Form **941-X**: Adjusted Employer's QUARTERLY Federal Tax Return or Claim for Refund

Department of the Treasury — Internal Revenue Service

OMB No. 15 (Rev. April 2022 OMB No. 1545-0029 **Employer identification number** Return You're Correcting... (EIN) 73-1725071 Check the type of return you're correcting. Name (not your trade name) DAVID ANTHONY SALON LLC X 941 941-SS Trade name (if any) Check the ONE quarter you're correcting. Address 4025 E CHANDLER BLVD STE 9 1: January, February, March Street Suite or room number 2: April, May, June PHOENIX 85048 City State ZIP code 3: July, August, September 4: October, November, December Foreign country name Foreign province/county Foreign postal code Read the separate instructions before completing this form. Use this form to correct errors you Enter the calendar year of the made on Form 941 or 941-SS. Use a separate Form 941-X for each quarter that needs quarter you're correcting. correction. Type or print within the boxes. You MUST complete all five pages. Don't attach this 2020 (YYYY) form to Form 941 or 941-SS unless you're reclassifying workers; see the instructions for line 42. Part 1: Select ONLY one process. See page 6 for additional guidance, including information on how to treat employment tax credits and social security tax deferrals. Enter the date you discovered errors. Adjusted employment tax return. Check this box if you underreported tax amounts. 05/15/2023 Also check this box if you overreported tax amounts and you would like to use the adjustment process to correct the errors. You must check this box if you're correcting (MM / DD / YYYY) both underreported and overreported tax amounts on this form. The amount shown on line 27, if less than zero, may only be applied as a credit to your Form 941, Form 941-SS, or Form 944 for the tax period in which you're filing this form. 2. Claim. Check this box if you overreported tax amounts only and you would like to use the claim process to ask for a refund or abatement of the amount shown on line 27. Don't check this box if you're correcting ANY underreported tax amounts on this form. Part 2: Complete the certifications. 3. I certify that I've filed or will file Forms W-2, Wage and Tax Statement, or Forms W-2c, Corrected Wage and Tax Statement, as required. Note: If you're correcting underreported tax amounts only, go to Part 3 on page 2 and skip lines 4 and 5. If you're correcting overreported tax amounts, for purposes of the certifications on lines 4 and 5, Medicare tax doesn't include Additional Medicare Tax. Form 941-X can't be used to correct overreported amounts of Additional Medicare Tax unless the amounts weren't withheld from employee wages or an adjustment is being made for the current year. If you checked line 1 because you're adjusting overreported federal income tax, social security tax, Medicare tax, or Additional Medicare Tax, check all that apply. You must check at least one box. I certify that: I repaid or reimbursed each affected employee for the overcollected federal income tax or Additional Medicare Tax for the current year and the overcollected social security tax and Medicare tax for current and prior years. For adjustments of employee social security tax and Medicare tax overcollected in prior years, I have a written statement from each affected employee stating that he or she hasn't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection. The adjustments of social security tax and Medicare tax are for the employer's share only. I couldn't find the affected employees or each affected employee didn't give me a written statement that he or she hasn't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection. The adjustment is for federal income tax, social security tax, Medicare tax, or Additional Medicare Tax that I didn't withhold from employee wages. If you checked line 2 because you're claiming a refund or abatement of overreported federal income tax, social security tax, Medicare tax, or Additional Medicare Tax, check all that apply. You must check at least one box. I certify that: I repaid or reimbursed each affected employee for the overcollected social security tax and Medicare tax. For claims of employee social security tax and Medicare tax overcollected in prior years, I have a written statement from each affected employee stating that he or she hasn't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection. I have a written consent from each affected employee stating that I may file this claim for the employee's share of social security tax and Medicare tax. For refunds of employee social security tax and Medicare tax overcollected in prior years, I also have a written statement from each affected employee stating that he or she hasn't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection. X c. The claim for social security tax and Medicare tax is for the employer's share only. I couldn't find the affected employees, or each affected employee didn't give me a written consent to file a claim for the employee's share of social security tax and Medicare tax, or each affected employee didn't give me a written statement that he or she hasn't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection. d. The claim is for federal income tax, social security tax, Medicare tax, or Additional Medicare Tax that I didn't withhold from employee wages.

