## Form 944-X: Adjusted Employer's ANNUAL Federal Tax Return or Claim for Refund (January 2009) Department of the Treasury — Internal Revenue Service OMB No. 1545-2007

OMB No. 1545-2007

Employer	Identification Number (EIN)	Return You Are Correcting								
Name (not	your trade name)	Check the type of return you are correcting								
Trade nam	ne (if any)	944								
Address		944-SS								
Address	Number Street Suite or room number	Enter the calendar year of the return you are correcting:								
	Number Street Suite of footh number	(YYYY)								
	City State ZIP code									
Use this	form to correct errors made on Form 944 or Form 944-SS, Employer's ANNUAL Federal	Enter the date you discovered error								
Tax Return, for <b>one year only</b> . Please type or print within the boxes. Do not attach this form to Form 944 or Form 944-SS. <b>You MUST complete all three pages. Read the instructions before you complete this form.</b>										
Part 1:	Select ONLY one process.									
1.	<b>Adjusted employment tax return.</b> Check this box if you underreported amounts. Also check th would like to use the adjustment process to correct the errors. You must check this box if you ar overreported amounts on this form. The amount shown on line 17, if less than 0, may only be ap 941-SS, Form 944, or Form 944-SS for the tax period in which you are filing this form.	e correcting both underreported and								
2.	Claim. Check this box if you overreported amounts only and you would like to use the claim programount shown on line 17. Do not check this box if you are correcting ANY underreported amounts.									
Part 2:	Complete the certifications.									
3.	I certify that I have filed or will file Forms W-2, Wage and Tax Statement, or Forms W-2c, or required.	Corrected Wage and Tax Statement, as								
Note: If y	rou are correcting underreported amounts only, go to Part 3 (Skip lines 4 and 5).									
4.	If you checked line 1 because you are adjusting overreported amounts, check all that apply. (Check at least one.) I certify that:									
	a. I repaid or reimbursed each affected employee for the overcollected federal income tax for the current year and the overcollected social security and Medicare tax for current and prior years. For adjustments of employee social security and Medicare tax overcollected in prior years, I have a written statement from each employee stating that he or she has not claimed (or the claim was rejected) and will not claim a refund or credit for the overcollection.									
	<b>b.</b> the adjustment of social security tax and Medicare tax is for the employer's share of employees or each employee did not give me a written statement that he or she has rejected) and will not claim a refund or credit for the overcollection.									
	c. the adjustment is for federal income tax, social security tax, and Medicare tax that I	did not withhold from employee wages.								
5.	If you checked line 2 because you are claiming a refund or abatement of overreported em (Check at least one.)	ployment taxes, check all that apply.								
	I certify that:									
	<ul> <li>a. I repaid or reimbursed each affected employee for the overcollected social security employee social security and Medicare tax overcollected in prior years, I have a wri- stating that he or she has not claimed (or the claim was rejected) and will not claim</li> </ul>	itten statement from each employee								
	b. I have a written consent from each affected employee stating that I may file this cla security and Medicare tax. For refunds of employee social security and Medicare ta have a written statement from each employee stating that he or she has not claime not claim a refund or credit for the overcollection.	x overcollected in prior years, I also								
	c. the claim for social security tax and Medicare tax is for the employer's share only. I employees; or each employee did not give me a written consent to file a claim for the security and Medicare tax; or each employee did not give me a written statement the claim was rejected) and will not claim a refund or credit for the overcollection.	ne employee's share of social								
	<b>d</b> . the claim is for federal income tax, social security tax, and Medicare tax that I did n	ot withhold from employee wages.								

## 3: Enter the corrections for this year. If any line does not apply, leave it blank.

Draft	Column 1  Total corrected amount (For ALL employees)	_	Column 2  Amount originally reported or as previously corrected (For ALL employees)	=	Column 3  Difference (If this amount is a negative number, use a minus sign.)		Column 4  Tax correction	
6. Wages, tips and other compensation (from line 1 of Form 944)		_		=			ount in Column 1 when you r Forms W-2 or Forms W-2c.	
7. Income tax withheld from wages, tips, and other compensation (from line 2 of Form 944)		]_		=		Copy Column 3 here ►►		
8. Taxable social security wages (from line 4a, Column 1 of Form 944 or Form 944-SS)		-	·	=		X .124* =		
9. Taxable social security tips (from line 4b, Column 1 of Form 944 or Form 944-SS)		]-		=	*If you are correcting your employ  Let you are correcting your employ  *If you are correcting your employ	X .124* =		
10. Taxable Medicare wages and tips (from line 4c, Column 1 of Form 944 or Form 944-SS)		_		=	*If you are correcting your employ	X .029* =		
11. Tax adjustments (from lines 6a through 6c of Form 944 or Form 944-SS)		]-		=		Copy Column 3 here ▶▶		
12. Special addition to wages for federal income tax		_		=		See instructions	·	
13. Special addition to wages for social security taxes		]-		=		See instructions		
14. Special addition to wages for Medicare taxes		_		=		See instructions	·	
15. Subtotal: Combine the amounts in lines 7–14 of Column 4								
16. Advance earned income credit (EIC) payments made to employees (from line 8 of Form 944)		_		=		See instructions	·	
17. Total: Combine the amounts in lines 15	and 16 of Column 4							

