950109

## Form 941 for 2009: Employer's QUARTERLY Federal Tax Return

(Rev.	April 20	09)	Departme	ent of the Treasury -	– Internal F	Revenue Servic	e		OMB No. 1545-0029
(EII	-	identificatio	on number						oort for this Quarter of 2009
Na	me (not	your trade	name)						1: January, February, March
_									2: April, May, June
Ira	ide nam	ne (if any)							
Ade	dress	Number	Street			Suite	or room number		3: July, August, September
									4: October, November, December
		City			State				
			nstructions before you hese questions for		941. Typ	oe or print w	vithin the boxe	s.	
1			ployees who receive	· ·	r other o	compensatio	on for the pay	period	
			. 12 (Quarter 1), <i>Jun</i>						
2	Wage	es, tips, a	and other compensa	tion				2	
3	Incon	ne tax wi	thheld from wages,	tips, and other	compen	sation		3	
4		• ,	ips, and other comp		•	social secu	rity or Medic	are tax	Check and go to line 6.
5	Taxal	ble socia	I security and Medic	care wages and Column	-		Colur	mn 2	
	5a T:	avahla so	ocial security wages		<u>′</u>	× .124 =	00/4/		
			ocial security tips			X .124 =			
			edicare wages & tips			× .029 =			
	5C 16	axable ivie	edicare wages & tips			_ \ .029 =			
	5d To	otal socia	al security and Medi	care taxes (Colu	ımn 2, liı	nes 5a + 5b	c + 5c = line	5d) <b>5d</b>	
6 7	CUR		efore adjustments (li ARTER'S ADJUSTM ctions.		,				•
	7a C	urrent qu	arter's fractions of	cents				•	
	7b C	urrent qu	ıarter's sick pay .					•	
	7c C	urrent qua	arter's adjustments f	or tips and group	-term life	e insurance			
	7d T	OTAL AD	JUSTMENTS. Comb	ine all amounts o	on lines 7	a through 7	c	7d	
8	Total	taxes af	ter adjustments. Co	mbine lines 6 and	d 7d .			8	•
9	Adva	nce earn	ed income credit (E	IC) payments m	ade to e	mployees .		9	•
10	Total	taxes af	ter adjustment for a	dvance EIC (line	8 – line	9 = line 10	)	10	•
11	prior		for this quarter, inc and overpaymen	t applied from	Form				
120	CORI	DA promi	um assistance payn	nante (coo inctru	ctions)				
		-	lividuals provided CO	•	Ctions) .		1		
			orted on line 12a						
13	Add I	lines 11 a	ınd 12a					13	
14			If line 10 is more that		the diffe	erence here		14	
15			on how to pay, see If line 13 is more tha		he differe	ence here			Apply to next return.  Check one Send a refund.
			plete both pages of						Next →

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 semiweekly schedule depositor, see <i>Pub. 15</i> (Circular E), section 11.								
Write the state abbreviation for the state where you made your deposits OR write "MU" if you made your deposits in <i>multiple</i> states.								
17 Check one:	17 Check one: Line 10 is less than \$2,500. Go to Part 3.							
	You were a monthly schedule depositor for the entire quarter. Enter your tax liability for each month. Then go to Part 3.							
	Tax liability:	Month 1		•				
		Month 2						
		Month 3						
	Total liability for	or quarter			Total must equal line 10.			
	You were a	semiweekly			t of this quarter. Complete Schedule B (Form 941): , and attach it to Form 941.			
Part 3: Tell us ab	,		•	•	business, leave it blank.			
18 If your busine								
-			, paying wage	<b>5</b>				
	date you paid wag							
				le a return for ev	ery quarter of the year Check here.			
Part 4: May we s	· · · · ·							
for details.	Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.							
Yes. Design	Yes. Designee's name and phone number							
Selec	t a 5-digit Person	al Identificat	ion Number (PIN	I) to use when talk	king to the 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 statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.								
Print your								
Sign ye					name here			
name I	nere				Print your title here			
					(			
	Date/	/			Best daytime phone			
Paid preparer's	use only				Check if you are self-employed			
Preparer's name					Preparer's SSN/PTIN			
Preparer's signature					Date / /			
Firm's name (or yours if self-employed)					EIN			
Address					Phone ( ) –			
City				State	ZIP code			

# Form 941-V, Payment Voucher

#### **Purpose of Form**

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 the quarter (line 10 on Form 941) are less than \$2,500 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 deposit your payment at an authorized financial institution or by using the Electronic Federal Tax Payment System (EFTPS). 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, apply for one on Form SS-4, Application for Employer Identification Number, and 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 capsule identifying the quarter for which the payment is made. Darken only one capsule.

**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.



### ▼ Detach Here and Mail With Your Payment and Form 941.



E 941 - V  Department of the Treasury Internal Revenue Service  ▶ Do		Payment Voucher	OMB No. 1545-0029		
		not staple this voucher or your payment to Form 941.		2009	
Enter your employer identification number (EIN).		Enter the amount of your payment. ▶	lars	Cents	
3 Tax period	<b>⊘</b> 3rd	4 Enter your business name (individual name if sole proprietor).			
Quarter	Quarter	Enter your address.			
2nd Quarter	O 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. This form is used to determine the amount of the taxes that you owe. Section 6011 requires you to provide the requested information if the tax is applicable to you. Section 6109 requires filers and paid preparers to provide their identifying numbers. If you fail to provide this information in a timely manner, 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 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		12 hr., 39 min.
Learning about the law or the form		40 min.
Preparing the form	i.	1 hr., 49 min.
Copying, assembling, and sending the form to the IRS		16 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 write to: Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. **Do not** send Form 941 to this address. Instead, see *Where Should You File?* on page 4 of the Instructions for Form 941.



#### **DealExtreme Invoice**

**Invoice / Order:** 130521001048213678

**Date:** 5/21/2013 12:35:15 AM

Payment (TXD): USD

**Status:** Payment Confirmed

To: Jose Valencia Fontecha

KR 25-64B S 16, Barrio Candelaria la nueva,

111941

Bogota, Bogota D.C., CO

57 1 7156074

#### **Items Sold:**

SKU	Product or Service Name	Quantity	Price
158428	3D Lizard Style Aluminum Alloy Car Decoration Sticker - Silver	10	3.50
135051	Car Vehicle Safety Reflective Stickers - Red (Size-L / Pair)	20	1.80
127389	3D Eagle Style Car Decorative Sticker - Silver	10	10.20
200866	YB032101 Reflective Car Body Marking Stickers - Silver + Red	2	24.40
199300	Decorative Flying Eagle Style Sticker for Motorcycle / Car - Black + Brown + Blue (3 PCS)	10	2.60

Tracking Number: Goods Total: 247.80

+ Shipping Fee: 0.00

+ Handling Fee: 0.00

+ Insurance Amount: 0.00

- Discount: 0.00

Grant Total: 247.80

**Note:** for maximum savings, shipping costs are calculated based on items in your shopping cart. 1 cent

may be added to larger orders to allow air mail tracking features in PayPal.