employee retention credit* (Form 941 or 941-SS, line 11c) Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 11d) 18c. Nonrefundable portion of COBRA premium assistance credit (Form 941 or 941-SS, line 11e) 18d. Number of individuals provided COBRA premium assistance (Form 941 or 941-SS, line 11f) 19. Special addition to wages for federal income tax See instructions (5,855.96) See inst	Dar	19. Entendhe come time for the			1.0 2/20	0,1		2020	
Total connected amount for ALL employees and amount is a negative number. 6. Wages, tips, and other compensation (Form 641, line 2) 7. Federal income tax withheld compensation (Form 641, line 2) 8. Taxable social security wages (Form 841 or 941-SS, line 58) 9. Qualified sick is save wages* (Form 841 or 941-SS, line 58) 10. Qualified sick is save wages* (Form 841 or 941-SS, line 58) 10. Qualified sine is leave the same and the	Par	Enter the corrections for ti		line (ve it			
## anount for ALL employees Proported or as					Column 2		Column 3		Column 4
6. Wages, tips, and other compensation (Form 941, line 2) 7. Federal income tax withheld from wages, tips, and other compensation (Form 941, line 3) 8. Taxable social security wages (Form 941 or 941-5S, line 56), Column 1) 9. Qualified sick leave wages (Form 941 or 941-5S, line 56), Column 1) 10. Qualified family leave wages (Form 941 or 941-5S, line 56)), Column 1) 11. Taxable social security tips (Form 941 or 941-5S, line 56)), Column 1) 12. Taxable wages a tips (Form 941 or 941-5S, line 56), Column 1) 13. Taxable social security tips (Form 941 or 941-5S, line 50), Column 1) 14. Saction 3121(g) Notice and Salt wages (Form 941 or 941-5S, line 50), Column 1) 15. Taxable wages a tips (Form 941 or 941-5S, line 50), Column 1) 16. Salt wages a tips (Form 941 or 941-5S, line 50), Column 1) 17. Taxable wages a tips (Form 941 or 941-5S, line 50), Column 1) 18. Taxable wages a tips (Form 941 or 941-5S, line 50), Column 1) 19. Salt wages a tips (Form 941 or 941-5S, line 50), Column 1) 19. Taxable wages a tips (Form 941 or 941-5S, line 50), Column 1) 19. Taxable wages a tips (Form 941 or 941-5S, line 50), Column 1) 19. Taxable wages a tips (Form 941 or 941-5S, line 50), Column 1) 19. Taxable wages a tips (Form 941 or 941-5S, line 50), Column 1) 19. Taxable wages a tips (Form 941 or 941-5S, line 50), Column 1) 19. Taxable wages a tips (Form 941 or 941-5S, line 50), Column 1) 19. Taxable wages a tips (Form 941 or 941-5S, line 10), Column 10 or 941-5S, line 50, Column 941 or 941-5S, line 50, C			amount (for ALL	_	reported or as previously corrected	=	(If this amount is a negative number,		Tax correction
from wages, tips, and other compensation (Form 941, line 3) 8. Taxable social security wages (Form 941 or 941-SS, line 5a),	6.] –] =			
Column 1	7.	from wages, tips, and other] _] =			
# you're correcting your employer thate only, use 0.002. See instructions.	8.	(Form 941 or 941-SS, line 5a,] _] =		× 0.124*=	
Form 941 or 941-SS, line 5a(i)	9.			,			If you're correcting your em	ployer share only,	use 0.062. See instructions.
Column 1		(Form 941 or 941-SS, line 5a(i),	*Lies line 9 only for available	_				× 0.062 =	
Form 941 or 941-SS, line 50, Column 1	40		Ose line 9 only for qualifi	ed sick	leave wages paid after Marc	ch 31, 2	2020, for leave taken before	April 1, 2021.	