## If line 17 is less than 0...

- If you checked line 1, this is the amount you want applied as a credit to your Form 944 or Form 944-SS for the tax period in which you are filing this form.
- If you checked line 2, this is the amount you want refunded or abated.

If line 17 is more than 0, this is the amount you owe. Pay this amount when you file this return. Go to Amount You Owe on page X of the instructions.

Next **→** 

Name (not your trade name	<del>)</del>	Employer Identification Number (EIN) Calendar Yea										
4: Explain your c	orrections for this year.											
18. Check here if any corrections you entered on a line include both underreported and overreported amounts. Explain both your underreported and overreported amounts on line 20.												
19. Check here if an	19. Check here if any corrections involve reclassified workers. Explain on line 20.											
20. You must give u	e us a detailed explanation of how you determined your corrections. (See the instructions.)											
	must complete all three pages of this fo	-										
any schedules or statement	I declare that I have filed an original Form 944 or F is that are attached, and to the best of my knowled	dge and belief, they are true, corr	mined this adjusted ect, and complete. I	return or claim and Declaration of								
preparer (other than taxpay	er) is based on all information of which preparer h											
Sign your name here		Print your name here										
name nere		Print your										
		title here										
Date	/ /	Best daytime phone	( )									
Paid preparer's use only	1	Check if you are	e self employed									
Preparer's name		Preparer's SSN	/PTIN									
Preparer's signature		Date	/	/								
Firm's name (or yours		EIN										
if self-employed												
Address		Phone	( )									
City	State	ZIP code										

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## Form 944-X: Which process should you use? Type of errors you are correcting Underreported Use the adjustment process to correct underreported amounts. amounts Check the box on line 1. **ONLY** Pay the amount you owe from line 17 when you file Form 944-X. Overreported If you are filing Form 944-X Choose either process to correct the overreported amounts. The process you amounts use depends on MORE THAN 90 days before ONLY when you file the period of limitations on Choose the adjustment process if you want the amount shown Form 944-X. credit or refund for Form 944 on line 17 credited to your Form 944, 944-SS, 941, or Form 941or Form 944-SS expires ... SS for the period in which you file Form 944-X. Check the box on OR Choose the claim process if you want the amount shown on line 17 refunded to you or abated. Check the box on line 2. If you are filing Form 944-X You must use the claim process to correct the overreported amounts. Check the box on line 2. WITHIN 90 DAYS of the expiration of the period of limitations on credit or refund for Form 944 or Form 944-SS ... Choose either the adjustment process or both the adjustment **BOTH** If you are filing Form 944-X The process you process and the claim for refund process when you correct both underreported use depends on MORE THAN 90 days before underreported and overreported amounts. when you file the period of limitations on overreported Form 944-X. credit or refund for Form 944 or Form 944-SS expires ... amounts Choose the adjustment process if combining your underreported and overreported amounts results in a balance due or creates a credit that you want applied to Form 944, 944-SS, 941, or 941-SS. File one Form 944-X, and Check the box on line 1 and follow the instructions on line 17. Choose both the adjustment process and the claim process if you want the overreported amount refunded to you or abated. File two separate forms. **1. For the adjustment process**, file one Form 944-X to correct the underreported amounts. Check the box on line 1. Pay the amount you owe from line 17 when you file Form 944-X. 2. For the claim process, file a second Form 944-X to correct the overreported amounts. Check the box on line 2.

If you are filing Form 944-X WITHIN 90 DAYS of the expiration of the period of limitations on credit or refund for Form 944 or Form 944-SS...

You must use **both** the adjustment process and claim process.

File two separate forms.

- 1. For the adjustment process, file one Form 944-X to correct the underreported amounts. Check the box on line 1. Pay the amount you owe from line 17 when you file Form 944-X.
- 2. For the claim for refund process, file a second Form 944-X to correct the overreported amounts. Check the box on line 2.