Form **941-SS for 2010:**(Rev. April 2010) Department of the Treasury — Internal Revenue Service

Employer's QUARTERLY Federal Tax Return
American Samoa, Guam, the Commonwealth of the Northern
vice Mariana Islands, and the U.S. Virgin Islands

(EIN	l) ployer identification number			for this Quarter of 2010							
Name (not your trade name) (Check one.)											
Tra	de name (if any)		\neg	nuary, February, March							
			¬ .	oril, May, June							
Add	Number Street Suite or room number		 3: Ju □	ly, August, September							
			 4: Oc	ctober, November, December							
Read	City State ZIP code I the separate instructions before you complete Form 941-SS. Type or print within the I	ooxes.									
Part 1: Answer these questions for this quarter.											
1	Number of employees who received wages, tips, or other compensation for the payincluding: Mar. 12 (Quarter 1), June 12 (Quarter 2), Sept. 12 (Quarter 3), or Dec. 12 (Quarter 3)		1								
2		,									
3											
4	If no wages, tips, and other compensation are subject to social security or Medica	re tax		Check and go to line 6e.							
	Column 1 Co	lumn 2		*Report wages/tips for this guarter, including those paid							
5a	Taxable social security wages* x .124 =	-		to qualified new employees, on lines 5a-5c. The social							
5b	Taxable social security tips*			security tax exemption on wages/tips will be figured on							
5с	Taxable Medicare wages & tips* .			lines 6c and 6d and will reduce the tax on line 6e.							
5d	Add Column 2 line 5a, Column 2 line 5b, and Column 2 line 5c		. 5d								
	Number of qualified employees first paid exempt wages/tips this quarter			See instructions for definitions							
	Number of qualified employees paid exempt wages/tips this quarter			of qualified employee and exempt wages/tips.							
6с	Exempt wages/tips paid to qualified employees this quarter	x .062	= 6d	•							
6e	Total taxes before adjustments (line 5d - line 6d = 6e)		. 6e								
7a	Current quarter's adjustment for fractions of cents		. 7a								
7b	Current quarter's adjustment for sick pay		. 7b								
7c	Current quarter's adjustments for tips and group-term life insurance		. 7с								
8	Total taxes after adjustments. Combine lines 6e through 7c		. 8								
9											
10											
11	Total deposits, including prior quarter overpayments		. 11	•							
12a	COBRA premium assistance payments (see instructions)		. 12a	•							
12b	Number of individuals provided COBRA premium assistance			Complete lines 12c, 12d, and 12e only for the 2nd quarter of							
12c	Number of qualified employees paid exempt wages/tips March 19–31			2010.							
12d	Exempt wages/tips paid to qualified employees March 19–31	x .062	= 12e	•							
13	Add lines 11, 12a, and 12e		. 13	•							
14	Balance due. If line 8 is more than line 13, enter difference and see instructions .		. 14								
15	Overpayment. If line 13 is more than line 8, enter difference	neck one:	Apply	to next return. Send a refund.							
	➤ You MUST complete both pages of Form 941-SS and SIGN it.			Next →							
-or F	Privacy Act and Paperwork Reduction Act Notice, see the back of the Payment Vouche	r. Cat No	17016V	Form 941-55 (Rev. 4-2010)							

	at your deposit schedule and tax liability for this quarter.					
(Circular SS), section	ut whether you are a monthly schedule depositor or a semiweekly schedule depositor, see <i>Pub. 80</i> 8.					
16						
17 Check one:	Line 8 on this return is less than \$2,500 or line 8 on the return for the preceding quarter was less than \$2,500, and you did not incur a \$100,000 next-day deposit obligation during the current quarter. Go to Part 3.					
You were a monthly schedule depositor for the entire quarter. Enter your tax liability for each month and total liability for the quarter, then go to Part 3.						
	Tax liability: Month 1					
	Month 2					
	Month 3					
	Total liability for quarter Total must equal line 8. You were a semiweekly schedule depositor for any part of this quarter. Complete Schedule B (Form 941): Report of Tax Liability for Semiweekly Schedule Depositors, and attach it to Form 941-SS.					
Part 3: Tell us ab	ut your business. If a question does NOT apply to your business, leave it blank.					
18 If your busine	has closed or you stopped paying wages					
	te you paid wages/ sonal employer and you do not have to file a return for every quarter of the year Check here.					
Part 4: May we s	eak with your third-party designee?					
Do you want to for details.	illow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions					
Yes. Desig	ee's name and phone number					
Selec	a 5-digit Personal Identification Number (PIN) to use when talking to IRS.					
☐ No.	to digit i ologital lagitalionation i talliage and all talliage of the digit is a lagit in the digit is a lagit in the digit in the digit is a lagit in the digit in the digit is a lagit in the digit in the digit is a lagit in the digit in					
Part 5: Sign here	ou MUST complete both pages of Form 941-SS and SIGN it.					
Under penalties of perjuand belief, it is true, co	, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge ct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.					
Sign ye	Print your name here					
name I						
	ate / / Best daytime phone () -					
Paid preparer's	se only Check if you are self-employed					
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 **941-SS** (Rev. 4-2010)

Form 941-V(SS), Payment Voucher

Purpose of Form

Complete Form 941-V(SS), Payment Voucher, if you are making a payment with Form 941-SS, Employer's QUARTERLY 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 941-SS

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

- Your net taxes for either the current quarter or the preceding quarter (line 8 on Form 941-SS) are less than \$2,500, you did not incur a \$100,000 next-day deposit obligation during the current quarter, and you are paying in full with a timely filed return or
- You are a monthly schedule depositor making a payment in accordance with the Accuracy of Deposits Rule. See section 8 of Pub. 80 (Circular SS), Federal Tax Guide for Employers in the U.S. Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands, 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 8 of Pub. 80 (Circular SS) for deposit instructions. Do not use Form 941-V(SS) to make federal tax deposits.

Caution. Use Form 941-V(SS) when making any payment with Form 941-SS. However, if you pay an amount with Form 941-SS that should have been deposited, you may be subject to a penalty. See Deposit Penalties in section 8 of Pub. 80 (Circular SS).

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 941-SS.

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-SS.

- Enclose your check or money order payable to the "United States Treasury." Be sure to enter your EIN, "Form 941-SS," and the tax period on your check or money order. Do not send cash. Do not staple Form 941-V(SS) or your payment to Form 941-SS (or to each other).
- Detach Form 941-V(SS) and send it with your payment and Form 941-SS to the address in the Instructions for Form 941-SS.

Note. You must also complete the entity information above Part 1 on Form 941-SS.

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▼ Detach Here and Mail With Your Payment and Form 941-SS. ▼

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5 941-V(SS))	Payment Voucher			OMB No. 1545-0029	
5 · · · · · · · · · · · · · · · · · · ·		not staple this voucher or your payment to Form 941-SS.		2010		
Enter your employer identification number (EIN).		Enter the amount of your payment.	Do	ollars	Cents	
3 Tax period		4 Enter your business name (individual name if sole proprietor).				
O 1st Quarter	3rd Quarter	Enter your address.				
2nd Quarter	O 4th Quarter	Enter your city, state, and ZIP code.				

Privacy Act and Paperwork Reduction Act Notice.

We ask for the information on Form 941-SS 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. 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 identifying 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 941-SS 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-SS 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 941-SS to this address. Instead, see *Where Should You File?* on page 2 of the Instructions for Form 941-SS.