Form 941 for 2024: Employer's QUARTERLY Federal Tax Return
(Rev. March 2024)

Department of the Treasury — Internal Revenue Service

950124

OMB No. 1545-0029

Report for this Quarter of 2024

Number   Street   NJ   08109   Go to www.iis.gov/Form941 for instructions and the latest information city   Pennsauken   NJ   08109   2/P code   2/P cod							(Check	one.)	
Address   So34 Rt38   Sizest	Name (i	not your trade	<sub>name)</sub> Stonemart Co	rp			1: 、	January, February, March	
Address   Size	Trade name (if any) Stonemart Corp						2: April, May, June		
Number Street   Substance or communitary   Pennsauken   P		5634	+38						
Pennsauken  City  State  Foreign country name  Foreign country name  Foreign produce/country  Interior and angue, and Angue  Interior and angue, and angue  Interior angue, and angue, and angue  Interior angue, and angue, and angue  Column 1  Column 2  Sa Taxable social security wages . \$16225.00 × 0.029 = \$470.52  Taxable wages & tips subject to  Additional Medicare Tax withholding . × 0.009 = .  Section 3121(q) Notice and Demand—Tax due on unreported tips (see instructions) . 5f  Foreign produce/country  Foreign produce/country  Foreign produce/country  Foreign produce/country  Foreign produce/country  Column 2  Column 1  Column 2  Column 3  Column 3  Column 3  Column 3  Column 3  Column 4  Column 4  Colum	Address	s		om number	4: October, November, December				
Foreign country name  Foreign province/country  Mary 11		Penns	auken	NJ	- —	l		_	
Read the separate instructions before you complete Form 941. Type or print within the boxes.  Part 1: Answer these questions for this quarter. Employers in American Samoa, Guam, the Commonwealth of the North Mariana Islands, the U.S. Virgin Islands, and Puerto Rico can skip lines 2 and 3, unless you have employees who subject to U.S. Income tax withholding.  1 Number of employees who received wages, tips, or other compensation for the pay period including: Mar. 12 (Quarter 1), June 12 (Quarter 2), Sept. 12 (Quarter 3), or Dec. 12 (Quarter 4) 1 2  2 Wages, tips, and other compensation 2 \$16225,00  3 Federal income tax withheld from wages, tips, and other compensation 3 \$1622.					ZIP	code			
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Taxable social security wages . \$16225.00 × 0.124 = \$2011.90  Taxable social security tips	4 If	f no wages,	tips, and other compens	ation are subject to so	cial security	or Medicare t	ax [	Check here and go to line 6.	
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overpayments applied from Form 941-X, 941-X (PR), or 944-X filed in the current quarter 13								\$4104.92	
14 Balance due. If line 12 is more than line 13, enter the difference and see instructions		Total deposits for this quarter, including overpayment applied from a prior quarter and							
	14 B	Balance due	e. If line 12 is more than line	13, enter the difference	and see ins	tructions	. 14		
15 Overpayment. If line 13 is more than line 12, enter the difference   Check one: Apply to next return. Send a re				Г			_	Apply to next return. Send a refund.	
You MUST complete both pages of Form 941 and SIGN it.  For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.  Cat. No. 17001Z  Form 941 (Rev. 3-					tructions		NI- 470047	Form <b>941</b> (Rev. 3-2024)	

Name (not your trade name) Stonema	art Corp	1	87=3083618						
	our deposit schedule a	0,-0							
	<u> </u>			schedule depos	itor, see section 11 of Pub. 15.				
and quar fede									
	were a monthly schedulity for the quarter, then g	er. Enter your tax	liability for each month and total						
Тах	liability: Month 1								
	Month 2		-						
	Month 3		-						
Total	liability for quarter		To	tal must equal lir	al must equal line 12.				
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.									
Part 3: Tell us about yo	our business. If a quest	ion does NOT a	pply to your bus	iness, leave it b	lank.				
17 If your business has	closed or you stopped	paying wages .			Check here and				
enter the final date yo	ou paid wages /	/ ; also	attach a stateme	nt to your return.	See instructions.				
18 If you're a seasonal	employer and you don't	have to file a ret	urn for every qua	rter of the year	Check here.				
	with your third-party de								
Do you want to allow for details.	an employee, a paid tax p	preparer, or anoth	er person to discu	ıss this return with	n the IRS? See the instructions				
	Yes. Designee's name and phone number								
Select a 5-d	ligit personal identification	n number (PIN) to	use when talking t	to the IRS.					
No.									
	MUST complete both p	_							
			axpayer) is based or	all information of w	s, and to the best of my knowledge hich preparer has any knowledge.				
Sign your			Print your name here	1 STONAM	art Corp				
name here			Print your title here	Admin					
Date 12/06	5/2024		Best dayti	me phone +	1 (215) 808 6555				
Paid Preparer Use O	nly			Check if you're	e 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					

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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.

CAUTION

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 going to 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 2024," "2nd Quarter 2024," "3rd Quarter 2024," or "4th Quarter 2024") 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			on't	Payment Voucher t staple this voucher or your payment to Form 941.	OMB No. 1545-0029		
1 Enter your employer identification					Dollars		Cents
number (EIN). 87 _ 3083618				Enter the amount of your payment.  Make your check or money order payable to "United States Treasury."	\$4104	ļ	92
3 Tax Period			4	Enter your business name (individual name if sole proprietor).			
① 1st Quart	er	3rd Quarter		Enter your address.			
2nd Quart	er O	4th Quarter		Enter your city, state, and ZIP code; or your city, foreign country name,	, foreign province/coun	ty, and foreign	postal code.