Interview for your Form 941/Schedule B Employer's Quarterly Federal Tax Return

Instructions: Use this interview to help you fill out your Form 941 and Schedule B (if applicable). QuickBooks uses your answers to complete your Form 941. **Legal Business Name** Your legal business name Town of Bashaw **Business Name Control - E-FILERS ONLY** Your business name control. Modify value if needed (based on 'Legal Business Name' above) . . . Town Select your IRS assigned deposit schedule To help determine if the IRS requires you to file a Schedule B, check your IRS assigned deposit schedule: Semi-Weekly Note: Your selection on Form 941, page 2, line 16 determines if the IRS requires you to file a Schedule B. Final Return - Enter the following information for your final return: You would not have to file returns in the future if you went out of business or stopped paying wages this quarter, for example. Name of the person keeping the final records . . . Address where those final payroll records will be kept: Answer all that apply to you Seasonal employers are not required to file Form 941 during quarters when they regularly do not have a tax liability because they have no wages. If you are a seasonal employer, checking this box notifies the IRS that you will not have to file a return for one or more quarters of the year. Check here if NO wages are subject to social security and/or Medicare tax Check this box only if all wages are not subject to social security and Medicare taxes. See Circular E (IRS Pub. 15) for more information on exempt wages.

Form **941 for 2023:** Employer's QUARTERLY Federal Tax Return

(Rev. Ma	arch 2023) Department of the Treasury — Internal Revenue Service		OMB No. 1545-0029		
Emplo	yer identification number (EIN) 39-1403551	Repo (Check	rt for this Quarter of 2023		
Name (not your trade name) Town of Bashaw					
Trod	e name (if any)	2: /	April, May, June		
Irau	e name (ii ariy)	3: 0	July, August, September		
Addr		4: 0	October, November, December		
	Number Street Suite or room number		www.irs.gov/Form941 for		
	Shell Lake WI 54871	instruc	tions and the latest information.		
	City State ZIP code		REV 03/17/23 QBDT		
	Foreign country name Foreign province/county Foreign postal code				
Read t	he separate instructions before you complete Form 941. Type or print within the boxes.				
Part 1	Answer these questions for this quarter.				
1	Number of employees who received wages, tips, or other compensation for the pay period including: <i>Mar. 12</i> (Quarter 1), <i>June 12</i> (Quarter 2), <i>Sept. 12</i> (Quarter 3), or <i>Dec. 12</i> (Quarter 4)		0		
2	Wages, tips, and other compensation	2	13,491.04		
3	Federal income tax withheld from wages, tips, and other compensation	3	82.00		
4	If no wages, tips, and other compensation are subject to social security or Medicare tax		Check and go to line 6.		
	Column 1 Column 2	0.0			
5a	Taxable social security wages* . $13,491.04 \times 0.124 = 1,672$. 89	*Include taxable qualified sick and family leave wages paid in this		
5a	(i) Qualified sick leave wages* × 0.062 =		quarter of 2023 for leave taken after March 31, 2021, and before		
5a	(ii) Qualified family leave wages* . $\times 0.062 =$		October 1, 2021, on line 5a. Use lines 5a(i) and 5a(ii) only for taxable		
5b	Taxable social security tips $\times 0.124 =$		qualified sick and family leave wages paid in this quarter of 2023		
5с	Taxable Medicare wages & tips $13,491.04 \times 0.029 = 391$. 24	for leave taken after March 31, 2020, and before April 1, 2021.		
5d	Taxable wages & tips subject to Additional Medicare Tax withholding × 0.009 =				
5e	Total social security and Medicare taxes. Add Column 2 from lines 5a, 5a(i), 5a(ii), 5b, 5c, and 5d	5e	2,064.13		
5f	Section 3121(q) Notice and Demand—Tax due on unreported tips (see instructions)	5f			
6	Total taxes before adjustments. Add lines 3, 5e, and 5f	6	2,146.13		
7	Current quarter's adjustment for fractions of cents	7	0.03		
8	Current quarter's adjustment for sick pay	8			
9	Current quarter's adjustments for tips and group-term life insurance	9			
10	Total taxes after adjustments. Combine lines 6 through 9	10	2,146.16		
11a	Qualified small business payroll tax credit for increasing research activities. Attach Form 8974 11a				
11b	Nonrefundable portion of credit for qualified sick and family leave wages for leave taken before April 1, 2021				
11c	Reserved for future use	11c			

