950109

## Form **941 for 2009:** Employer's QUARTERLY Federal Tax Return

(Rev.	January	2009) Departme	ent of the Treasury - Internal R	Revenue Servic	е		OMB No. 1545-0029		
(EIN) Employer identification number		dentification number					port for this Quarter of 2009 eck one.)		
Nar	me (not	your trade name)					1: January, February, March		
Tra	de nam	e (if any)					2: April, May, June		
Ado	dress						3: July, August, September		
		Number Street		Suite	or room number		4: October, November, December		
		City	State	ZIP (	code				
	the s	eparate instructions before you	u complete Form 941. Typ			3.			
Pa	rt 1: A	Answer these questions for	this quarter.						
1		oer of employees who receive ding: <i>Mar. 12</i> (Quarter 1), <i>Jun</i>							
_					, <i>Dec. 12</i> (Qua				
2	Wage	es, tips, and other compensa	tion			2	•		
3	Incon	ne tax withheld from wages,	tips, and other compens	sation		3	•		
4		wages, tips, and other comp	•	social secu	rity or Medica	re tax	Check and go to line 6.		
5	Taxal	ble social security and Medic	care wages and tips:  Column 1		Colun	n 2			
				] [		111 2			
	5a Ta	axable social security wages		] × .124 =   ]		-			
	5b Ta	axable social security tips	•	」× .124 = │		•			
	5c Ta	axable Medicare wages & tips	•	× .029 =		-			
	5d To	otal social security and Medi	care taxes (Column 2, lir	nes 5a + 5b	+ 5c = line 5	id) <b>5d</b>			
6 7	CUR	taxes before adjustments (li RENT QUARTER'S ADJUSTM he instructions.	,		 nts adjustment				
	7a C	urrent quarter's fractions of	cents						
	7b C	urrent quarter's sick pay .							
	7c C	urrent quarter's adjustments fo	or tips and group-term life	insurance		•			
	7d T	OTAL ADJUSTMENTS. Comb	ine all amounts on lines 7a	a through 7	C	7d	•		
8	Total	taxes after adjustments. Co	mbine lines 6 and 7d .			8			
9	Adva	nce earned income credit (E	IC) payments made to en	nployees .		9	•		
10	Total	taxes after adjustment for a	dvance EIC (line 8 - line	9 = line 10	)	10			
11	Total	deposits for this quarter, inc	luding overpayment appl	lied from a					
		quarter and overpaymen 944-X	t applied from Form	941-X or					
	. 0	OTT X							
12a	COBI	RA premium assistance payr	nents (see instructions).						
12b		per of individuals provided CC tance reported on line 12a							
13	Add I	ines 11 and 12a				13	•		
14	Balar	nce due. If line 10 is more that	an line 13, write the diffe	rence here		14	•		
	For in	formation on how to pay, see	the instructions.				Apply to next return.		
15	-	payment. If line 13 is more that		nce here		•	Check one Send a refund.		
•	You M	UST complete both pages of	Form 941 and <b>SIGN</b> it.				Next →		

Employer identification number (EIN)

Part 2: Tell us about your deposit schedule and tax liability for this quarter.								
If you are unsure a (Circular E), section		u are a mon	thly schedule d	epositor or a ser	niweekly schedule depositor, see Pub. 15			
Write the state abbreviation for the state where you made your deposits OR write "MU" if you made your deposits in <i>multiple</i> states.								
17 Check one:								
	You were a monthly schedule depositor for the entire quarter. Enter your tax liability for each month. Then go to Part 3.							
	Tax liability:	Month 1						
		Month 2						
		Month 3						
	Total liability	for quarter			Total must equal line 10.			
	You were a	semiweekly			t of this quarter. Complete Schedule B (Form 941): , and attach it to Form 941.	:		
Part 3: Tell us ab	out your busin	ess. If a que	stion does NO	T apply to your	business, leave it blank.			
18 If your busine	ss has closed o	r you stoppe	d paying wages					
enter the final	date you paid wa	ages /	/ .					
19 If you are a se	easonal employe	er and you do	not have to fil	e a return for ev	ery quarter of the year Check here.			
Part 4: May we s	peak with your	third-party	designee?					
Do you want to for details.	o allow an emplo	yee, a paid ta	x preparer, or a	nother person to	discuss this return with the IRS? See the instructions			
Yes. Designee's name and phone number								
Salar	et a 5-digit Person	nal Identificati	on Number (PIN	to use when talk	ving to the IRS			
☐ No.	it a o-digit i ersor	iai identinicati		to use when tair	king to the ino.			
Part 5: Sign here	. You MUST co	mplete both	pages of Forr	n 941 and SIGN	l it.			
					chedules and statements, and to the best of my knowledge d on all information of which preparer has any knowledge.			
					Print your name here	٦		
Sign ye name l					Print your	_		
					title here	J		
	Date /	/			Best daytime phone ( ) -			
Paid preparer's use only  Check if you are self-employed								
Preparer's name					Preparer's SSN/PTIN			
Preparer's signature					Date / /			
Firm's name (or yours if self-employed)					EIN			
Address					Phone ( ) –			
City				State	ZIP code	7		

