JA COMPANY PROGRAM TAX FORM SUMMIT COUNTY

You MUST pay sales tax on ALL sales income received by MAY 3, 2024 to Jenn.Scheeser@ja.org

Date: _____

Company Name: _____

High School: _____

School Address: _____

City: _____ County: Summit

Teacher's Name: _____

Volunteer's Name: _____

Semester: Fall ☐ Spring ☐ Full Year ☐

Please complete two copies of this form. Return one copy to the Junior Achievement office and keep the duplicate copy in your Company PAID INVOICE file.

SALES TAX ON TOTAL SALES

A) Total Gross Sales (including tax) $ _____

B) Exempt Sales (schools, church, non-profit) (subtract -) $ _____

C) Adjusted Gross Sales (A – B) = $ _____

D) Net Sales = (C) / (1 + current state tax rate) $ _____

E) Sales Tax (C – D) $ _____

Example using Summit 6.75% tax rate:

A)	Gross Receipts	650.00
B)	Exempt Receipts	-50.00 (not all JA Companies will have)
C)	Adjusted Receipts	600.00
D)	Net Receipts (600/1.0675)	562.06
E)	Sales Tax (600 – 562.06)	37.94 (should equal your sales tax liability)

**** Attached a copy of your Profit & Loss Statement ****

AMOUNT FROM Line E _____

CHECK NUMBER: _____

To be paid in full to Junior Achievement of North Central Ohio

MAIL TO: Junior Achievement of North Central Ohio
4353 Executive Circle NW
Canton, OH 44718

QUESTIONS: Please call our office at 330-433-0063 x109
Tracy Weatherbee – Tracy.Weatherbee@ja.org

Form Updated 8/29/2023