		er's QUARTERLY Federal Tax Retur the Treasury — Internal Revenue Service	n 950120 OMB No. 1545-0029
Empl	oyer identification number (EIN)		Report for this Quarter of 2020
Nan	ne (not your trade name)		Check one.) 1: January, February, March
INAII	le (not your trade name)		2: April, May, June
Trac	le name (if any)		3: July, August, September
Add	ress		4: October, November, December
	Number Street		o to www.irs.gov/Form941 for structions and the latest information.
	City	State ZIP code	
	Foreign country name	Foreign province/county Foreign postal code	
lead Part	<u> </u>	nplete Form 941. Type or print within the boxes.	
1	Number of employees who receive	d wages, tips, or other compensation for the pay	
	period including: June 12 (Quarter 2)), Sept. 12 (Quarter 3), or Dec. 12 (Quarter 4)	1
2	Wages, tips, and other compensation		2
3	Federal income tax withheld from wa	ages, tips, and other compensation	3
4	If no wages, tips, and other compens	sation are subject to social security or Medicare tax Column 1 Column 2	Check and go to line 6.
5a			
_	Taxable social security wages	× 0.124 =	
5a	Taxable social security wages (i) Qualified sick leave wages	× 0.124 =	
5a 5a			
_	(i) Qualified sick leave wages	× 0.062 = -	
5a	(i) Qualified sick leave wages (ii) Qualified family leave wages . Taxable social security tips	× 0.062 =	
5a 5b	(i) Qualified sick leave wages (ii) Qualified family leave wages . Taxable social security tips Taxable Medicare wages & tips Taxable wages & tips subject to	× 0.062 =	
5a 5b 5c 5d	(i) Qualified sick leave wages (ii) Qualified family leave wages . Taxable social security tips Taxable Medicare wages & tips Taxable wages & tips subject to Additional Medicare Tax withholding	× 0.062 =	
5a 5b	(i) Qualified sick leave wages (ii) Qualified family leave wages . Taxable social security tips Taxable Medicare wages & tips Taxable wages & tips subject to Additional Medicare Tax withholding	× 0.062 =	5e
5a 5b 5c 5d	(i) Qualified sick leave wages (ii) Qualified family leave wages . Taxable social security tips Taxable Medicare wages & tips Taxable wages & tips subject to Additional Medicare Tax withholding Total social security and Medicare taxe	× 0.062 =	5e
5a 5b 5c 5d	(i) Qualified sick leave wages (ii) Qualified family leave wages	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
5a 5b 5c 5d 5e 5f	(i) Qualified sick leave wages (ii) Qualified family leave wages	x 0.062 =	5f •
5a 5b 5c 5d 5e 5f 6	(i) Qualified sick leave wages (ii) Qualified family leave wages Taxable social security tips	X 0.062	5f • • • • • • • • • • • • • • • • • • •
5a 5b 5c 5d 5e 5f 6	(ii) Qualified sick leave wages (ii) Qualified family leave wages	X 0.062	5f
5a 5b 5c 5d 5e 5f 6 7	(ii) Qualified sick leave wages (ii) Qualified family leave wages	X 0.062	5f • • • • • • • • • • • • • • • • • • •
5a 5b 5c 5d 5e 5f 6 7 8	(i) Qualified sick leave wages (ii) Qualified family leave wages	X 0.062	5f

11c

Nonrefundable portion of employee retention credit from Worksheet 1

Name (not your trade name)		Employer identification number (EIN)				
Part 1: Answer these questions for this quarte	r. (continued)					
11d Total nonrefundable credits. Add lines 11a, 11	b, and 11c	11d				
12 Total taxes after adjustments and nonrefunda	able credits. Subtract line 11d from line	e 10 . 12				
13a Total deposits for this quarter, including over overpayments applied from Form 941-X, 941-X (PR						
13b Deferred amount of the employer share of so	cial security tax	13b				
13c Refundable portion of credit for qualified sick	and family leave wages from Works	heet 1 13c -				
13d Refundable portion of employee retention cre	edit from Worksheet 1	13d				
13e Total deposits, deferrals, and refundable cred	dits. Add lines 13a, 13b, 13c, and 13d	13e				
13f Total advances received from filing Form(s) 7	200 for the quarter	13f				
13g Total deposits, deferrals, and refundable credits	less advances. Subtract line 13f from lin	ne 13e . 13g				
14 Balance due. If line 12 is more than line 13g, en	ter the difference and see instructions	14				
Overpayment. If line 13g is more than line 12, enter	the difference •	Check one: Apply to next return. Send a refund.				
Part 2: Tell us about your deposit schedule an	d tax liability for this quarter.					
f you're unsure about whether you're a monthly schedule depositor or a semiweekly schedule depositor, see section 11 of Pub. 15.						
Line 12 on this return is less than \$2,500 or line 12 on the return for the prior quarter was less than \$2,500, and you didn't incur a \$100,000 next-day deposit obligation during the current quarter. If line 12 for the prior quarter was less than \$2,500 but line 12 on this return is \$100,000 or more, you must provide a record of your federal tax liability. If you're a monthly schedule depositor, complete the deposit schedule below; if you're a semiweekly schedule depositor, attach Schedule B (Form 941). Go to Part 3.						
liability for the quarter, then go		nter your tax liability for each month and total				
Tax liability: Month 1						
Month 2						
Month 3						
Total liability for quarter	■ Total n	nust equal line 12.				
	edule depositor for any part of this q weekly Schedule Depositors, and attac	uarter. Complete Schedule B (Form 941), h it to Form 941. Go to Part 3.				
► You MUST complete all three pages of Form 94	1 and SIGN it.	Next ■ ▶				

