Form **944-X:** Adjusted Employer's ANNUAL Federal Tax Return or Claim for Refund

(Rev. February 2012) Department of the Treasury – Internal Revenue Service

OMB No. 1545-2007

Employer	dentification number (EIN)	Return You Are Correcting Check the type of return you are						
Name (not	Name (not your trade name)							
Trade nan	e (if any)	944						
		944-SS						
Address	Number Street Suite or room number	Enter the calendar year you are correcting:						
		(YYYY)						
<u>'</u>	City State ZIP code							
Read the instructions before you complete this form. Use this form to correct errors made on Form 944 or Form 944-SS. Use a separate Form 944-X for each year that needs correction. Type or print within the boxes. You MUST complete all three pages. Do not that this form to Form 944.								
Part 1:	Select ONLY one process.							
	djusted employment tax return. Check this box if you underreported amounts. Also check to use the adjustment process to correct the errors. You must check this box if you verreported amounts on this form. The amount shown on line 20, if less than zero, may on orm 941, or Form 941-SS for the tax period in which you are filing this form. Iaim. Check this box if you overreported amounts only and you would like to use the claim mount shown on line 20. Do not check this box if you are correcting ANY underreported amounts only and you would like to use the claim mount shown on line 20.	ou are correcting both underreported and ly be applied as a credit to your Form 944, a process to ask for a refund or abatement of the						
Part 2:	Complete the certifications.							
3. I certify that I have filed or will file Forms W-2, Wage and Tax Statement, or Forms W-2c, Corrected Wage and Tax Statement, as required. Note. If you are correcting underreported amounts only, go to Part 3 on page 2 and skip lines 4 and 5. 4. If you checked line 1 because you are adjusting overreported amounts, check all that apply. You must check at least one box. I certify that: a. I repaid or reimbursed each affected employee for the overcollected social security and Medicare taxes for prior years. I have a written statement from each employee stating that he or she has not claimed (or the claim was rejected) and will not claim a refund or credit for the overcollection.								
[b. The adjustment of social security tax and Medicare tax is for the employer's share of each employee did not give me a written statement that he or she has not claimed or refund or credit for the overcollection.	only. I could not find the affected employees or or the claim was rejected) and will not claim a						
	c. The adjustment is for federal income tax, social security tax, and Medicare tax that	I did not withhold from employee wages.						
`	you checked line 2 because you are claiming a refund or abatement of overreported ou must check at least one box. certify that: a. I repaid or reimbursed each affected employee for the social security and Medicare written statement from each employee stating that he or she has not claimed (or the or credit for the overcollection. b. I have a written consent from each affected employee stating that I may file this claim and Medicare taxes overcollected in prior years. I also have a written statement from claimed (or the claim was rejected) and will not claim a refund or credit for the overcollected in prior years. I also have a written statement from claimed (or the claim was rejected) and will not claim a refund or credit for the overcollected in the or she has not claimed (or the or credit for the overcollection.	taxes overcollected in prior years. I have a e claim was rejected) and will not claim a refund m for the employee's share of social security m each employee stating that he or she has not collection. could not find the affected employees, each of social security and Medicare taxes, or each						
	d. The claim is for federal income tax, social security tax, and Medicare tax that I did r	ot withhold from employee wages. Next ■▶						

Part :	3: Enter the corrections for	the calendar year	you	are correcting. If a	ny	line does not apply	, leave it bla	ınk.
		Column 1		Column 2		Column 3		Column 4
		Total corrected amount (for ALL employees)	-	Amount originally reported or as previously corrected (for ALL employees)	=	Difference (If this amount is a negative number, use a minus sign.)		Tax correction
6.	Wages, tips and other Compensation (from line 1 of Form 944)] –		=		when you pre W-2 or Forms	int in Column 1 pare your Forms W-2c.
7.	Income tax withheld from wages, tips, and other compensation (from line 2 of Form 944)] –		=		Copy Column 3 here ►	
8.	Taxable social security wages (from line 4a, Column 1 of Form 944 or Form 944-SS)] –	*If you are correcting a 2011 return,	= use	.104. If you are correcting your employ	× .124* =	2. See instructions.
9.	Taxable social security tips (from line 4b, Column 1 of Form 944 or Form 944-SS)] –	*If you are correcting a 2011 return,	= use	.104. If you are correcting your employ	× .124* =	• 32. See instructions.
10.	Taxable Medicare wages and tips (from line 4c, Column 1 of Form 944 or Form 944-SS)] –		=	*If you are correcting your employer	× .029* = share only, use .0145	• See instructions.
11a.	Number of qualified employees paid exempt wages/tips April 1– December 31, 2010 (from line 5a of Form 944 or Form 944-SS)*] –		=			*Complete lines 11a and 11b only for corrections to the 2010 Form 944 or Form 944-SS.
11b.	Exempt wages/tips paid to qualified employees April 1– December 31, 2010 (from line 5b of Form 944 or Form 944-SS)*] –		=		× .062 =	
12.	Tax adjustments (from line 6 of Form 944 or Form 944-SS)] –		=		Copy Column 3 here ►	
13.	Special addition to wages for federal income tax] –		=		See instructions	
14.	Special addition to wages for social security tax		_		=		See instructions	
15.	Special addition to wages for Medicare taxes		_		=		See instructions	
16.	Subtotal. Combine the amounts on	lines 7–15 of Column	4					
17.	Advance earned income credit (EIC) payments made to employees (from line 8 of Form 944 only for years ending before January 1, 2011)] –] =		See instructions	
18a.	COBRA premium assistance payments (from line 11a of Form 944 or Form 944-SS before 2011 or line 9a for 2011)] –] =		See instructions	
18b.	Number of individuals provided COBRA premium assistance (from line 11b of Form 944 or Form 944-SS before 2011 or line 9b for 2011)] –		=			
18c.	Number of qualified employees paid exempt wages/tips March 19-31, 2010 (from line 11c of Form 944 or Form 944-SS)*] –		=			*Complete lines 18c and 18d only for corrections to the 2010 Form 944 or Form 944-SS.
18d.	Exempt wages/tips paid to qualified employees March 19–31, 2010 (from line 11d of Form 944 or Form 944-SS)*] –] =		× .062 =	
19.	Total. Combine the amounts on line	es 16–18d of Column 4	. Co	ontinue to next page .				

