See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490

850211

Name (not your trade name) | Employer identification number (EIN)

Part 5: Report your FUTA tax liability by quarter only if line 12 is more than $500. If not, go to Part 6.

16 Report the amount of your FUTA tax liability for each quarter; do NOT enter the amount you deposited. If you had no liability for a quarter, leave the line blank.

16a 1st quarter (January 1 – March 31)	16a	56.78
16b 2nd quarter (April 1 – June 30)	16b	56.78
16c 3rd quarter (July 1 – September 30)	16c	56.78
16d 4th quarter (October 1 – December 31)	16d	56.79
17 Total tax liability for the year (lines 16a + 16b + 16c + 16d = line 17)	17	227.12

Total must equal line 12.

Part 6: May we speak with your third-party designee?

Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.

☒ Yes. Designee's name and phone number: Lynette Gallegos (505) 263-4193

Select a 5-digit Personal Identification Number (PIN) to use when talking to IRS: 8 9 2 6 8

☐ No.

Part 7: Sign here. You MUST complete both pages of this form and SIGN it.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that no part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments made to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

X Sign your name here: Charles R

Print your name here: Charles Barboa

Print your title here: Owner

Date: 2/1/2012

Best daytime phone: (505) 836-0717

Paid preparer use only ☐ Check if you are self-employed

Preparer's name | PTIN

Preparer's signature | Date

Firm's name (or yours if self-employed) | EIN

Address | Phone

City | State | ZIP code

0425869705
Mar. 07, 2012 LTR 2694C 0 R
87-0764638 201012 67
00027729

BOBBIE NICK VOSS CHARITABLE FUNDS
1364 PARKVIEW DR
HUBERTUS WI 53033

018866

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of officer or trustee — Date

TREASURER
Title