941-X: Adjusted Employer's QUARTERLY Federal Tax Return or Claim for Refund Department of the Treasury - Internal Revenue Service (Rev. April 2024) **Employer identification number** Return You're Correcting... (EIN) Check the type of return you're correcting. Name (not your trade name) 941 941-SS Trade name (if any) Check the ONE quarter you're correcting. Address 1: January, February, March Number Street Suite or room number 2: April, May, June City State ZIP code 3: July, August, September 4: October, November, December Foreign country name Foreign province/county Foreign postal code Enter the calendar year of the Read the separate instructions before completing this form. Use this form to correct errors you quarter you're correcting. made on Form 941 or 941-SS. Use a separate Form 941-X for each quarter that needs correction. Type or print within the boxes. You MUST complete all five pages. Don't attach this (YYYY) form to Form 941 unless you're reclassifying workers; see the instructions for line 42. Part 1: Select ONLY one process. See page 6 for additional guidance, including information on how to treat employment tax credits. Enter the date you discovered errors. Adjusted employment tax return. Check this box if you underreported tax amounts. Also check this box if you overreported tax amounts and you would like to use the (MM / DD / YYYY) adjustment process to correct the errors. You must check this box if you're correcting both underreported and overreported tax amounts on this form. The amount shown on line 27, if less than zero, may only be applied as a credit to your Form 941 or Form 944 for the tax period in which you're filing this form. 2. Claim. Check this box if you overreported tax amounts only and you would like to use the claim process to ask for a refund or abatement of the amount shown on line 27. Don't check this box if you're correcting ANY underreported tax amounts on this form. Complete the certifications. Part 2: I certify that I've filed or will file Forms W-2, Wage and Tax Statement, or Forms W-2c, Corrected Wage and Tax Statement, as required. Note: If you're correcting underreported tax amounts only, go to Part 3 on page 2 and skip lines 4 and 5. If you're correcting overreported tax amounts, for purposes of the certifications on lines 4 and 5, Medicare tax doesn't include Additional Medicare Tax. Form 941-X can't be used to correct overreported amounts of Additional Medicare Tax unless the amounts weren't withheld from employee wages or an adjustment is being made for the current year. If you checked line 1 because you're adjusting overreported federal income tax, social security tax, Medicare tax, or Additional Medicare Tax, check all that apply. You must check at least one box. I certify that: I repaid or reimbursed each affected employee for the overcollected federal income tax or Additional Medicare Tax for the current year and the overcollected social security tax and Medicare tax for current and prior years. For adjustments of employee social security tax and Medicare tax overcollected in prior years, I have a written statement from each affected employee stating that they haven't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection. The adjustments of social security tax and Medicare tax are for the employer's share only. I couldn't find the affected employees or each affected employee didn't give me a written statement that they haven't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection. The adjustment is for federal income tax, social security tax, Medicare tax, or Additional Medicare Tax that I didn't withhold from C. employee wages. 5. If you checked line 2 because you're claiming a refund or abatement of overreported federal income tax, social security tax, Medicare tax, or Additional Medicare Tax, check all that apply. You must check at least one box. I certify that: I repaid or reimbursed each affected employee for the overcollected social security tax and Medicare tax. For claims of employee social security tax and Medicare tax overcollected in prior years, I have a written statement from each affected employee stating that they haven't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection. I have a written consent from each affected employee stating that I may file this claim for the employee's share of social security tax and Medicare tax. For refunds of employee social security tax and Medicare tax overcollected in prior years, I also have a written statement from each affected employee stating that they haven't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection. The claim for social security tax and Medicare tax is for the employer's share only. I couldn't find the affected employees, or each affected employee didn't give me a written consent to file a claim for the employee's share of social security tax and Medicare tax, or each affected employee didn't give me a written statement that they haven't claimed (or the claim was rejected) and won't claim

employee wages.

d.

a refund or credit for the overcollection.