11. Taxable social security tipe (Form 941 or 941-SS, line 50, Column 1)	10.	(Form 941 or 941-SS, line 5a(ii),	*Lies line 10 only for quali	_				× 0.062 =	
12. Taxable Medicare wages & tips (Form 941 or 941-SS, line 56, Column 1)	44	Tamable as also as also as also	Ose line to only for quali	ieu iain	ily leave wages paid after iv	arch 3	1, 2020, for leave taken befo	ore April 1, 2021.	
1. Sarbie Medicare Wages & tips (climin to Michael Wages)	11.	941 or 941-SS, line 5b, Column 1)		_		1			
941 or 941-SS, line 50, Column 1) 13. Taxable wages & tips subject to Additional Medicare Tax withholding (Form 941 or 941-SS, line 50) 14. Section 3121(a) Notice and Demand—1 and due on 1941-SS, line 50) 15. Tax adjustments (Form 941 or 941-SS, line 50) 16. Qualified small business payroll tax activities (Form 941 or 941-SS, line 50) 17. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken perfore April 1, 2021 (Form 941 or 941-SS, line 110) 18a. Nonrefundable portion of credit (Form 941 or 941-SS, line 110) 18b. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 2021 (Form 941 or 941-SS, line 110) 18c. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 2021 (Form 941 or 941-SS, line 110) 18c. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 2021 (Form 941 or 941-SS, line 110) 18c. Nonrefundable portion of CoBRA premium assistance credit (Form 941 or 941-SS, line 110) 18c. Nonrefundable portion of CoBRA premium assistance credit (Form 941 or 941-SS, line 110) 18c. Nonrefundable portion of CoBRA premium assistance credit (Form 941 or 941-SS, line 110) 18c. Nonrefundable portion of CoBRA premium assistance credit (Form 941 or 941-SS, line 110) 18c. Nonrefundable portion of CoBRA premium assistance (Form 941 or 941-SS, line 110) 18d. Number of individuals provided (COBRA premium assistance credit (Form 941 or 941-SS, line 110) 18d. Number of individuals provided (COBRA premium assistance redit (Form 941 or 941-SS, line 110) 18d. Number of individuals provided (COBRA premium assistance) 18d. Nu	12.	Taxable Medicare wages & tips (Form		ı		1	If you're correcting your em	ployer share only, ι 1	use 0.062. See instructions.
Sax		941 or 941-SS, line 5c, Column 1)		_			Vou're correcting your own		
withholding (Form 941 or 941-SS, line 11) 14. Section 3121(q) Notice and Demand—Tax due on unreported tips (Form 941 or 941-SS, line 51) 15. Tax adjustments (Form 941 or 941-SS, line 51) 16. Qualified small business payroll tax credit for increasing research activities (Form 941 or 941-SS, line 11) 17. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021 (Form 941 or 941-SS, line 11) 18a. Nonrefundable portion of credit (Form 941 or 941-SS, line 11) 18b. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 11) 18c. Nonrefundable portion of Credit for qualified sick and family leave wages for leave taken after March 31, 2021 (Form 941 or 941-SS, line 11) 18c. Nonrefundable portion of Credit (Form 941 or 941-SS, line 11) 18d. Number of individuals provided COBRA premium assistance credit (Form 941 or 941-SS, line 11) 18d. Number of individuals provided COBRA premium assistance credit (Form 941 or 941-SS, line 11) 19. Special addition to wages for leave taken after March 31, 2021 (Form 941 or 941-SS, line 11) 19. Special addition to wages for federal income tax 20. Special addition to wages for Medicare taxes 21. Special addition to wages for Medicare taxes 22. Special addition to wages for Medicare taxes 23. Special addition to wages for Medicare taxes 24. Special addition to wages for Medicare taxes	13.	Taxable wages & tips subject to				1	you're conecting your emp	loyer snare only, us	Se 0.0145. See instructions.
Demand—Tax due on unreported tips (Form 941 or 941-SS, line 5)		withholding (Form 941 or		_	* Certain wages		s reported in Column 3 short		by 0.009. See instructions.
