

## JA COMPANY PROGRAM TAX FORM <u>TUCARAWAS</u> COUNTY

You MUST Date:	I pay sales tax on <u>ALL</u> sales income received by MAY 3, 2024 to Jenn.Scheeser(a	)ja.org
	<del> </del>	
	County: <u>Tuscarawas</u>	
Teacher's Name: _		
	:	
	ıll Spring Full Year	
-	two copies of this form. Return one copy to the Junior Achievement office and kee your Company PAID INVOICE file.	ep the
	SALES TAX ON TOTAL SALES	
A) Total C	Gross Sales (including tax) \$	
B) Exemp	pt Sales (schools, church, non-profit) (subtract - ) \$	
C) Adjusto	ted Gross Sales (A – B) = \$	
D) Net Sal	ales = (C) / (1 + current state tax rate)	
E) Sales T	Tax (C – D) \$	
A) Gross I B) Exemp C) Adjuste D) Net Re	Receipts 650.00 pt Receipts -50.00 (not all JA Companies will have) ted Receipts 600.00 eccipts (600/1.0675) 562.06 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	R:	
	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	