The claim is for federal income tax, social security tax, Medicare tax, or Additional Medicare Tax that I didn't withhold from

Correcting quarter

(1, 2, 3, 4)

Correcting calendar year (YYYY)

Part	3: Enter the corrections for th	is quarter. If any I	ine c	loesn't apply, leav	e it l	olank.		
		Column 1 Total corrected	_	Column 2 Amount originally reported or as	=	Column 3 Difference (If this amount is a		Column 4 Tax correction
		amount (for ALL employees)		previously corrected (for ALL employees)		negative number, use a minus sign.)		
6.	Wages, tips, and other compensation (Form 941, line 2)		_		=			in Column 1 when you rms W-2 or Forms W-2c.
7.	Federal income tax withheld from wages, tips, and other compensation (Form 941, line 3)		_		=		Copy Column 3 here	
8.	Taxable social security wages (Form 941 or 941-SS, line 5a, Column 1)		_		=		× 0.124* =	
					^ I	f you're correcting your emp	oloyer share only, i	use 0.062. See instructions.
9.	Qualified sick leave wages* (Form 941 or 941-SS, line 5a(i), Column 1)	* Use line 9 only for qualifie	— ad sick	leave wages paid after Marc	= h 31 - 21	220 for leave taken before A	× 0.062 =	
10.	Qualified family leave weape*	Ose line 5 only for qualific	1	reave wages paid after marc	1	520, for leave taken before 7	ηριι 1, 2021.	
10.	Qualified family leave wages* (Form 941 or 941-SS, line 5a(ii), Column 1)	* Use line 10 only for qualif	— ied fam	illy leave wages paid after M	= arch 31	, 2020, for leave taken befo	× 0.062 = re April 1, 2021.	•
11.	Taxable social security tips (Form		l		l			
	941 or 941-SS, line 5b, Column 1)	•	_		= *।	f you're correcting your emp	× 0.124* =	use 0.062. See instructions.
12.	Taxable Medicare wages & tips (Form 941 or 941-SS, line 5c, Column 1)		_		=		× 0.029* =	
	341 01 341 00, iiilo 30, 00idiiii 1)			-	 * If	you're correcting your empl		se 0.0145. See instructions.
13.	Taxable wages & tips subject to Additional Medicare Tax withholding (Form 941 or 941-SS, line 5d)		_	* Certain wages	= and tips	s reported in Column 3 shou	× 0.009* =	by 0.009. See instructions.
14.	Section 3121(q) Notice and		1		=		Copy Column	
	Demand – Tax due on unreported tips (Form 941 or 941-SS, line 5f)	•		•	_	•	3 here	•
15.	Tax adjustments (Form 941 or 941-SS, lines 7 through 9)		_	•	=		Copy Column 3 here	•
16.	Qualified small business payroll tax credit for increasing research activities (See instructions; you		_		=		See instructions	
	must attach Form 8974.)		,					
17.	Nonrefundable portion of credit for qualified sick and family leave wages for leave taken		_		=		See instructions	
	before April 1, 2021 (Form 941 or 941-SS, line 11b)							
18a.	Nonrefundable portion of employee retention credit*		_	_	=		See instructions	_
	(Form 941 or 941-SS, line 11c)	* Use line 18a only for corre	l ections	to quarters beginning after	l March 3	31, 2020, and before Januar		
18b.	Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March		_		=		See instructions	-
	31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 11d)							
18c.	Nonrefundable portion of COBRA premium assistance credit		_		=		See instructions	
104	(Form 941 or 941-SS, line 11e)		1					
18d.	Number of individuals provided COBRA premium assistance (Form 941 or 941-SS, line 11f)		_		=			
19.	Special addition to wages for federal income tax		_		=		See instructions	
20.	Special addition to wages for social security taxes		_		=		See instructions	
21.	Special addition to wages for Medicare taxes	_	_		=		See instructions	