941-SS, lines 7 through 9) 16. Qualified small business payroll tax credit for increasing research activities (Form 941 or 941-SS, line 111) 17. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken before April 1, 2021 (Form 941 or 941-SS, line 110) 18a. Nonrefundable portion of credit (Form 941 or 941-SS, line 110) 18b. Nonrefundable portion of credit or qualified sick and family leave wages for leave taken after March 31, 2020, and before January 1, 2022. 18b. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 110) 18c. Nonrefundable portion of COBRA premium assistance credit (Form 941 or 941-SS, line 110) 18c. Nonrefundable portion of COBRA premium assistance credit (Form 941 or 941-SS, line 110) 18d. Number of individuals provided COBRA premium assistance (Form 941 or 941-SS, line 110) 19. Special addition to wages for federal income tax 20. Special addition to wages for social security taxes 21. Special addition to wages for Medicare taxes 22. Special addition to wages for Medicare taxes 23. Special addition to wages for Medicare taxes 24. Special addition to wages for Medicare taxes 25. Special addition to wages for Medicare taxes 26. Special addition to wages for Medicare taxes 27. Special addition to wages for Medicare taxes 28. Special addition to wages for Medicare taxes 29. Special addition to wages for Medicare taxes 20. Special addition to wages for Medicare taxes 21. Special addition to wages for Medicare taxes 22. Special addition to wages for Medicare taxes 23. Special addition to wages for Medicare taxes 24. Special addition to wages for Medicare taxes 25. Special addition to	14.	Demand—Tax due on unreported tips (Form 941 or		-		=			
credit for increasing research activities (Form 941 or 941-SS, line 11a; you must attach Form 8974) 17. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken before April 1, 2021 (Form 941 or 941-SS, line 11b) 18a. Nonrefundable portion of employee retention credit* (Form 941 or 941-SS, line 11c) 18b. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 11d) 18c. Nonrefundable portion of COBRA premium assistance credit (Form 941 or 941-SS, line 11d) 18c. Nonrefundable portion of COBRA premium assistance credit (Form 941 or 941-SS, line 11d) 18c. Nonrefundable portion of COBRA premium assistance credit (Form 941 or 941-SS, line 11d) 18d. Number of individuals provided COBRA premium assistance (Form 941 or 941-SS, line 11e) 19. Special addition to wages for federal income tax 20. Special addition to wages for social security taxes 21. Special addition to wages for Medicare taxes 22. Special addition to wages for Medicare taxes 23. Special addition to wages for Medicare taxes 24. Special addition to wages for Medicare taxes 25. Special addition to wages for Medicare taxes 26. Special addition to wages for Medicare taxes 27. Special addition to wages for Medicare taxes 28. Special addition to wages for Medicare taxes 29. Special addition to wages for Medicare taxes 20. Special addition to wages for Medicare taxes 21. Special addition to wages for Medicare taxes 22. Special addition to wages for Medicare taxes 23. Special addition to wages for Medicare taxes 24. Special addition to wages for Medicare taxes 25. Special addition to wages for Medicare taxes 26. Special addition to wages for Medicare taxe	15.	Tax adjustments (Form 941 or 941-SS, lines 7 through 9)		_		=			
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employee retention credit* (Form 941 or 941-SS, line 11c) Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 11d) 18c. Nonrefundable portion of COBRA premium assistance credit (Form 941 or 941-SS, line 11e) 18d. Number of individuals provided COBRA premium assistance (Form 941 or 941-SS, line 11f) 19. Special addition to wages for federal income tax 20. Special addition to wages for social security taxes 21. Special addition to wages for Medicare taxes 5,855.96 0.00 5,855.96 5,855.96 5,855.96 5,855.96 5,855.96 5,855.96 5,855.96 5,855.96 5,855.96 5,855.96 1. See instructions (5,855.96) 1. See instructions	17.	for qualified sick and family leave wages for leave taken before April 1, 2021 (Form 941		-		=			