Name (r	not your trade name)	Employer identification number (EIN)							
Part 3	Tell us about your business. If a question does NOT apply to your business.	ness, leave it blank.							
17	your business has closed or you stopped paying wages								
	enter the final date you paid wages / /); also attach a statement to your return. See instructions.								
18	If you're a seasonal employer and you don't have to file a return for every quar	u're a seasonal employer and you don't have to file a return for every quarter of the year Check here.							
19	Qualified health plan expenses allocable to qualified sick leave wages	19							
20	Qualified health plan expenses allocable to qualified family leave wages	20							
21	Qualified wages for the employee retention credit	21							
22	Qualified health plan expenses allocable to wages reported on line 21	22							
23	Credit from Form 5884-C, line 11, for this quarter	23							
24	Qualified wages paid March 13 through March 31, 2020, for the employed credit (use this line only for the second quarter filing of Form 941)	retention							
25	Qualified health plan expenses allocable to wages reported on line 24 (use th for the second quarter filing of Form 941)	is line only							
Part 4	4: May we speak with your third-party designee?								
	Do you want to allow an employee, a paid tax preparer, or another person to discus	s this return with the IRS? See the instructions							
	for details. Yes. Designee's name and phone number								
		the IDS							
	Select a 5-digit personal identification number (PIN) to use when talking to No.								
Part 5	Sign here. You MUST complete all three pages of Form 941 and SIGN in	l.							
	er penalties of perjury, I declare that I have examined this return, including accompanying schedu pelief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on a								
•		Print your name here							
	name here	Print your							
		title here							
	Date / /	Best daytime phone							
Pa	aid Preparer Use Only	Check if you're self-employed							
Prepa	arer's name	PTIN							
Prepa	arer's signature	Date / /							
	s name (or yours f-employed)	EIN							
Addr	ress	Phone							
City	State	ZIP code							

INTERNAL USE ONLY This page intentionally left blank June 12, 2020

Form 941-V, Payment Voucher

Purpose of Form

Complete Form 941-V if you're making a payment with Form 941. We will use the completed voucher to credit your payment more promptly and accurately, and to improve our service to you.

Making Payments With Form 941

To avoid a penalty, make your payment with Form 941 **only if:**

- Your total taxes after adjustments and nonrefundable credits (Form 941, line 12) for either the current quarter or the preceding quarter are less than \$2,500, you didn't incur a \$100,000 next-day deposit obligation during the current quarter, and you're paying in full with a timely filed return; or
- You're a monthly schedule depositor making a payment in accordance with the Accuracy of Deposits Rule. See section 11 of Pub. 15 for details. In this case, the amount of your payment may be \$2,500 or more.

Otherwise, you must make deposits by electronic funds transfer. See section 11 of Pub. 15 for deposit instructions. Don't use Form 941-V to make federal tax deposits.



Use Form 941-V when making any payment with Form 941. However, if you pay an amount with Form 941 that should've been deposited, you

may be subject to a penalty. See Deposit Penalties in section 11 of Pub. 15.

Specific Instructions

Box 1—Employer identification number (EIN). If you don't have an EIN, you may apply for one online by visiting the IRS website at www.irs.gov/EIN. You may also apply for an EIN by faxing or mailing Form SS-4 to the IRS. If you haven't received your EIN by the due date of Form 941, 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 circle identifying the quarter for which the payment is made. Darken only one circle.

Box 4—Name and address. Enter your name and address as shown on Form 941.

- Enclose your check or money order made payable to "United States Treasury." Be sure to enter your EIN, "Form 941," and the tax period ("1st Quarter 2020," "2nd Quarter 2020," "3rd Quarter 2020," or "4th Quarter 2020") on your check or money order. Don't send cash. Don't 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.

June 12, 2020

<u>~</u>		▼ De	tach Her	е а	and Mail With Your Payment and For	m 941.		·
E 941-V Department of the Treasury Internal Revenue Service ► □			►c	Payment Voucher Onn't staple this voucher or your payment to Form 941.		OMB No. 1545-0029		
	our employer id er (EIN).	entification		2	Enter the amount of your payment. ► Make your check or money order payable to "United States Treasury"	Dolla	irs	Cents
3 Tax Pe	riod			4	Enter your business name (individual name if sole proprietor).	_		_
	1st Quarter		3rd Quarter		Enter your address.			
	2nd Quarter	0	4th Quarter		Enter your city, state, and ZIP code; or your city, foreign country name	e, foreign province/co	unty, and forei	gn postal 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 and provides for income tax withholding. Form 941 is used to determine the amount of taxes that you owe. Section 6011 requires you to provide the requested information if the tax is applicable to you. Section 6109 requires you to provide your identification number. If you fail to provide this information in a timely manner, or provide false or fraudulent information, you may be subject to penalties.

You're 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 its 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:

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 send us comments from www.irs.gov/FormComments. Or you can send your comments to Internal Revenue Service, Tax Forms and Publications Division, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Don't send Form 941 to this address. Instead, see Where Should You File? in the Instructions for Form 941.

DRAFT AS OF June 12, 2020