941 for 2020: Employer's QUARTERLY Federal Tax Return

950120

		PL'S QUARTERLY FEGERALIAX RETU ne Treasury – Internal Revenue Service	AFT1	OMB No. 1545-0029
Empl	oyer identification number (EIN)		Report for t	his Quarter of 2020
Nan	e (not your trade name)			February, March
IVali	(not your trade name)		2: April, Ma	
Trac	e name (if any)			gust, September
Add			November, December	
	Number Street	Suite or room number		gov/Form941 for d the latest information.
	City	State ZIP code	indiadions and	a the latest information.
	Foreign country name	Foreign province/county Foreign postal code		
		plete Form 941. Type or print within the boxes.		
Part 1		quarter. I wages, tips, or other compensation for the pay	-	
•	period including: Sept. 12 (Quarter 3)			
2	Wages, tips, and other compensation		2	
_	wages, ups, and other compensation			
3	Federal income tax withheld from wa	ges, tips, and other compensation	3	
4	If no wages, tips, and other compens	ation are subject to social security or Medicare tax	Chec	ck and go to line 6.
		Column 1 Column 2		
5a	Taxable social security wages	× 0.124 =		
5a	(i) Qualified sick leave wages	× 0.062 =		
5a	(ii) Qualified family leave wages .	× 0.062 =		
5b	Taxable social security tips	× 0.124 =		
5c 5d	Taxable Medicare wages & tips Taxable wages & tips subject to	× 0.029 =		
Ju	Additional Medicare Tax withholding	× 0.009 =		
5e	Total social security and Medicare taxes	s. Add Column 2 from lines 5a, 5a(i), 5a(ii), 5b, 5c, and 5d	5e	
E4	Section 2101(a) Natice and Demand	Tay due an unwanested time (see instructions)	Ef	
5f	Section 3121(q) Notice and Demand-	•Tax due on unreported tips (see instructions)	5f	
6	Total taxes before adjustments. Add I	ines 3, 5e, and 5f	6	
7	Current quarter's adjustment for frac	tions of cents	7	•
8	Current quarter's adjustment for sick	pay	8	
9	Current quarter's adjustments for tips	s and group-term life insurance	9	
10	Total taxes after adjustments. Combin		10	
11a	-	dit for increasing research activities. Attach Form 8974		
		•		
11b	Nonrefundable portion of credit for qua	alified sick and family leave wages from Worksheet 1	11b	•
11c	Nonrefundable portion of employee re	etention credit from Worksheet 1	11c	•
	MUOT			Novi
► Y	ou MUST complete all three pages of I	orm 941 and SIGN It.		Next ■

Name (not your trade name)			Employer identification number (EIN)			
Part	1: Answer these questions for	this quarter. (continued)				
11d	Total nonrefundable credits. Add	lines 11a, 11b, and 11c	11d -			
12	Total taxes after adjustments and	nonrefundable credits. Subtract line 11d from line	10 . 12			
13a	• • • • • • • • • • • • • • • • • • • •	ncluding overpayment applied from a prior quart -X, 941-X (PR), 944-X, or 944-X (SP) filed in the current of				
13b	Deferred amount of social securit	y tax	13b			
13c	Refundable portion of credit for q	ualified sick and family leave wages from Worksh	neet 1 13c -			
13d	Refundable portion of employee r	etention credit from Worksheet 1	13d			
13e	Total deposits, deferrals, and refu	indable credits. Add lines 13a, 13b, 13c, and 13d	13e -			
13f	Total advances received from filin	g Form(s) 7200 for the quarter	13f			
13g	Total deposits, deferrals, and refund	dable credits less advances. Subtract line 13f from line	e 13e . 13g -			
14	Balance due. If line 12 is more than	line 13g, enter the difference and see instructions	14			
15	Overpayment. If line 13g is more than	line 12, enter the difference	Check one: Apply to next return. Send a refund.			
Part :	2: Tell us about your deposit so	chedule and tax liability for this quarter.				
f you'	re unsure about whether you're a r	nonthly schedule depositor or a semiweekly sch	edule depositor, see section 11 of Pub. 15.			
16 (and you didn't ind quarter was less t federal tax liability	turn is less than \$2,500 or line 12 on the return our a \$100,000 next-day deposit obligation during than \$2,500 but line 12 on this return is \$100,000 or. If you're a monthly schedule depositor, compleule depositor, attach Schedule B (Form 941). Go to be	g the current quarter. If line 12 for the prior or more, you must provide a record of your ete the deposit schedule below; if you're a			
		hly schedule depositor for the entire quarter. Enter, then go to Part 3.	ter your tax liability for each month and total			
	Tax liability: Mo	nth 1				
	Мо	nth 2				
	Mo	nth 3				
	Total liability for qua	arter Total m	ust equal line 12.			
		weekly schedule depositor for any part of this quility for Semiweekly Schedule Depositors, and attack				
▶ Y	ou MUST complete all three pages	of Form 941 and SIGN it.	Next ■ ▶			

