Form CT-1

Department of the Treasury Internal Revenue Service

Employer's Annual Railroad Retirement Tax Return

► See separate instructions.

1996

OMB No. 1545-0001

Employer's	
name and	
address	
(If not	N
correct,	₽
please	•
change.)	

Employer identification number

Calendar year

If you do not have to file a return in the future, check here ▶□
T
FF
FD

			1
Pa	rt I Railroad Retirement Taxes		
	Check here if you are electing the safe harbor method for 1997 (see the line 1 instructions) . ▶ □		
1	Supplemental annuity work-hour tax—Total work-hours for		
	which compensation was paid during the year	1	
2	Special supplemental annuity tax for employer pensions on a collective bargaining agreement		
	(attach Form G-241)	2	
3	Adjustments to supplemental annuity work-hour tax (attach Form G-245; see instructions)	3	
4	Adjusted total of supplemental annuity tax (lines 1 and 2 as adjusted by line 3)	4	
5	Tier I Employer Tax—Compensation (other than tips and sick	_	
	pay) paid in 1996 6.2%	5	
6	Tier I Employer Medicare Tax—Compensation (other than tips		
	and sick pay) paid in 1996	6	
7	Tier II Employer Tax—Compensation (other than tips) paid in 1996 \$ \times 16.10%	7	
8	Tier I Employee Tax—Compensation (other than sick pay) paid		
	in 1996	8	
9	Tier I Employee Medicare Tax—Compensation (other than sick	9	
	pay) paid in 1996 (for tips see instructions)	9	
10	Tier II Employee Tax—Compensation (for tips, see instructions)	10	
11	paid in 1996	11	
11 12	· ·	12	
12 13	Tier I Employer Medicare Tax—Sick pay paid in 1996 \$	13	
13 14	Tier I Employee Medicare Tax—Sick pay paid in 1996 \$	14	
15	Total tax based on compensation (add lines 5 through 14)	15	
16	Adjustments to employer and employee railroad retirement taxes based on compensation (see		
10	instructions for format of statement to be attached)	16	
17	Adjusted total of employer and employee railroad retirement taxes based on compensation (line		
.,	15 adjusted by line 16)	17	
18	Total railroad retirement taxes for the year (add lines 4 and 17)	18	
19	Total railroad retirement tax deposits for the year, including overpayment applied from prior year,		
-	from your records.	19	
20	Balance due (subtract line 19 from line 18). Pay to the Internal Revenue Service (see		
	instructions).	20	
21	Overpayment. If line 19 is more than line 18, enter overpayment here ▶\$ and €	check	c if you want it:

• All filers: If line 18 is less than \$500, do not complete Part II or Form 945-A.

• Semiweekly schedule depositors: Complete Form 945-A and see the Part II instructions on the back of this form.

• Monthly schedule depositors: Complete Part II.

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.

Signature ► Title (Owner, etc.) ► Date ►

☐ Applied to next return **OR** ☐ Refunded.

Form CT-1 (1996) Page **2**

Part II Record of Railroad Retirement Tax Liability

Important for 1997

Electronic Deposit Requirement.— If your total deposits of social security, Medicare, railroad retirement, and withheld income taxes were more than \$50,000 in 1995, you must make electronic deposits for all depository tax liabilities that occur after June 30, 1997. The Electronic Federal Tax Payment System (EFTPS) or **RRBLINK** must be used to make electronic deposits. However, if you make your Form CT-1 deposits through the Federal Reserve Bank of New York as required by Rev. Proc. 83-90, 1983-2 C.B. 615, you may continue to use that method of payment. If you are required to make deposits by electronic funds transfer and fail to do so, you may be subject to a 10% penalty. Taxpayers who are not required to make electronic deposits may voluntarily participate in EFTPS/RRBLINK. For information on EFTPS, call 1-800-945-8400 or 1-800-555-4477. (These numbers are for EFTPS information only.) For information on RRBLINK, call 1-314-425-1294.

Instructions

Complete the Monthly Summary of Railroad Retirement Tax Liability only if you were a **monthly** schedule depositor for the entire year. Enter your Tier I and Tier II taxes and the supplemental annuity work-hour tax on the lines provided for each month. Enter the special supplemental annuity tax (Form G-241) on the line provided in the third month of each quarter.

If you were a **semiweekly** schedule depositor during any part of the year or you accumulated **\$100,000** or more on any day during a deposit period, you must complete **Form 945-A**, Annual Record of Federal Tax Liability. Do not enter amounts on lines I, II, or III below.

On Form 945-A for each payday, enter the sum of your employee and employer Tier I and Tier II taxes on the appropriate line. Enter your monthly supplemental annuity work-hour tax to the right of the monthly title just above line 17 of each month and write "ST" to the left of this title just above line 1 of each month. Enter your special supplemental annuity tax from Form G-241 to the right of the monthly

title just above line 17 of the third month of each quarter and write "SST" to the left of this title just above line 1 for the month. Total the amounts for the months from lines A through L, including the work-hour tax amounts and the special supplemental annuity tax. Enter the total on line M, Form 945-A.

The total liability for the year (line V below or line M on Form 945-A) should equal the total taxes for the year (line 18, Form CT-1). Otherwise, you may be charged a penalty for not making deposits of taxes.

Note: See the separate instructions for the deposit rules for railroad retirement taxes.

\$500 Rule.—If your total tax liability for the year (line 18) is less than \$500, no deposits are required, and this liability may be paid with the tax return. However, if you are unsure that you will accumulate less than \$500, deposit under the appropriate deposit rules so that you will not be subject to failure to deposit penalties.

	Monthly Summary of Railroad Retirement Tax Liability				
	Complete if line 18, F	Part I, is \$500 or more a	<u> </u>	you were a monthly schedule depositor.	
Date compensation paid:	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	
First month of quarter:	January	April	July	October	
Tier I and Tier II taxes					
Supplemental annuity work-hour tax .					
I First month total ▶					
Second month of quarter:	February	May	August	November	
Tier I and Tier II taxes					
Supplemental annuity work-hour tax .					
II Second month total ▶					
Third month of quarter:	March	June	September	December	
Tier I and Tier II taxes					
Supplemental annuity work-hour tax .					
Special supplemental annuity tax					
III Third month total ▶					
IV Total for quarter (Add lines I, II, & III.)					
V Total for year (This should equal line	18 Part I)		•		