# Form 941-V, Payment Voucher

### **Purpose of Form**

Complete Form 941-V, Payment Voucher, if you are making a payment with Form 941, Employer's QUARTERLY Federal Tax Return. We will use the completed voucher to credit your payment more promptly and accurately, and to improve our service to you.

If you have your return prepared by a third party and make a payment with that return, please provide this payment voucher to the return preparer.

#### **Making Payments With Form 941**

To avoid a penalty, make your payment with Form 941 only if:

- Your net taxes for the quarter (line 10 on Form 941) are less than \$2,500 and you are paying in full with a timely filed return or
- You are a monthly schedule depositor making a payment in accordance with the Accuracy of Deposits Rule. See section 11 of Pub. 15 (Circular E), Employer's Tax Guide, for details. In this case, the amount of your payment may be \$2,500 or more.

Otherwise, you must deposit your payment at an authorized financial institution or by using the Electronic Federal Tax Payment System (EFTPS). See section 11 of Pub. 15 (Circular E) for deposit instructions. Do not use Form 941-V to make federal tax deposits.

**Caution.** Use Form 941-V when making any payment with Form 941. However, if you pay an amount with Form 941 that should have been deposited, you may be subject to a penalty. See Deposit Penalties in section 11 of Pub. 15 (Circular E).

#### **Specific Instructions**

**Box 1—Employer identification number (EIN).** If you do not have an EIN, apply for one on Form SS-4, Application for Employer Identification Number, and write "Applied For" and the date you applied in this entry space.

**Box 2—Amount paid.** Enter the amount paid with Form 941.

**Box 3—Tax period.** Darken the capsule identifying the quarter for which the payment is made. Darken only one capsule.

**Box 4—Name and address.** Enter your name and address as shown on Form 941.

- Enclose your check or money order made payable to the "United States Treasury." Be sure to enter your EIN, "Form 941," and the tax period on your check or money order. Do not send cash. Do not staple Form 941-V or your payment to Form 941 (or to each other).
- Detach Form 941-V and send it with your payment and Form 941 to the address in the Instructions for Form 941.

**Note.** You must also complete the entity information above Part 1 on Form 941.



▼ Detach Here and Mail With Your Payment and Form 941.

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<b>941-V</b>		Payment Voucher	OMB No. 1545-0029		
Department of the Treasury Internal Revenue Service	▶ Do	not staple this voucher or your payment to Form 941.		2009	
Enter your employer iden number (EIN).	tification	Enter the amount of your payment. ▶	lars	Cents	
3 Tax period	<b>⊘</b> 3rd	4 Enter your business name (individual name if sole proprietor).			
Quarter	Quarter	Enter your address.			
2nd Quarter	Quarter	Enter your city, state, and ZIP code.			

#### Privacy Act and Paperwork Reduction Act Notice.

We ask for the information on this form to carry out the Internal Revenue laws of the United States. We need it to figure and collect the right amount of tax. Subtitle C, Employment Taxes, of the Internal Revenue Code imposes employment taxes on wages, including income tax withholding. This form is used to determine the amount of the taxes that you owe. Section 6011 requires you to provide the requested information if the tax is applicable to you. Section 6109 requires you to provide your identifying number. If you fail to provide this information in a timely manner, you may be subject to penalties and interest.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books and records relating to a form or instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law.

Generally, tax returns and return information are confidential, as required by section 6103. However, section 6103 allows or requires the IRS to disclose or give the information shown on your tax return to others as described in the Code. For example, we may disclose your tax information to the Department of

Justice for civil and criminal litigation, and to cities, states, and the District of Columbia for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

The time needed to complete and file Form 941 will vary depending on individual circumstances. The estimated average time is:

Recordkeeping		. 12 hr.	, 39 min.
Learning about the law or the form	į,		40 min.
Preparing the form	i.	. 1 hr.	, 49 min.
Copying, assembling, and sending			
the form to the IRS			16 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 941 simpler, we would be happy to hear from you. You can write to: Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. **Do not** send Form 941 to this address. Instead, see *Where Should You File?* on page 4 of the Instructions for Form 941.