941 for 2012: Employer's QUARTERLY Federal Tax Return 950112

| Rev. Ja | nuary 2012) Departme | nt of the Treasury — Internal Re | evenue Service | - | | - | OMB No. 1545-0029 |
|---------|--|----------------------------------|----------------|-----------------------|-----------|---------------------------|------------------------|
| Emplo | oyer identification number | | | | _ | port for this Q | uarter of 2012 |
| Name | e (not your trade name) | | | | 1 | I: January, Febru | uary, March |
| Trade | name (if any) | | | | | 2: April, May, Jun | ie |
| | (·) | | | | | B: July, August, S | September |
| Addre | | | | | | , , | mber, December |
| | Number Street | | Suite | or room number | | year forms are a | |
| | City | Stat | to L | ZIP code | | irs.gov/form941 | |
| Read t | ne separate instructions before you | | | | | | |
| Part 1 | Answer these questions for | this quarter. | | | | | |
| 1 | Number of employees who receive | ed wages, tips, or other | compensat | ion for the pay | period | | |
| | including: Mar. 12 (Quarter 1), June | e 12 (Quarter 2), Sept. 12 | (Quarter 3), | or <i>Dec. 12</i> (Qu | arter 4) | 1 | , |
| 2 | Wages, tips, and other compensation | ation | | | | 2 | • |
| 3 | Income tax withheld from wages | , tips, and other compen | sation . | | | 3 | |
| 4 | If no wages, tips, and other comp | pensation are subject to | social secu | ırity or Medica | are tax | Check a | and go to line 6. |
| | | Column 1 | | Column | 2 | | |
| 5a | Taxable social security wages . | - | × .104 = | | • | | |
| 5b | Taxable social security tips | • | × .104 = | | • | | |
| 5c | Taxable Medicare wages & tips. | | × .029 = | | | | |
| 5d | Add Column 2 line 5a, Column 2 | line 5b. and <i>Column 2</i> lir | ne 5c | | ! | 5d | - |
| 5e | Section 3121(q) Notice and Dema | | | e instructions) | ! | 5e | |
| 6 | Total taxes before adjustments (a | | | | | 6 | |
| 7 | Current quarter's adjustment for | | | | | 7 | • |
| 8 | Current quarter's adjustment for | sick pay | | | | 8 | • |
| 9 | Current quarter's adjustments for | tips and group-term life | insurance | | | 9 | - |
| 10 | Total taxes after adjustments. Co | ombine lines 6 through 9 | | | | 10 | - |
| 11 | Total deposits for this quarter, i overpayment applied from Form | ~ | pplied fron | n a prior quar | | 11 | |
| 12a | COBRA premium assistance pay | ments (see instructions) | | | 1 | I2a | • |
| 12b | Number of individuals provided C | OBRA premium assista | nce | | | | |
| 13 | Add lines 11 and 12a | | | | | 13 | • |
| 14 | Balance due. If line 10 is more tha | n line 13, enter the differe | nce and see | instructions | ' | 14 | • |
| 15 | Overpayment. If line 13 is more than | line 10, enter the differenc | е | | Check one | e: Apply to next | return. Send a refund. |

▶ You MUST complete both pages of Form 941 and SIGN it.

| Name (not your trade name) | Employer identification number (EIN) |
|---|---|
| Part 2: Tell us about your deposit schedule and tax liability for this quarter. | |
| If you are unsure about whether you are a monthly schedule depositor or a semiwee (Circular E), section 11. | kly schedule depositor, see Pub. 15 |
| Line 10 on this return is less than \$2,500 or line 10 on the return for the prior \$100,000 next-day deposit obligation during the current quarter. If line 10 for the is \$100,000 or more, you must provide a record of your federal tax liability. If you schedule below; if you are a semiweekly schedule depositor, attach Schedule B (Forn | prior quarter was less than \$2,500 but line 10 on this return u are a monthly schedule depositor, complete the deposi |
| You were a monthly schedule depositor for the entire quarter. liability for the quarter, then go to Part 3. | Enter your tax liability for each month and tota |
| Tax liability: Month 1 | |
| Month 2 ■ | |
| Month 3 | |
| Total liability for quarter Total | must equal line 10. |
| You were a semiweekly schedule depositor for any part of this Report of Tax Liability for Semiweekly Schedule Depositors, and atta | • |
| Part 3: Tell us about your business. If a question does NOT apply to your business | s, leave it blank. |
| 17 If your business has closed or you stopped paying wages | Check here, and |
| enter the final date you paid wages / / / | |
| 18 If you are a seasonal employer and you do not have to file a return for every quart | er of the year Check here. |
| Part 4: May we speak with your third-party designee? | |
| Do you want to allow an employee, a paid tax preparer, or another person to discuss the for details. | nis 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 | e IRS. |
| No. | |
| Part 5: Sign here. You MUST complete both pages of Form 941 and SIGN it. | |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all ir | |
| | nt your ne here |
| Sign your | nt your |
| title | here |
| Date / / Bes | st daytime phone |
| Paid Preparer Use Only | heck if you are self-employed |
| Preparer's name | PTIN |
| Preparer's signature | Date / / |
| Firm's name (or yours if self-employed) | EIN |
| Address | Phone |
| City State | ZIP code |

Page **2** Form **941** (Rev. 1-2012)

Form 941-V, Payment Voucher

Purpose of Form

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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 either the current quarter or the preceding quarter (line 10 on Form 941) are less than \$2,500, you did not incur a \$100,000 next-day deposit obligation during the current quarter, 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 make deposits by electronic funds transfer. 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, you may apply for one online. Go to IRS.gov and click on the *Apply for an EIN Online* link. You may also apply for an EIN by calling 1-800-829-4933, or you can fax or mail Form SS-4, Application for Employer Identification Number. If you have not 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 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.

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|---|------------|-------------------------------|--------------|--|----------|--|-----------|-------------------|--|----------------|
| E 941-V Department of the Treasury Internal Revenue Service ▶ Do | | | ⊳ Do | Payment Voucher o not staple this voucher or your payment to Form 941. | | | | OMB No. 1545-0029 | | |
| 1 | | your employer id er (EIN). | entification | | 2 | Enter the amount of your payment. ▶ | | Dollars | | Cents |
| 3 | Tax Pe | riod | | | 4 | Enter your business name (individual name if sole proprietor). | _ | | | |
| | \bigcirc | 1st Quarter | 0 | 3rd Quarter | | Enter your address. | | | | |
| | \bigcirc | 2nd Quarter | | 4th Quarter | | Enter your city, state, and ZIP 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, including 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 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 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 | | . 11 hr. |
|--------------------------------------|--|----------|
| Learning about the law or the form . | | 47 min. |
| Preparing, copying, assembling, and | | |
| sending the form to the IRS | | . 1 hr. |

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 email us at *taxforms@irs.gov*. Enter "Form 941" on the subject line. Or write to: Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:M:S, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. **Do not** send Form 941 to this address. Instead, see *Where Should You File?* in the Instructions for Form 941.