Form **944-SS** for **2008**: Employer's ANNUAL Federal Tax Return American Samoa, Guam, the Commonwealth of the Northern

Department of the Treasury — Internal Revenue Service	Mariana Islands, and the U.S. Virgin Islands	OMB No. 1545-2010						
Employer identification number (EIN)		Who Must File Form 944-SS You must file annual						
Name (not your trade name)		Form 944-SS instead of filing quarterly Forms 941-SS only if the IRS						
Trade name (if any)		notified you in writing.						
Address								
Number Street	Suite or room number							
City	State ZIP code							
Read the separate instructions before you complete Form 944-SS. Type or print within the boxes.								

201	ممالة امم	City	a var. aammiete Farm O	State	ZIP co					
		separate instructions befor Answer these questions fo	<u> </u>	14 -55. Type or	print wi	inin the bo	xes.			
	rart i	: Answer these questions to	1 2000.							
1										
2										
	16			-:-1	N41:					
	3 If no wages, tips, and other compensation are subject to social security or Medicare tax. 3 — Check and go to line 6.									
4	ı axaı	ble social security and Medica	Column 1		Colum	n 2				
				104						
	4a 1	axable social security wages	•	× .124 = L		•	I I			
	4b Ta	axable social security tips	•	× .124 =		•				
	4c Ta	axable Medicare wages & tips		× .029 =		-				
	4d T	otal social security and Medic	are taxes (Column 2 lines	1a + 1b + 1c -	line (1d)	4d	_			
	70 IV	otal social security and Medic	are taxes (Oolumii 2, iiiles	4a + 4b + 4c =	iiile 4u) .	40				
5										
6	TAX A	ADJUSTMENTS. Read the instr	uctions for line 6 before co	mpleting lines 6	a through	6e.				
				, ,						
	6a C	urrent year's adjustments .		6a 📖		•				
	6b									
		rior years' social security and latach Form 941c				_				
	A			00		_				
	6d									
		pecial additions to social secu ttach Form 941c		6e		_				
	6f T(OTAL ADJUSTMENTS. Combin	ne all amounts on lines 6a t	through 6e .		6f	-			
7	Total	taxes after adjustments. Com	bine lines 4d and 6f			7	•			
8										
9										
9										
10	Total	deposits for this year, includi	ng overpayment applied f	rom a prior yea	ar	10				
11 Balance due. If line 7 is more than line 10, write the difference here. For information on how										
to pay, see the instructions										
12		payment. If line 10 is more	than line 7, write the				Check one Apply to next return.			
	differe	ence here		12			Send a refund.			
	► Yo	u MUST complete both pages	of Form 944-SS and SIGN	l it.			Next →			
		page 15 mp. page 1		-						

Name (not your trade name)							Employer identification number (EIN)				
Part 2: Tell us ab	oout vo	our tax liability fo	r 2008								
rare 2. Tell us as											
13 Check one:		7 is less than \$2,5			h month. If you	2ro 2 co	miwaakly dan	eitor or vou a	ccumulate		
Line 7 is \$2,500 or more. Enter your tax liability for each month. If you are \$100,000 or more of liability on any day during a deposit period, you must											
		Jan.	Γ	Apr.			Jul.		Oct.		
13a	а		13d		13g			13j			
401	_	Feb.	40-	May	406		Aug.	401	Nov.		
13k	ь	Mar.	13e	lun	13h		Sep.	13k	Dec.		
130	С	iviai.	13f	Jun.	13i		•	131	Dec.		
	-	-	101	-			-		•		
Tot	tal liab	ility for year. Add	lines 13a	through 13l. Tot	al must equal	l line 7.	13m				
14											
Part 3: Tell us ab	oout yo	our business. If q	uestion	15 does NOT a	apply to you	r busin	ess, leave i	t blank.			
15 If your business	s has c	losed or you stop	oed payin	g wages							
, , , , , , , , , , , , , , , , , , , ,											
Check here	e and e	enter the final date	you paid	wages.	/ /						
Part 4: May we s	speak v	with your third-pa	arty desi	gnee?							
Do you want to allow	w an er	nployee, a paid tax	c prepare	, or another per	son to discus	s this re	eturn with the	e IRS? See th	e instructions		
for details.											
_								,			
Yes. Designee's name and phone number											
Solont a 5 digit Personal Identification Number (DIN) to use when talking to IDS											
Select a 5-digit Personal Identification Number (PIN) to use when talking to IRS.											
	Vou	MUST complete	معر طامم	vec of Forms 04	4 CC and Cl	CN #					
Part 5: Sign here							and atataments	and to the be	at of my knowledge		
Under penalties of perjuand belief, it is true, co	orrect, an	d complete. Declarati	ion of preparent	arer (other than tax	payer) is based	on all in	formation of w	nich preparer h	as any knowledge.		
• #						Print					
Sign you						here					
name i	nere	leie			Print title h						
									_		
	Date	/ /				Best	daytime phor	ie (\ /	_		
Paid preparer's	s use	only				C	heck if you a	re self-emplo	oyed		
Preparer's name							Preparer's SSN/PTIN				
Preparer's signature						Date	/	/			
Firm's name (or yours						EIN	,				
if self-employed) Address							Phone				
							THORIE	()	_		
City					State		ZIP code				

Page **2** Form **944-SS** (2008)

Form 944-V(SS), Payment Voucher

Purpose of Form

Complete Form 944-V(SS), Payment Voucher, if you are making a payment with Form 944-SS, Employer's ANNUAL 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 944-SS

To avoid a penalty, make your payment with your 2008 Form 944-SS **only if** one of the following applies.

- Your net taxes for the year (line 7 on Form 944-SS) are less than \$2,500 and you are paying in full with a timely filed return.
- You already deposited the taxes you owed for the first, second, and third quarters of 2008, and the tax you owe for the fourth quarter of 2008 is less than \$2,500, and you are paying, in full, the tax you owe for the fourth quarter of 2008 with a timely filed return.
- 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 944-V(SS) to make federal tax deposits.

Caution. Use Form 944-V(SS) when making any payment with Form 944-SS. However, if you pay an amount with Form 944-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 944-SS.

Box 3—Name and address. Enter your name and address as shown on Form 944-SS.

- Enclose your check or money order made payable to the "United States Treasury" and write your EIN, "Form 944-SS," and "2008" on your check or money order. Do not send cash. Do not staple Form 944-V(SS) or your payment to Form 944-SS (or to each other).
- Detach Form 944-V(SS) and send it with your payment and Form 944-SS to the address provided in the Instructions for Form 944-SS.

Note. You must also complete the entity information above Part 1 on Form 944-SS.

Detach Here and Mail With Your Payment and Form 944-SS. Payment Voucher Payment Voucher Department of the Treasury Internal Revenue Service Do not staple this voucher or your payment to Form 944-SS. Dollars Cents There your employer identification number (EIN). Enter your business name (individual name if sole proprietor). Enter your address. Enter your city, state, and ZIP code.

Privacy Act and Paperwork Reduction Act Notice.

We ask for the information on this form 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 identification 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 this form 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 944-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 944-SS to this address. Instead, see *Where Should You File?* on page 4 of the Instructions for Form 944-SS.