Name (not your trade name)				Employer idea	ntificat	tion number (EIN)	Correcting of	juarter (1, 2, 3, 4)		
,								Correcting calendar year (YYYY)			
Part	3: Enter the corrections for th		ine c		t apply, lea v Column 2	ve it i	· , , , , , , , , , , , , , , , , , , ,		Calumna 4		
		Column 1 Total corrected amount (for ALL employees)	_	Amo rep previo	Olumn 2 unt originally ported or as usly corrected LL employees)	=	Column 3 Difference (If this amount is a negative number, use a minus sign.)		Column 4 Tax correction		
22.	Special addition to wages for Additional Medicare Tax] –		•] =		See instructions			
23.	Combine the amounts on lines 7 thr	ough 22 of Column 4	1.								
24.	Reserved for future use		_		•	=					
25.	Refundable portion of credit for qualified sick and family leave wages for leave taken before April 1, 2021 (Form 941 or 941- SS, line 13c)		_			=		See instructions	·		
26a.	Refundable portion of employee retention credit* (Form 941 or 941-SS, line 13d)	* Use line 26a only for correcti	_ ions to d	quarters be	ginning after March	= 31, 2020	, and before January 1, 2022.	See instructions			
26b.	Refundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 13e)		_			=		See instructions			
26c.	Refundable portion of COBRA premium assistance credit (Form 941 or 941-SS, line 13f)		_			=		See instructions			
27.	Total. Combine the amounts on line If line 27 is less than zero:	es 23 through 26c of	Colur	mn 4							
	 If you checked line 1, this is the ar form. (If you're currently filing a Fo If you checked line 2, this is the ar 	orm 944, Employer's mount you want refur	ANNU nded (JAL Fe or abat	deral Tax Retu ed.	ırn, se	ee the instructions.)	·	· ·		
	If line 27 is more than zero, this is pay, see Amount you owe in the ins		/е. Ра	ay this a	amount by the	time	you file this return. Fo	or information	on how to		
28.	Qualified health plan expenses allocable to qualified sick leave wages for leave taken before April 1, 2021 (Form 941 or 941- SS, line 19)	·	_			=					
29.	Qualified health plan expenses allocable to qualified family leave wages for leave taken before April 1, 2021 (Form 941 or 941-SS, line 20)		_			=					
30.	Qualified wages for the employee retention credit* (Form 941 or 941-SS, line 21)	* Use line 30 only for correction	_ ons to q	uarters be	ginning after March	= 31, 2020	, and before January 1, 2022.				
31a.	Qualified health plan expenses for the employee retention credit* (Form 941 or 941-SS, line 22)	* Use line 31a only for correct	_ ions to d	quarters b	eginning after March	= 31, 2020), and before January 1, 2022.				
31b.	Check here if you're eligible for solely because your business is a	• •			in the third o	or fou	rth quarter of 2021				
32.	Credit from Form 5884-C, line 11, for this quarter* (Form 941 or 941-SS, line 23)	* Use line 32 only for corre	_ ctions t	o quarter	s beginning after N	=	1, 2020, and before April 1, 2	2021.			

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(1, 2, 3, 4)

Correcting calendar year (YYYY)

Column 2 Column 3 Amount originally reported or as Difference Total corrected (If this amount is a = amount (for ALL previously corrected negative number, employees) (for ALL employees) use a minus sign.) = 33a. Reserved for future use Reserved for future use 33b. 34. Reserved for future use Caution: Lines 35–40 apply only to quarters beginning after March 31, 2021. 35. Qualified sick leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 23)

Part 3: Enter the corrections for this quarter. If any line doesn't apply, leave it blank. (continued)

Column 1 Column 2 Column

	3 11 33, mil 23)			
36.	Qualified health plan expenses allocable to qualified sick leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 24)	_	=	

37.	Amounts under certain collectively bargained agreements allocable to qualified sick leave wages for leave		- [=	
	taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 25)				

38. Qualified family leave wages for leave taken after March 31, 2021, and before October 1, 2021 (Form 941 or 941-SS, line 26)		=	
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39.	Qualified health plan expenses allocable to qualified family leave wages for leave taken after] -		=	
	March 31, 2021, and before					
	October 1, 2021 (Form 941 or 941-SS, line 27)					