Name (not)	your trade name)				Employer iden	ntificatio	n number (EIN)	Correcting Ca	alendar Y ear (YYYY)	
Part 3:	Continued									
20.	If line 20 is less t If you checked I (If you are curre If you checked I If line 20 is more	han zero: ine 1, this is the amour ntly filing a Form 941 o ine 2, this is the amour than zero, this is the in the instructions.	or Form 941-SS, Er nt you want refunde	mployer's C ed or abate	QUARTERLY F ed.	ederal	Tax Return, see	the instruction	s.)	
Part 4:		r corrections for t	the calendar y	ear you	are correc	ting.				
21.		any corrections you entered on a line include both underreported and overreported amounts. our underreported and overreported amounts on line 23.								
22.	Check here if an	y corrections involve	reclassified work	ers. Explai	n on line 23.					
23.	You must give us	s a detailed explanation	on of how you det	termined y	our correctio	ons. See	the instructions	s.		
Part 5:	Sign here. Y	ou must complet	e all three pag	ges of th	is form an	d sign	it.			
and any	schedules or stater	declare that I have file ments that are attached ayer) is based on all inf	d, and to the best of	of my know	ledge and bel	lief, they				
V						Print yo	our			
A	Sign your	<u> </u>				name h				
	name here	•				Print yo title her				
	Date	9			1	Best da	aytime phone			
Paid P	reparer Use O	nly					Check if you	are self-empl	oyed	
Prepare	r's name						PTIN			
Prepare	r's signature						Date			
Firm's na	ame (or yours if bloyed)						EIN			
Address	5						Phone			
Citv				State	e		ZIP code			

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Type of errors you are correcting

Form 944-X: Which process should you use?

Underreported amounts ONLY

Use the adjustment process to correct underreported amounts.

- Check the box on line 1.
- Pay the amount you owe from line 20 when you file Form 944-X.

Overreported amounts ONLY

The process you use depends on **when** you file Form 944-X.

If you are filing Form 944-X MORE THAN 90 days before the period of limitations on credit or refund for Form 944 or Form 944-SS expires . . . Choose either process to correct the overreported amounts.

Choose the adjustment process if you want the amount shown on line 20 credited to your Form 944, 941, or 941-SS for the period in which you file Form 944-X. Check the box on line 1.

OF

Choose the claim process if you want the amount shown on line 20 refunded to you or abated. Check the box on line 2.

If you are filing Form 944-X WITHIN 90 days of the expiration of the period of limitations on credit or refund for Form 944 or Form 944-SS... You must use the **claim process** to correct the overreported amounts. Check the box on line 2.

BOTH underreported and overreported amounts

The process you use depends on **when** you file Form 944-X.

If you are filing Form 944-X MORE THAN 90 days before the period of limitations on credit or refund for Form 944 or Form 944-SS expires . . . Choose either the adjustment process or both the adjustment process and the claim process when you correct both underreported and overreported amounts.

Choose the adjustment process if combining your underreported amounts and overreported amounts results in a balance due or creates a credit that you want applied to Form 944, 941, or 941-SS.

- File one Form 944-X, and
- Check the box on line 1 and follow the instructions on line 20.

OR

Choose both the adjustment process and the claim process if you want the overreported amount refunded to you or abated.

File two separate forms.

- 1. For the adjustment process, file one Form 944-X to correct the underreported amounts. Check the box on line 1. Pay the amount you owe from line 20 when you file Form 944-X.
- 2. For the claim process, file a second Form 944-X to correct the overreported amounts. Check the box on line 2.

If you are filing Form 944-X WITHIN 90 days of the expiration of the period of limitations on credit or refund for Form 944 or Form 944-SS... You must use both the adjustment process and claim process.

File two separate forms.

- For the adjustment process, file one Form 944-X to correct the underreported amounts. Check the box on line 1. Pay the amount you owe from line 20 when you file Form 944-X.
- 2. For the claim process, file a second Form 944-X to correct the overreported amounts. Check the box on line 2.