Form **8027**

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

OMB No. 1545-0714

Department of the Treasury nternal Revenue Service		► See the separate instructions. Information about Form 8027 and its separate instructions is available at www.irs.gov/form8027.				15
iterriar i	leveride dei vice	Name of establishment	3.904/10111		yer identifica	tion number
Check if: Amended Return ☐ Final Return ☐		Number and street (see instructions)		Type of establishment (check		
		City or town, state, and ZIP code			only one box) 1 Evening meals only	
					Evening and o	ther
					Meals other the evening meals	
Tambara's name (name on chaum an Farm 041)				4 Alcoholic beverages		
Employer's name (name as shown on Form 941)					ishment num tions)	oer (see
lumber	r and street (P.O. bo	x, if applicable) Apt. c	r suite no.	-		
ity, sta	ate, and ZIP code (if	a foreign address, see instructions)		:	:	:
oes ·	this establishme	ent accept credit cards, debit cards, or other charges? Yes (lines 1 and	2 must b	e com	pleted)	☐ No
		······································			.p.0100) _	
1	Total charged	tips for calendar year 2015		1		
2	Total charge re	eceipts showing charged tips (see instructions)		2		
3	Total amount of	of service charges of less than 10% paid as wages to employees		3		
4a	Total tips repo	rted by indirectly tipped employees	. 4	la		
b	Note. Complet	rted by directly tipped employees	. 4	łb		
С		rted (add lines 4a and 4b)	. 4	łc		
5 6		from food and beverages (not less than line 2—see instructions) by 8% (.08) or the lower rate shown here ▶ granted by the IRS	_	5		
	If you use a lower rate, attach a copy of the IRS determination letter to this return			6		
		ave allocated tips using other than the calendar year (semimonthly, biwe, mark an "X" on line 6 and enter the amount of allocated tips from your re-				
7	Allocation of ti	os. If line 6 is more than line 4c, enter the excess here		7		
	Check the box	t must be allocated as tips to tipped employees working in this established below that shows the method used for the allocation. Show the portion, in the employee in box 8 of the employee's Form W-2.				
а	Note. If you n	ed on hours-worked method (see instructions for restriction)				
b		ed on gross receipts method				
С	Allocation base	ed on good-faith agreement				
8	Enter the total	number of directly tipped employees at this establishment during 2015				
		declare that I have examined this return, including accompanying documents, and to the best of	my knowle	dge and	belief, it is tru	e, correct, a

Signature ▶ Date ▶