40.	Amounts under certain collectively	·	_	=	
	bargained agreements allocable to				
	qualified family leave wages				
	for leave taken after March 31, 2021,				

and before October 1, 2021 (Form 941 or 941-SS, line 28)

Name	(not y	your trade nan	ne)				Employ	er identifica	tion number (EIN)		Correcting qua		1, 2, 3, 4 (YYYY)
Par	t 4:	Explain y	our correctio	ns for this q	uarter.								
	41.	Check he	re if any corrected and o	ctions you en	ntered on a lin mounts on line	43.			ed and overrep	orted a	nounts. Expl	ain both	
			re if any correc										
	43.	You must	give us a deta	iled explanati	ion of how you	ı determir	ned your	correction	ns. See the instr	uctions.			
Par	t 5:	Sign here	. You must c	omplete all	five pages o	f this for	m and s	sign it.					
acc	ompa	anying sched		ents, and to the	best of my kno	wledge and			have examined the rect, and comple				
								t your ne here					
	gn ye me l	our here					Prin	t your					
							title	here					
		Date	/ /]				Ве	st daytime pho	ne			
Paid	l Pre	eparer Us	e Only						Check if ye	ou're se	elf-employed		
Prepa	arer's	name							PTIN				
Prepa	arer's	s signature							Date	/	/		
		ne (or yours loyed)							EIN				
Addr	ess								Phone				
City							State		ZIP code				

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Form 941-X: Which process should you use?

Type of errors
you're correcting

Unless otherwise specified in the separate instructions, an underreported employment tax credit should be treated like an overreported tax amount. An overreported employment tax credit should be treated like an underreported tax amount. For more information, including which process to select on lines 1 and 2, see *Correcting an employment tax credit* in the separate instructions.

Underreported tax amounts ONLY

Use the adjustment process to correct underreported tax amounts.

- Check the box on line 1.
- Pay the amount you owe from line 27 by the time you file Form 941-X.

Overreported tax amounts ONLY

The process you use depends on when you file Form 941-X.

If you're filing Form 941-X MORE THAN 90 days before the period of limitations on credit or refund for Form 941 or Form 941-SS expires... Choose either the adjustment process or the claim process to correct the overreported tax amounts.

Choose the adjustment process if you want the amount shown on line 27 credited to your Form 941 or Form 944 for the period in which you file Form 941-X. Check the box on line 1.

OF

Choose the claim process if you want the amount shown on line 27 refunded to you or abated. Check the box on line 2.

If you're filing Form 941-X WITHIN 90 days of the expiration of the period of limitations on credit or refund for Form 941 or Form 941-SS... You must use the **claim process** to correct the overreported tax amounts. Check the box on line 2.

BOTH underreported and overreported tax amounts

The process you use depends on **when** you file Form 941-X.

If you're filing Form 941-X MORE THAN 90 days before the period of limitations on credit or refund for Form 941 or Form 941-SS expires... Choose either the adjustment process or both the adjustment process and the claim process when you correct both underreported and overreported tax amounts.

Choose the adjustment process if combining your underreported tax amounts and overreported tax amounts results in a balance due or creates a credit that you want applied to Form 941 or Form 944.

- File one Form 941-X, and
- Check the box on line 1 and follow the instructions on line 27.

OR

Choose both the adjustment process and the claim process if you want the overreported tax amount refunded to you or abated.

File two separate forms.

- 1. For the adjustment process, file one Form 941-X to correct the underreported tax amounts. Check the box on line 1. Pay the amount you owe from line 27 by the time you file Form 941-X.
- 2. For the claim process, file a second Form 941-X to correct the overreported tax amounts. Check the box on line 2.

If you're filing Form 941-X WITHIN 90 days of the expiration of the period of limitations on credit or refund for Form 941 or Form 941-SS...

You must use both the adjustment process and the claim process.

File two separate forms.

- 1. For the adjustment process, file one Form 941-X to correct the underreported tax amounts. Check the box on line 1. Pay the amount you owe from line 27 by the time you file Form 941-X.
- For the claim process, file a second Form 941-X to correct the overreported tax amounts. Check the box on line 2.

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