Form 941 for 2020: Employer's QUARTERLY Federal Tax Return

950117

(Rev. Jar	nuary 2020)	Department of the	he Treasury — Internal Reven	ue Service			OMB No. 1545-0029
Employer identification number (EIN) (Check one.)							
Name (not your trade name)							1: January, February, March
Trade	name (if any)	ame (if any)					2: April, May, June 3: July, August, September
Addre	ee .						4: October, November, December
Addie	Number	Number Street Suite or room number					to www.irs.gov/Form941 for
							tructions and the latest information.
	City	City State ZIP code					
			<b>1</b>				
	Foreign cou	ntry name	Foreign province/county	Foreign p	ostal code		
Read the separate instructions before you complete Form 941. Type or print within the boxes.							
Part 1	Answer	these questions for this	quarter.				
1	Number of e	mployees who received w	ages, tips, or other cor	npensation	for the pay p	period	
	including: Ma	ar. 12 (Quarter 1), June 12	(Quarter 2), Sept. 12 (Qu	arter 3), or I	Dec. 12 (Quai	rter 4)	1
2	Wages, tips,	and other compensation					2
3	Federal inco	me tax withheld from wa	ges, tips, and other con	npensation			3
4	If no wares	tips, and other compens	ation are subject to so	rial cocurity	or Medicar	a tav	Check and go to line 6.
-	ii iio wages,	ups, and other compens	Column 1	aar security	Colur		Check and go to mie o.
-	T		Coldinar	1	Colui		
5a	Taxable soci	ial security wages		× 0.124 =			=
5b	Taxable soci	ial security tips	<u> </u>	× 0.124 =			
5c	Taxable Med	dicare wages & tips		× 0.029 =			
5d	Taxable wag	jes & tips subject to		1			
	Additional M	ledicare Tax withholding	· .	× 0.009 =		<u> </u>	
5e	Add Column	2 from lines 5a, 5b, 5c, a	nd 5d			6	5e
5f	Section 3121	(q) Notice and Demand-	Tax due on unreported	d tips (see in	structions)		5f <b>-</b>
6	Total taxes b	oefore adjustments. Add I	ines 3, 5e, and 5f				6
7	Current quar	rter's adjustment for fract	tions of cents				7
8	Current quar	rter's adjustment for sick	pay				8
9	Current quar	ter's adjustments for tips	and group-term life inse	urance .			9
10	Total taxes a	after adjustments. Combin	ne lines 6 through 9 .			1	10
11	Qualified small business payroll tax credit for increasing research activities. Attach Form 897						11
12							12
13		ts for this quarter, include applied from Form 941-X, 9					13
14	Balance due	. If line 12 is more than line	13, enter the difference	and see ins	tructions .	1	14
15	Overpayment	t. If line 13 is more than line	12, enter the difference			Check one	B: Apply to next return. Send a refund.
			044 1010117				Name of