



Illinois Department of Revenue

Form IL-941 2012 Illinois Withholding Income Tax Return**Step 1: Provide your information**

Federal employer identification number (FEIN)

0 0 0
Seq. number

Business name

C/O

Mailing address

City

State

ZIP

☐ Check this box if this is your first return.

☐ Check this box if your business name has changed.

☐ Check this box if your address has changed.

Reporting Period

If you are a quarterly filer:
Check the quarter you are reporting.

- ☐ **1st** (January, February, March)
- ☐ **2nd** (April, May, June)
- ☐ **3rd** (July, August, September)
- ☐ **4th** (October, November, December)

If you are an annual filer:
Check the box if you are not required to file quarterly.

☐ January — December

Step 2: Tell us about your W-2 forms and your business

A Write the total number of W-2 forms you were required to issue for the entire year.
(Quarterly filers — Only complete this line when you file your **4th quarter** or **final** return.)

A _____

B If your business has **permanently** stopped withholding because it has closed or you no longer pay wages, check the box and write the date you stopped paying wages.

B ☐ ____ / ____ / 2012
Month Day

Step 3: Tell us your payroll information

1 Write the total compensation and gambling winnings (including Illinois Lottery winnings) subject to withholding this period.

1 _____

Step 4: Tell us about your withholding for this period

2 Write the amount of Illinois Income Tax actually withheld for this period.

2 _____

Step 5: Tell us about your payments and credits

3 Write the total amount of withholding payments you have made during this period. This includes all IL-501 payments (electronic and paper coupons).

3 _____

4 Write the amount of credit carried forward from your previous Form IL-941.

4 _____

5 Write the total amount of credits you have received through DCEO.

5 _____

6 Add Lines 3, 4, and 5 and write the total amount here.

6 _____

Step 6: Figure your credit or the amount you owe

7 If Line 2 is greater than Line 6, subtract Line 6 from Line 2. This is your **remaining balance due**. Make your payment electronically (semi-weekly **must pay** electronically) or make your remittance payable to **"Illinois Department of Revenue."**

7 _____

8 If Line 2 is less than Line 6, subtract Line 2 from Line 6. Claim this amount on your next Form IL-941.

8 _____

Step 7: Sign here

Under penalties of perjury, I state that, to the best of my knowledge, this return is true, correct, and complete.

Signature

(____)_____
Daytime telephone number

____ / ____ / ____
Month Day Year

NS **DR**_____

IL-941 (R-12/11)

Mail to: ILLINOIS DEPARTMENT OF REVENUE
PO BOX 19052
SPRINGFIELD IL 62794-9052



Reset

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