Form 941 for 2023: Employer's QUARTERLY Federal Tax Return Department of the Treasury – Internal Revenue Service

Read t Part 1 1

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950122 OMB No. 1545-0029

Employer identification number (EIN)								
Nam	e (not	your trade name)				 [] 1:	January, February, March	
							April, May, June	
Trad	e nan	ne (if any)		3: July, August, September				
Addr	ess						October, November, December	
		Number Street		Suite or room nun	nber		www.irs.gov/Form941 for	
							ctions and the latest information.	
		City	State	ZIP code				
		Foreign country name	Foreign province/county	Foreign postal c	ode			
	_	eparate instructions before you comp		print within the b	oxes.			
Part		Answer these questions for this						
1		nber of employees who received wa uding: <i>Mar. 12</i> (Quarter 1), <i>June 12</i> (0	• • • •	-				
			aaanon 2), oopin 72 (aa		/2 (Quartor I)	• [
2	Wa	ges, tips, and other compensation				2		
3	Fed	leral income tax withheld from wag	es, tips, and other com	pensation		3		
•				ipeneduen i		•		
4	lf n	o wages, tips, and other compensa	-	ial security or N		l	Check and go to line 6.	
		Г	Column 1		Column 2			
5a	Тах	able social security wages*		× 0.124 =			* Include taxable qualified sick and family leave wages paid in this	
5a	(i)	Qualified sick leave wages* .	•	× 0.062 =			quarter of 2023 for leave taken after March 31, 2021, and before	
5a	(ii)	Qualified family leave wages* .		× 0.062 =			October 1, 2021, on line 5a. Use lines 5a(i) and 5a(ii) only for taxable	
5b	Тах	able social security tips	•	× 0.124 =		I	qualified sick and family leave wages paid in this quarter of 2023	
5c	Тах	able Medicare wages & tips.	•	× 0.029 =	•	1	for leave taken after March 31, 2020, and before April 1, 2021.	
5d		able wages & tips subject to						
	Add	ditional Medicare Tax withholding		× 0.009 =				
5e	Tota	al social security and Medicare taxes.	Add Column 2 from lines	5a, 5a(i), 5a(ii), 5	b, 5c, and 5d	5e	•	
F 4	0		-	•••••• (:+		5 6		
5f	Sec	tion 3121(q) Notice and Demand—	Tax due on unreported	tips (see instruc	ctions)	5f		
6	Tot	al taxes before adjustments. Add lir	nes 3, 5e, and 5f			6		
7	C	rrent quarter's adjustment for fracti	one of conte			7		
1	Cui					•		
8	Cur	rrent quarter's adjustment for sick	рау			8		
9	Cur	rent quarter's adjustments for tips	and group-term life in	surance		9		
3	Oui		and group-term me ma			J		
10	Tot	al taxes after adjustments. Combine	e lines 6 through 9 .			10	•	
11a	Qua	alified small business payroll tax cred	it for increasing researc	h activities. Atta	ch Form 8974	11a		
			-			•		
11b		nrefundable portion of credit for qu ore April 1, 2021	alified sick and family	-		י 11b	•	
		. ,		-	-	1		
11c	Res	served for future use				11c		

For Privacy Act and Paperwork Reduction Act Notice, see the back of the Payment Voucher.

Name (not your trade name)			Emp	loyer identification nun	nber (EIN)
Dout	Answer these questions for	r this quarter (a	ontinued		-	
Part	•		,			
11d	Nonrefundable portion of credit after March 31, 2021, and before	-				•
11e	Reserved for future use				. 11e	•
11f	Reserved for future use					
11g	Total nonrefundable credits. Ad	d lines 11a, 11b, a	nd 11d		. 11g	•
12	Total taxes after adjustments an	nd nonrefundable	credits. Subtract line 11g	g from line 10	. 12	
13a	Total deposits for this quarter, overpayments applied from Form 94			-		
13b	Reserved for future use				. 13b	
13c	Refundable portion of credit for before April 1, 2021		and family leave wages			•
13d	Reserved for future use				. 13d	
13e	Refundable portion of credit for after March 31, 2021, and before					
13f	Reserved for future use				. 13f	
13g	Total deposits and refundable c	redits. Add lines 1	3a, 13c, and 13e		. 13g	
13h	Reserved for future use				. 13h	-
13i	Reserved for future use				. 13i	
14	Balance due. If line 12 is more the	an line 13g, enter t	he difference and see inst	ructions	. 14	
15	Overpayment. If line 13g is more that	an line 12, enter the o	difference	Chee	ck one: Apply to ne	tt return. Send a refund.
Part	2: Tell us about your deposit	schedule and ta	x liability for this quarte	er.		
lf vou'	re unsure about whether you're a				e depositor, see sec	tion 11 of Pub. 15.
-	\Box Line 12 on this	roturn is loss tha	n \$2,500 or line 12 on th	o roturn for t	ho prior quartor wa	e loss than \$2,500
16 (and you didn't i quarter was less federal tax liabil	i ncur a \$100,000 i than \$2,500 but ity. If you're a m	next-day deposit obligati line 12 on this return is \$ onthly schedule deposito ach Schedule B (Form 94)	ion during the \$100,000 or m or, complete th	e current quarter. If lore, you must provi he deposit schedule	line 12 for the prior de a record of your
		nthly schedule de uarter, then go to P	epositor for the entire qu Part 3.	uarter. Enter y	our tax liability for e	ach month and total
	Tax liability: M	Ionth 1				
	M	Ionth 2	•			
	Ν	Ionth 3				

