

Schedule B (Form 941):

Report of Tax Liability for Semiweekly Schedule Depositors

(Rev. March 2024)

Department of the Treasury — Internal Revenue Service

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; don't use it to show your deposits. When you file this schedule with Form 941, don't change your tax liability by adjustments reported on any Forms 941-X or 944-X. You must fill out this schedule and attach it to Form 941 if you're 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 for details.

Month 1

| | | | | | | | |
|---|----------------------|----|----------------------|----|----------------------|----|----------------------|
| 1 | <input type="text"/> | 9 | <input type="text"/> | 17 | <input type="text"/> | 25 | <input type="text"/> |
| 2 | <input type="text"/> | 10 | <input type="text"/> | 18 | <input type="text"/> | 26 | <input type="text"/> |
| 3 | <input type="text"/> | 11 | <input type="text"/> | 19 | <input type="text"/> | 27 | <input type="text"/> |
| 4 | <input type="text"/> | 12 | <input type="text"/> | 20 | <input type="text"/> | 28 | <input type="text"/> |
| 5 | <input type="text"/> | 13 | <input type="text"/> | 21 | <input type="text"/> | 29 | <input type="text"/> |
| 6 | <input type="text"/> | 14 | <input type="text"/> | 22 | <input type="text"/> | 30 | <input type="text"/> |
| 7 | <input type="text"/> | 15 | <input type="text"/> | 23 | <input type="text"/> | 31 | <input type="text"/> |
| 8 | <input type="text"/> | 16 | <input type="text"/> | 24 | <input type="text"/> | | |

Tax liability for Month 1

Month 2

| | | | | | | | |
|---|----------------------|----|----------------------|----|----------------------|----|----------------------|
| 1 | <input type="text"/> | 9 | <input type="text"/> | 17 | <input type="text"/> | 25 | <input type="text"/> |
| 2 | <input type="text"/> | 10 | <input type="text"/> | 18 | <input type="text"/> | 26 | <input type="text"/> |
| 3 | <input type="text"/> | 11 | <input type="text"/> | 19 | <input type="text"/> | 27 | <input type="text"/> |
| 4 | <input type="text"/> | 12 | <input type="text"/> | 20 | <input type="text"/> | 28 | <input type="text"/> |
| 5 | <input type="text"/> | 13 | <input type="text"/> | 21 | <input type="text"/> | 29 | <input type="text"/> |
| 6 | <input type="text"/> | 14 | <input type="text"/> | 22 | <input type="text"/> | 30 | <input type="text"/> |
| 7 | <input type="text"/> | 15 | <input type="text"/> | 23 | <input type="text"/> | 31 | <input type="text"/> |
| 8 | <input type="text"/> | 16 | <input type="text"/> | 24 | <input type="text"/> | | |

Tax liability for Month 2

Month 3

| | | | | | | | |
|---|----------------------|----|----------------------|----|----------------------|----|----------------------|
| 1 | <input type="text"/> | 9 | <input type="text"/> | 17 | <input type="text"/> | 25 | <input type="text"/> |
| 2 | <input type="text"/> | 10 | <input type="text"/> | 18 | <input type="text"/> | 26 | <input type="text"/> |
| 3 | <input type="text"/> | 11 | <input type="text"/> | 19 | <input type="text"/> | 27 | <input type="text"/> |
| 4 | <input type="text"/> | 12 | <input type="text"/> | 20 | <input type="text"/> | 28 | <input type="text"/> |
| 5 | <input type="text"/> | 13 | <input type="text"/> | 21 | <input type="text"/> | 29 | <input type="text"/> |
| 6 | <input type="text"/> | 14 | <input type="text"/> | 22 | <input type="text"/> | 30 | <input type="text"/> |
| 7 | <input type="text"/> | 15 | <input type="text"/> | 23 | <input type="text"/> | 31 | <input type="text"/> |
| 8 | <input type="text"/> | 16 | <input type="text"/> | 24 | <input type="text"/> | | |

Tax liability for Month 3



Fill in your total liability for the quarter (Month 1 + Month 2 + Month 3).
Total must equal line 12 on Form 941.

Total liability for the quarter