	(not your trade name) nof Bashaw	Employer identification number (EIN) 39-1403551	
Part		100 200000	
11d	·	wages for leave taken	
11e	Reserved for future use	11e	
11f	Reserved for future use		
11g	Total nonrefundable credits. Add lines 11a, 11b, and 11d		
12	Total taxes after adjustments and nonrefundable credits. Subtract I	ine 11g from line 10 . 12 2 , 14	46.16
13a	Total deposits for this quarter, including overpayment applied from overpayments applied from Form 941-X, 941-X (PR), 944-X, or 944-X (SP) fill		
13b	Reserved for future use	13b	
13c	Refundable portion of credit for qualified sick and family leave velocities before April 1, 2021		
13d	Reserved for future use	13d	
13e	Refundable portion of credit for qualified sick and family leave vafter March 31, 2021, and before October 1, 2021		
13f	Reserved for future use	13f	
13g	Total deposits and refundable credits. Add lines 13a, 13c, and 13e	13g	
13h	Reserved for future use	13h	
13i	Reserved for future use	13i	
14	Balance due. If line 12 is more than line 13g, enter the difference and s	see instructions 14 2 , 14	46.16
15	Overpayment. If line 13g is more than line 12, enter the difference	Check one: Apply to next return. Se	end a refund
Part	2: Tell us about your deposit schedule and tax liability for this	quarter.	
lf you	're unsure about whether you're a monthly schedule depositor or a s	semiweekly schedule depositor, see section 11 of P	'ub. 15.
16	Check one: X Line 12 on this return is less than \$2,500 or line 12 and you didn't incur a \$100,000 next-day deposit of quarter was less than \$2,500 but line 12 on this return federal tax liability. If you're a monthly schedule do semiweekly schedule depositor, attach Schedule B (Fo	obligation during the current quarter. If line 12 for t urn is \$100,000 or more, you must provide a record epositor, complete the deposit schedule below; if y	the prior I of your
	You were a monthly schedule depositor for the er liability for the quarter, then go to Part 3.	ntire quarter. Enter your tax liability for each month a	and total
	Tax liability: Month 1		
	Month 2		
	Month 3		
	Total liability for quarter	Total must equal line 12.	
	You were a semiweekly schedule depositor for an Report of Tax Liability for Semiweekly Schedule Deposition	• • • • • • • • • • • • • • • • • • • •	941),

	not your trade name,			Employer identification number (EIN)		
Towr	n of Bash	ıaw		39-1403551		
Part 3	Tell us ab	out your business. If a question does NOT app	ply to your busines	ss, leave it blank.		
17	If your busines	ss has closed or you stopped paying wages		Check here, and		
	enter the final c	date you paid wages				
18	If you're a sea	sonal employer and you don't have to file a retur	rn for every quarter	of the year Check here.		
19	Qualified health p	plan expenses allocable to qualified sick leave wages for	leave taken before Apri	il 1, 2021 19		
20	Qualified health p	olan expenses allocable to qualified family leave wages for	leave taken before Apr	ril 1, 2021 20		
21	Reserved for f	r future use				
22	Reserved for f	red for future use				
23	Qualified sick I	lified sick leave wages for leave taken after March 31, 2021, and before October 1, 2021 23				
24	Qualified healt	th plan expenses allocable to qualified sick leave	wages reported on	line 23 24		
25		er certain collectively bargained agreements eported on line 23	allocable to qualifi	ied sick 25		
26	Qualified family	y leave wages for leave taken after March 31, 2021,	and before October	1, 2021 26		
27	Qualified healt	h plan expenses allocable to qualified family leave	wages reported on	line 26 27		
28	Amounts unde	er certain collectively bargained agreements a	llocable to qualified	d family		
	leave wages re	eported on line 26		28		
Part 4		peak with your third-party designee?				
	Do you want to for details.	allow an employee, a paid tax preparer, or another	person to discuss th	his return with the IRS? See the instructions		
	Yes. Desig	nee's name and phone number				
	Selec	t a 5-digit personal identification number (PIN) to us	se when talking to the	e IRS.		
	☐ No.			REV 03/17/23 QBD		
Part 5	Sign here.	. You MUST complete all three pages of Form	941 and SIGN it.			
		ury, I declare that I have examined this return, including acreet, and complete. Declaration of preparer (other than tax				
Sign your			Print your name here	LESA DAHLSTROM		
	ne here	EF ONLY-You do not need to sign this form	Print your			
			title here	CLERK/TREASURER		
	Date	03/24/2023	Best daytime p	ohone (715)468-7525		
Pa	id Preparer l	Jse Only	C	Check if you're self-employed		
Prepa	arer's name			PTIN		
Prepa	arer's signature			Date		
	s name (or yours -employed)			EIN		
Addr	ess			Phone		
City			State	ZIP code		

Page **3** Form **941** (Rev. 3-2023)

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 2023," "2nd Quarter 2023," "3rd Quarter 2023," or "4th Quarter 2023") 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.

Detach Here and Mail With Your Payment and Form 941.

E 941-V Department of the Treasury Internal Revenue Service		Do	Payment Voucher on't staple this voucher or your payment to Form 941.			OMB No. 1545-0029	
	Enter your employer id number (EIN). 39-1403551	entification		2	Enter the amount of your payment. Make your check or money order payable to "United States Treasury."	Dollars	Cents 2,146.16
3	Tax Period		2d	4	Enter your business name (individual name if sole proprietor). Town of Bashaw		
Quarter Srd Quarter Enter your address. N3534 Hwy 63							
	2nd Quarter		4th Quarter		Enter your city, state, and ZIP code; or your city, foreign country name, Shell Lake	, foreign province/coun	ity, and foreign postal code. 54871

REV 03/17/23 QB

Filing and Printing Instructions	FEDERAL QUARTERLY FORM 941/SCHEDULE B
Name	
Town of Bashaw	
Address	
N3534 Hwy 63	
City, State, and ZIP Code	
Shell Lake, WI 54871	
INSTRUCTIONS FOR FILING YOUR PAYROL	L TAX RETURN
Please file your federal 941 return by 05/	01/2023. If filing by mail send your return
and payment to the following addres	
Internal Revenue Service	
P.O. Box 806532	
Cincinnati, OH 45280-6532	
Remember to sign and enter required	information in the signature line.
	-
KEEP THIS PAGE FOR YOUR RECORDS	DO NOT MAIL.