960311

Schedule B (Form 941):

Report of Tax Liability for Semiweekly Schedule Depositors

(Rev. January 2014) Department of the Treasury — Internal Revenue Service

OMB No. 1545-0029

Employer identification number (EIN) ☐☐ – ☐☐☐☐☐☐☐

Name *(not your trade name)*

Calendar year ☐☐☐☐ (Also check quarter)

Report for this Quarter...
(Check one.)

- ☐ **1:** January, February, March
- ☐ **2:** April, May, June
- ☐ **3:** July, August, September
- ☐ **4:** October, November, December

Use this schedule to show your TAX LIABILITY for the quarter; DO NOT use it to show your deposits. When you file this form with Form 941 or Form 941-SS, DO NOT change your tax liability by adjustments reported on any Forms 941-X or 944-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 Pub. 15 (Circular E), Employer's Tax Guide, for details.

Month 1

1	▪	9	▪	17	▪	25	▪
2	▪	10	▪	18	▪	26	▪
3	▪	11	▪	19	▪	27	▪
4	▪	12	▪	20	▪	28	▪
5	▪	13	▪	21	▪	29	▪
6	▪	14	▪	22	▪	30	▪
7	▪	15	▪	23	▪	31	▪
8	▪	16	▪	24	▪		

Tax liability for Month 1 ▪

Month 2

1	▪	9	▪	17	▪	25	▪
2	▪	10	▪	18	▪	26	▪
3	▪	11	▪	19	▪	27	▪
4	▪	12	▪	20	▪	28	▪
5	▪	13	▪	21	▪	29	▪
6	▪	14	▪	22	▪	30	▪
7	▪	15	▪	23	▪	31	▪
8	▪	16	▪	24	▪		

Tax liability for Month 2 ▪

Month 3

1	▪	9	▪	17	▪	25	▪
2	▪	10	▪	18	▪	26	▪
3	▪	11	▪	19	▪	27	▪
4	▪	12	▪	20	▪	28	▪
5	▪	13	▪	21	▪	29	▪
6	▪	14	▪	22	▪	30	▪
7	▪	15	▪	23	▪	31	▪
8	▪	16	▪	24	▪		

Tax liability for Month 3 ▪

Fill in your total liability for the quarter (Month 1 + Month 2 + Month 3) ▶

Total must equal line 10 on Form 941 or Form 941-SS.

Total liability for the quarter ▪