Name (r	not your trade name		Employer identification number (EIN)					
.	- 11 1							
Part 3	Part 3: Tell us about your business. If a question does NOT apply to your business, leave it blank.							
17	If your busines	ss has closed or you stopped paying wages						
	enter the final o	date you paid wages / / ; also attach a statement to your return. See instructions.						
18	If you're a sea	sonal employer and you don't have to file a return for every quarter of the year Check here.						
19	Qualified healt	h plan expenses allocable to qualified sick leave wages						
20	Qualified healt	th plan expenses allocable to qualified family leave wages	20					
21	Qualified wage	es for the employee retention credit						
22	Qualified healt	lified health plan expenses allocable to wages reported on line 21						
23	Credit from Fo	orm 5884-C, line 11, for this quarter	23					
24	Deferred amou	unt of the employee share of social security tax included on line 1	3b 24					
25	Reserved for f	uture use	25					
Part 4		peak with your third-party designee? allow an employee, a paid tax preparer, or another person to discus	on this votum with the IDC2 Coa the instructions					
	for details.	allow are employee, a paid tax preparer, or another person to discus	s this return with the instructions					
	Yes. Desig	nee's name and phone number						
	Selec	t a 5-digit personal identification number (PIN) to use when talking to	o the IRS					
	□ No.	ta o digit poroonal tantinoation number (i iii) to acc when tanting to	, all the .					
Part !	5: Sign here	You MUST complete all three pages of Form 941 and SIGN i	t.					
		ıry, I declare that I have examined this return, including accompanying schedurect, and complete. Declaration of preparer (other than taxpayer) is based on						
•			Print your					
	Sign y	oui	Print your					
	name		title here					
		Date / /	Best daytime phone					
Paid Preparer Use Only Check if you're self-employed								
Prepa	arer's name		PTIN					
Prep	arer's signature		Date / /					
	s name (or yours -employed)		EIN					
Addr	ress		Phone					
City		State	ZIP code					

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Form 941-V, Payment Voucher

Purpose of Form

Complete Form 941-V if you're making a payment with Form 941. We will use the completed voucher to credit your payment more promptly and accurately, and to improve our service to you.

Making Payments With Form 941

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

- Your total taxes after adjustments and nonrefundable credits (Form 941, line 12) for either the current quarter or the preceding quarter are less than \$2,500, you didn't incur a \$100,000 next-day deposit obligation during the current quarter, and you're paying in full with a timely filed return; or
- You're a monthly schedule depositor making a payment in accordance with the Accuracy of Deposits Rule. See section 11 of Pub. 15 for details. In this case, the amount of your payment may be \$2,500 or more.

Otherwise, you must make deposits by electronic funds transfer. See section 11 of Pub. 15 for deposit instructions. Don't use Form 941-V to make federal tax deposits.



Use Form 941-V when making any payment with Form 941. However, if you pay an amount with Form 941 that should've been deposited, you

may be subject to a penalty. See Deposit Penalties in section 11 of Pub. 15.

Specific Instructions

Box 1—Employer identification number (EIN). If you don't have an EIN, you may apply for one online by visiting the IRS website at www.irs.gov/EIN. You may also apply for an EIN by faxing or mailing Form SS-4 to the IRS. If you haven't received your EIN by the due date of Form 941, 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 circle identifying the quarter for which the payment is made. Darken only one circle.

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

- Enclose your check or money order made payable to "United States Treasury." Be sure to enter your EIN, "Form 941," and the tax period ("1st Quarter 2020," "2nd Quarter 2020," "3rd Quarter 2020," or "4th Quarter 2020") on your check or money order. Don't send cash. Don't 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.

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E 941-V Department of the Treasury Internal Revenue Service ▶ □		►I	Payment Voucher Don't staple this voucher or your payment to Form 941.		OMB No. 1545-0029	
Enter your employer in number (EIN).	dentification		Enter the amount of your payment. ► Make your check or money order payable to "United States Treasury"	Dollars	3	Cents
3 Tax Period	_		4 Enter your business name (individual name if sole proprietor).			
1st Quarter		3rd Quarter	Enter your address.			
2nd Quarter		4th	Enter your city, state, and ZIP code; or your city, foreign country name	, foreign province/cour	nty, and foreign	postal code.

Privacy Act and Paperwork Reduction Act Notice.

We ask for the information on Form 941 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 and provides for income tax withholding. Form 941 is used to determine the amount of 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 identification number. If you fail to provide this information in a timely manner, or provide false or fraudulent information, you may be subject to penalties.

You're 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 its 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, the District of Columbia, and U.S. commonwealths and possessions 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:

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 send us comments from www.irs.gov/FormComments. Or you can send your comments to Internal Revenue Service, Tax Forms and Publications Division, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Don't send Form 941 to this address. Instead, see Where Should You File? in the Instructions for Form 941.