18b. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 11d) 18c. Nonrefundable portion of COBRA premium assistance credit (Form 941 or 941-SS, line 11e) 18d. Number of individuals provided COBRA premium assistance (Form 941 or 941-SS, line 11f) 19. Special addition to wages for federal income tax 20. Special addition to wages for social security taxes 21. Special addition to wages for Medicare taxes 18d. Nonrefundable portion of COBRA premium assistance (Form 941 or 941-SS, line 11f) 19. Special addition to wages for social security taxes 10. Special addition to wages for social security taxes 11. Special addition to wages for Medicare taxes	18a.	employee retention credit*		-			5,855.96	instructions	(5,855.96)
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premium assistance credit (Form 941 or 941-SS, line 11e) 18d. Number of individuals provided COBRA premium assistance (Form 941 or 941-SS, line 11f) 19. Special addition to wages for federal income tax 20. Special addition to wages for social security taxes 21. Special addition to wages for Medicare taxes See instructions 22. Special addition to wages for Medicare taxes See See See See See		qualified sick and family leave wages for leave taken after March 31, 2021, and before October 1.		-	•	=	· .	See instructions	
COBRA premium assistance (Form 941 or 941-SS, line 11f) 19. Special addition to wages for federal income tax 20. Special addition to wages for social security taxes 21. Special addition to wages for Medicare taxes 22. Special addition to wages for Medicare taxes	18c.	premium assistance credit	.]	-		=			
federal income tax 20. Special addition to wages for social security taxes 21. Special addition to wages for Medicare taxes 22. Special addition to wages for Medicare taxes	18d.	COBRA premium assistance		- [·	=			
20. Special addition to wages for social security taxes = See instructions = See See See	19.	Special addition to wages for federal income tax		- [.]	=			
21. Special addition to wages for See	20.	Special addition to wages for social security taxes		- [=		See	
	21.	Special addition to wages for Medicare taxes		- [= [See	

Name	(not your trade name)				Employer ide	ntifica	ation number (EIN)	Correctir	g quarter 2 (1, 2, 3, 4)
								Correction	ng calendar year (YYYY)
DAVID ANTHONY SALON LLC				73-1725071			2020		
Par	t 3: Enter the corrections for t		line	doesn	t apply, lea	ve it	blank. (continued)		
		Column 1			Column 2		Column 3		Column 4
		Total corrected amount (for ALL employees)	_	reporte	nt originally ed or as usly corrected L employees)	=	Difference (If this amount is a negative number, use a minus sign.)		Tax correction
22.	Special addition to wages for Additional Medicare Tax] –] =		See instructions	
23.	Combine the amounts on lines 7 th	rough 22 of Column 4	1.						(5,855.96)
24.	Deferred amount of social security tax* (Form 941 or 941-SS, line 13b)	* Use this line to correct the e	_ mployer	deferral for	the second quarter	of 2020	and the employer and employe	See instructions ee deferral for the	third and fourth quarters of 2020.
25.	Refundable portion of credit for qualified sick and family leave wages for leave taken before April 1, 2021 (Form 941 or 941- SS, line 13c)] –		•	=		See instructions	
26a.	Refundable portion of employee retention credit* (Form 941 or 941-SS, line 13d)	4,544.04 *Use line 26a only for correcti	ons to q	quarters beç	0 · 0 0	=	4 , 5 4 4 . 0 4 and before January 1, 2022.	See instructions	(4,544.04)
26b.	Refundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 13e)		-			=		See instructions	
26c.	Refundable portion of COBRA premium assistance credit (Form 941 or 941-SS, line 13f)		-			=		See instructions	
27.	Total. Combine the amounts on line If line 27 is less than zero: If you checked line 1, this is the filling this form. (If you're curre If you checked line 2, this is the If line 27 is more than zero, the pay, see Amount you owe in the	ne amount you want a ently filing a Form 944 ne amount you want ro is is the amount you	ipplie , Emp efund	d as a coloyer's led or al	ANNUAL Fed pated.	eral T	ax Return, see the in	structions.)	
