## Form 944 for 2009: Employer's ANNUAL Federal Tax Return

Department of the Treasury — Internal Revenue Service OMB No. 1545-2007 Employer identification number (EIN) Name (not your trade name) Trade name (if any) Address Suite or room number Number State ZIP code

### Who Must File Form 944

You must file annual Form 944 instead of filing quarterly Forms 941 only if the IRS notified you in writing.

Read	d the separate instructions before you complete Form 944. Type or print within the boxes.	<u> </u>					
Р	art 1: Answer these questions for 2009.						
1	Wages, tips, and other compensation						
2	Income tax withheld from wages, tips, and other compensation						
	If no wages, tips, and other compensation are subject to social security or Medicare tax 3 Check and go to line 5.						
4	Taxable social security and Medicare wages and tips:  Column 1  Column 2	7					
	4a Taxable social security wages × .124 =						
	4b Taxable social security tips × .124 =						
	4c Taxable Medicare wages & tips × .029 =						
	4d Total social security and Medicare taxes (Column 2, lines 4a + 4b + 4c = line 4d) 4d						
5	Total taxes before adjustments (lines 2 + 4d = line 5)	•					
6	Current year's adjustments (see instructions)						
7	Total taxes after adjustments. Combine lines 5 and 6						
8	Advance earned income credit (EIC) payments made to employees						
9	Total taxes after adjustment for advance EIC (line 7 – line 8 = line 9)						
10	Total deposits for this year, including overpayment applied from a prior year and overpayment applied from Form 944-X or Form 941-X	•					
11a	COBRA premium assistance payments (see instructions)						
11b	Number of individuals provided COBRA premium assistance reported on line 11a						
12	Add lines 10 and 11a						
13	<b>Balance due.</b> If line 9 is more than line 12, write the difference here. For information on how to pay, see the instructions						
14	Overpayment. If line 12 is more than line 9, write the difference here 14	Check one Apply to next return. Send a refund.					
	➤ You MUST complete both pages of Form 944 and SIGN it.						
		Next →					

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Department of the Treasury — Internal Revenue Service (77)

OMB No. 1545-2007

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	No. 1.	

Name (not your trade name	3)		Employer identification	number (EIN)
Part 2: Tell us ab	out your tax liability for 2009.			
15 Check one:	Line 9 is less than \$2,500. Go to Part 3.			
	Line 9 is \$2,500 or more. Enter your tax liability for \$100,000 or more of liability on any day during a during a during an Apr.			
15a	15d	_ 15g	_ 15	ij .
	Feb. May		Aug.	Nov.
15b	15e	_ 15h	_ 15	5k ■
	Mar. Jun.		Sep.	Dec.
150	15f	15i	<b>.</b> 15	51
Tot	al liability for year. Add lines 15a through 15l.	Total must equal line 9.	. 15m	
If ye	ou made deposits of taxes reported on this fo			where you
16 ma	de your deposits OR write MÛ if you made you	ur deposits in <i>multiple</i>	states.	_
Part 3: Tell us ab	out your business. If question 17 does NO	T apply to your busir	ness, leave it blank.	
17 If your business	has closed or you stopped paying wages			
Check here	e and enter the final date you paid wages.	/ /		
Part 4: May we s	peak with your third-party designee?			
Do you want to allow for details.	w an employee, a paid tax preparer, or another	person to discuss this I	return with the IRS? See	e the instructions
Yes. Designee's	name and phone number		( )	_
Select a 5-	digit Personal Identification Number (PIN) to use	e when talking to IRS.		
☐ No.				
Part 5: Sign here	. You MUST complete both pages of Form	944 and SIGN it.		
	ury, I declare that I have examined this return, including rrect, and complete. Declaration of preparer (other than			
			your e here	
Sign you				
		Print title	your here	
	Date / /	Best	: daytime phone	) –
Paid preparer's	use only	(	Check if you are self-en	nploved
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	

Page **2** Form **944** (2009)

## Form 944-V, Payment Voucher

### **Purpose of Form**

Complete Form 944-V, Payment Voucher, if you are making a payment with Form 944, Employer's ANNUAL 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 944**

To avoid a penalty, make your payment with your 2009 Form 944 **only if** one of the following applies.

- Your net taxes for the year (line 9 on Form 944) are less than \$2,500 and you are paying in full with a timely filed return.
- You already deposited the taxes you owed for the first, second, and third quarters of 2009, and the tax you owe for the fourth quarter of 2009 is less than \$2,500, and you are paying, in full, the tax you owe for the fourth quarter of 2009 with a timely filed return.
- 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 944-V to make federal tax deposits.

**Caution.** Use Form 944-V when making any payment with Form 944. However, if you pay an amount with Form 944 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 944.

**Box 3—Name and address.** Enter your name and address as shown on Form 944.

- Enclose your check or money order made payable to the "United States Treasury" and write your EIN, "Form 944," and "2009" on your check or money order. Do not send cash. Do not staple Form 944-V or your payment to Form 944 (or to each other).
- Detach Form 944-V and send it with your payment and Form 944 to the address provided in the Instructions for Form 944.

**Note.** You must also complete the entity information above Part 1 on Form 944.

## Detach Here and Mail With Your Payment and Form 944.

<u></u>						- 2
₽944-V			<b>Payment Voucher</b>		OMB No. 15	545-2007
Department of the Treasury Internal Revenue Service (77)  Do not staple this voucher or your payment to Form 944.		_	2009			
Enter your employer iden number (EIN).	tification		Enter the amount of your payment. ▶	Dol	llars	Cents
·			3 Enter your business name (individual name if sole proprietor).  Enter your address.  Enter your city, state, and ZIP code.			

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## **Specific Instructions**

- Enter on the voucher the amount paid with Form 944.
- Enclose your check or money order made payable to the "United States Treasury." Be sure also to enter your EIN, "Form 944," and "2009" on your check or money order. Do not send cash. Do not staple Form 944-V or your payment to Form 944 (or to each other).
- Detach Form 944-V and send it with your payment and Form 944 to the address in the Instructions for Form 944. Do not send a photocopy of Form 944-V because your payment may be misapplied or delayed.

If any of the preprinted information is incorrect, make changes on the top of Form 944, **not** on the payment voucher. If you change any of the preprinted information on the voucher, your payment may be misapplied or delayed.

Detach Here and Mail With Your Payment and Form 944.



OMB No. 1545-2007 2009

Form 944-V, Payment Voucher

Enter the amount of	Dollars	Cents
your payment		

#### Privacy Act and Paperwork Reduction Act Notice.

We ask for the information on this form 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 identification 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 944 will vary depending on individual circumstances. The estimated average time is:

Recordkeeping	12 hrs., 12 min.
Learning about the law or the form	40 min.
Preparing the form	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 944 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 944 to this address. Instead, see *Where Should You File?* on page 4 of the Instructions for Form 944.

