(Rev. February 2009)	Department of the Treasury - Ir	nternal Revenue Service	OMB No. 1545-00
(EIN) Employer identification number			Report for this Quarter (Check one.)
Name (not your trade name)			1: January, February, March
Calendar year		(Also check quarter)	2: April, May, June
			3: July, August, September
			4: October, November, December

(or Form 941-SS), DO NOT change your tax liability by adjustments reported on any Forms 941-X. You must fill out this form and attach it to Form 941 (or Form 941-SS) if you are a semiweekly schedule depositor or became one because your accumulated tax liability on any day was \$100,000 or more. Write your daily tax liability on the numbered space that corresponds to the date wages were paid. See Section 11 in

			_			_	•			-	Tax liability for Month 1
		=	9		 1	17		25	<u> </u>		
	•	= 1	0	-	— 1	8	•	26	6		-
		1	1		1	9		27	7		
		1	2		2	20	•	28	3		
		1	3		2	21		29	9		
	•	1	4		2	22	•	30		•	
		1	5			23		31		•	
	•					24	•				_
th 2			6		2	24					
			9			17		25			Tax liability for Month 2
	-										
			0			8	•	26		-	<u>-</u>
	•	= 1	1	-	1	9	•	27	7	•	
	•	1	2	-	2	20	•	28	3	-	
	•	_ 1	3	-	2	21	•	29		•	
	•	1	4		2	22	•	30		•	
		1	5	•	2	23	•	31	1	•	
	•	1	6	•	2	24	•				
th 3											
			9		1	17		25	5		Tax liability for Month 3
		1	0		-	8		26	3	•	
			1			9		27			•
			2			20		28			
	-	1	3	-	2	21	•	29			
	•	1	4	•	2	22	•	30		•	
	•	_ 1	5		2	23	•	31	1		
		1	6		2	24	•				