28.	Qualified health plan expenses allocable to qualified sick leave wages for leave taken before April 1, 2021 (Form 941 or 941- SS, line 19)		_		ŀ	=			
29.	Qualified health plan expenses allocable to qualified family leave wages for leave taken before April 1, 2021 (Form 941 or 941-SS, line 20)		-		.]	=			
30.	Qualified wages for the employee retention credit* (Form 941 or 941-SS, line 21)	17,468.10 * Use line 30 only for correction	— ns to qua	arters begin	0.00	= 2020, a	17,468.10 and before January 1, 2022.		
31a.	Qualified health plan expenses for the employee retention credit* (Form 941 or 941-SS, line 22)	* Use line 31a only for correctio	—	ıarters begi	nning after March 3	= [and before January 1, 2022.		
31b.	Check here if you're eligible for solely because your business is a	the employee retent recovery startup bu	ion c	redit in	the third or	four	th quarter of 2021		
32.	Credit from Form 5884-C, line 11, for this quarter* (Form 941 or		_			= [
		* Use line 32 only for correct	ions to	quarters t	peginning after Ma	rch 31	2020, and before April 1, 20	21	

Name (not your trade name)				Employer ide	ntifica	ation number (EIN)	Correcting quarter 2	(1, 2, 3, 4)
D 7							Correcting calendar	year (YYYY)
	ID ANTHONY SALON LLC			73-17250	71		2020	
Part	3: Enter the corrections for t	his quarter. If any I	ine (doesn't apply, leav	ve it	blank. (continued)		
		Column 1		Column 2		Column 3		
		Total corrected amount (for ALL employees)	_	Amount originally reported or as previously corrected (for ALL employees)	=	Difference (If this amount is a negative number, use a minus sign.)		
33a.	Qualified wages paid March 13 through March 31, 2020, for the employee retention credit* (Form 941 or 941-SS, line 24)	3, 331.90 *Use line 33a only for corre	 ections	0 . 0	= 20.	3,331.90		
33b.	Deferred amount of the employee share of social security tax included on Form 941 or 941-SS, line 13b* (Form 941 or 941-SS, line 24)	*Use line 33b only for corre	— ections	to the third and fourth quart	= ters of :	. 2020.		
34.	Qualified health plan expenses allocable to wages reported on Form 941 or 941-SS, line 24* (Form 941 or 941-SS, line 25)	*Use line 34 only for correct	— tions t	o the second quarter of 2020) = 0.			
Cautio	on: Lines 35-40 apply only to quarter	s beginning after Marc	h 31	2021				
35.	Qualified sick leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 23)		_		=			
36.	Qualified health plan expenses allocable to qualified sick leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 24)		-		=			
37.	Amounts under certain collectively bargained agreements allocable to qualified sick leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 25)				=			
38.	Qualified family leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941- SS, line 26)	.]	_		=			
39.	Qualified health plan expenses allocable to qualified family leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 27)	.]	-		=			
40.	Amounts under certain collectively bargained agreements allocable to qualified family leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941- SS, line 28)		-		=			

Name (not your trade i	name)	Employer ident	ification number (EIN	
DAVID ANTHON	IY SALON LLC	73-172507	1	Correcting calendar year (YYYY)
Part 4: Explain	your corrections for this quarter.	1/3 1/2307	1	2020
X 41. Check your und 42. Check I 43. You mu This is	here if any corrections you entered on a line includerreported and overreported amounts on line 43. here if any corrections involve reclassified workers ast give us a detailed explanation of how you determ to apply for the Employee Retent ded on line 33a.	s. Explain on line 43	tions. See the inst	ported amounts. Explain both ructions.
Under penalties of praccompanying schedaxpayer) is based or Sign y name	Date	orm 041 CC and the	Print your name here Print your title here Best daytime pho	e. Declaration of preparer (other than
Paid Preparer Us			Check if yo	u're self-employed
Preparer's name	Zachary Ormsby	PTIN	P02158084	
Preparer's signature	Justin		Date	05/23/2023
Firm's name (or yours if self-employed)	Pinnacle Minds, Inc.		EIN	27-0133034
Address	350 N Lantana St Suite #229		Phone	(805) 836-9009
City	Camarillo	State CA	ZIP code	93010