| <b>a</b> Allocation based on hours-worked method (see instructions for restriction) . . . . . <input type="checkbox"/>  |           |  |  |
| <b>Note:</b> If you marked the checkbox on line 7a, enter the average number of employee hours worked per business day during the payroll period. (see instructions) _____  |           |  |  |
| <b>b</b> Allocation based on gross receipts method . . . . . <input type="checkbox"/>   |           |  |  |
| <b>c</b> Allocation based on good-faith agreement . . . . . <input type="checkbox"/>  |           |  |  |
| <b>8</b> Enter the total number of directly tipped employees at this establishment during 2020 ▶ _____  |           |  |  |

Under penalties of perjury, I declare that I have examined this return, including accompanying documents, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature ▶ \_\_\_\_\_ Title ▶ \_\_\_\_\_ Date ▶ \_\_\_\_\_