You were a semiweekly schedule depositor for any part of this quarter. Complete Schedule B (Form 941)
Report of Tax Liability for Semiweekly Schedule Depositors, and attach it to Form 941. Go to Part 3.

•

Total must equal line 12.

You MUST complete all three pages of Form 941 and SIGN it.

Total liability for quarter

950	922
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Name ((not your trade name)	Employer identification number (EIN)	<u> </u>				
Part 3: Tell us about your business. If a question does NOT apply to your business, leave it blank.							
			—				
17	If your business has closed or you stopped paying wages	Check here, and					
		to your return. See instructions.					
18	If you're a seasonal employer and you don't have to file a return for every quarte	er of the year Check here.	_				
19	Qualified health plan expenses allocable to qualified sick leave wages for leave taken before A		_				
20	Qualified health plan expenses allocable to qualified family leave wages for leave taken before A						
21		21					
22	Reserved for future use	· · · · 22	_				
23	Qualified sick leave wages for leave taken after March 31, 2021, and before Octobe						
24 25	Qualified health plan expenses allocable to qualified sick leave wages reported of Amounts under certain collectively bargained agreements allocable to qual						
	leave wages reported on line 23						
26	Qualified family leave wages for leave taken after March 31, 2021, and before Octob	er 1, 2021 26					
27	Qualified health plan expenses allocable to qualified family leave wages reported of	on line 26 27 🔹					
28	Amounts under certain collectively bargained agreements allocable to qualifi leave wages reported on line 26	ïed family · · · · 28 ■					
	•		_				
Part							
	Do you want to allow an employee, a paid tax preparer, or another person to discuss for details.	s this return with the IRS? See the instructions					
	Yes. Designee's name and phone number						
	Select a 5-digit personal identification number (PIN) to use when talking to	the IRS.					
	□ No.						
Part	5: Sign here. You MUST complete all three pages of Form 941 and SIGN it.		—				
Unde	er penalties of perjury, I declare that I have examined this return, including accompanying schedule belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on al	es and statements, and to the best of my knowledge					
and	Print your	in mornation of which preparer has any knowledge.	7				
-	In your name here]				
nar	me here Print your title here						
			1				
	Date / / Best daytime	e phone]				
Pa	aid Preparer Use Only	Check if you're self-employed					
Prep	parer's name	PTIN]				
Prep	parer's signature	Date / /					
	i's name (or yours If-employed)	EIN]				
	· · · ·		' 1				
Add	lress	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 2023," "2nd Quarter 2023," "3rd Quarter 2023," or "4th Quarter 2023") 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.

Detach Here and Mail With Your Payment and Form 941.

E 941-V Department of the Treasury Internal Revenue Service			Payment Voucher			OMB No. 1545-0029	
 Enter your employer ic number (EIN). 	lentification		2	Enter the amount of your payment. Make your check or money order payable to "United States Treasury."	Dollars	i	Cents
3 Tax Period 1st Quarter	0	3rd Quarter	4	Enter your business name (individual name if sole proprietor).			
2nd Quarter	0	4th Quarter		Enter your city, state, and ZIP code; or your city, foreign country name, t	foreign province/cour	ty, 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:

Recordkeeping		22 h	ır., 28 min.				
Learning about the law or the form .			53 min.				
Preparing, copying, assembling, and							
sending the form to the IRS		1 h	r., 18 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 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.