### Form 944-X: Adjusted Employer's ANNUAL Federal Tax Return or Claim for Refund

(Rev. Febru	ry 2022) Department of the Treasury — Internal Revenue Service	OMB No. 1545-2007
Employe	identification number (EIN)	Return You're Correcting Enter the calendar year of the return
Name (no	t your trade name)	you're correcting: (YYYY)
Trade na	ne (if any)	
Address		Enter the date you discovered errors:
	Number Street Suite or room number	/ / / / / / / / / / / / / / / / / / /
	City State ZIP code	(MM / DD / YYYY)
_ '	Foreign country name Foreign province/county Foreign postal code	
ANNUAL	separate instructions before completing this form. Use this form to correct er Federal Tax Return. Use a separate Form 944-X for each year that needs corremplete all five pages. Don't attach this form to Form 944 unless you're reclassifying	ction. Type or print within the boxes. You
Part 1:	Select ONLY one process. See page 6 for additional guidance, incle employment tax credits and social security tax deferrals.	uding information on how to treat
	Adjusted employment tax creturn. Check this box if you underreported tax amounts. Also c	heck this box if you overreported tax amounts
<u></u>	and you would like to use the adjustment process to correct the errors. You must check this overreported tax amounts on this form. The amount shown on line 27, if less than zero, may Form 941, or Form 941-SS for the tax period in which you're filing this form.	box if you're correcting both underreported and
2.	Claim. Check this box if you overreported tax amounts only and you would like to use the clathe amount shown on line 27. Don't check this box if you're correcting ANY underreported to	
Part 2:	Complete the certifications.	
<b>3.</b>	certify that I've filed or will file Forms W-2, Wage and Tax Statement, or Forms W-2c, required.	Corrected Wage and Tax Statement, as
an	te: If you're correcting underreported tax amounts only, go to Part 3 on page 2 and skip line nounts, for purposes of the certifications on lines 4 and 5, Medicare tax doesn't include Addit correct overreported amounts of Additional Medicare Tax unless the amounts weren't withher	tional Medicare Tax. Form 944-X can't be used
	If you checked line 1 because you're adjusting overreported federal income tax, social edicare Tax, check all that apply. You must check at least one box.  I certify that:	security tax, Medicare tax, or Additional
	a. I repaid or reimbursed each affected employee for the overcollected social security t written statement from each affected employee stating that he or she hasn't claimed refund or credit for the overcollection.	
	<b>b.</b> The adjustments of social security tax and Medicare tax are for the employer's share each affected employee didn't give me a written statement that he or she hasn't clair a refund or credit for the overcollection.	
	c. The adjustment is for federal income tax, social security tax, Medicare tax, or Additional employee wages.	onal Medicare Tax that I didn't withhold from
	If you checked line 2 because you're claiming a refund or abatement of overreported feedicare tax, or Additional Medicare Tax, check all that apply. You must check at least one I certify that:	
	a. I repaid or reimbursed each affected employee for the overcollected social security t written statement from each affected employee stating that he or she hasn't claimed refund or credit for the overcollection.	
	b. I have a written consent from each affected employee stating that I may file this clair and Medicare tax overcollected in prior years. I also have a written statement from e hasn't claimed (or the claim was rejected) and won't claim a refund or credit for the claim.	ach affected employee stating that he or she
	c. The claim for social security tax and Medicare tax is for the employer's share only. I affected employee didn't give me a written consent to file a claim for the employee's or each affected employee didn't give me a written statement that he or she hasn't c claim a refund or credit for the overcollection.	share of social security tax and Medicare tax;
	d. The claim is for federal income tax, social security tax, Medicare tax, or Additional M employee wages.	
		Next ■►

		Column 1		Column 2		Column 3		Column 4
		Total corrected amount (for ALL employees)	_	Amount originally reported or as previously corrected (for ALL employees)	=	Difference (If this amount is a negative number, use a minus sign.)		Tax correction
6.	Wages, tips, and other compensation (Form 944, line 1)		] –		=			int in Column 1 pare your Forms W-2c.
7.	Federal income tax withheld from wages, tips, and other compensation (Form 944, line 2)		] –		=		Copy Column 3 here	
8.	Taxable social security wages (Form 944, line 4a, Column 1)		] –	• *If	= you	're correcting your employer	$ \times 0.124^* = $ The share only, use 0	.062. See instructions.
9.	Qualified sick leave wages* (Form 944, line 4a(i), Column 1)	* Lee line O only for explification	_		=		× 0.062 =	
10.	Qualified family leave wages* (Form 944, line 4a(ii), Column 1)		_	k leave wages paid after Ma	=		× 0.062 =	
11.	Taxable social security tips (Form 944, line 4b, Column 1)		] –		] =	're correcting your employer	× 0.124* =	
12.	Taxable Medicare wages & tips (Form 944, line 4c, Column 1)		] –		=	e correcting your employers	× 0.029* =	
13.	Taxable wages & tips subject to Additional Medicare Tax withholding (Form 944, line 4d, Column 1)		] –		=	orted in Column 3 shouldn't	× 0.009* =	
14.	Tax adjustments (Form 944, line 6)		] –		] =		Copy Column 3 here	
15.	Qualified small business payroll tax credit for increasing research activities (Form 944, line 8a; you must attach Form 8974)		] –		] =		See instructions	
16.	Nonrefundable portion of credit for qualified sick and family leave wages for leave taken before April 1, 2021 (Form 944, line 8b)		] –		=		See instructions	
17a.	Nonrefundable portion of employee retention credit (Form 944, line 8c)		] –		=		See instructions	
17b.	Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021 (Form 944, line 8d)		] –		] =		See instructions	
17c.	Nonrefundable portion of COBRA premium assistance credit (Form 944, line 8e)		] –		] =		See instructions	
17d.	Number of individuals provided COBRA premium assistance (Form 944, line 8f)		] –		=			
18.	Special addition to wages for federal income tax		] –		] =		See instructions	

		Column 1		Column 2		Column 3		Column 4
		Total corrected amount (for ALL employees)	_	Amount originally reported or as previously corrected (for ALL employees)	=	Difference (If this amount is a negative number, use a minus sign.)		Tax correction
€.	Special addition to wages for social security taxes		] –		] =		See instructions	
).	Special addition to wages for Medicare taxes		] –		] =		See instructions	
	Special addition to wages for Additional Medicare Tax		] –		] =		See instructions	
	Subtotal. Combine the amounts on	ı lines 7 through 21 of 0	Colu	ımn 4				
	Deferred amount of the employer share of social security tax* (Form 944, line 10b)	*Line 23 can only be used	_ if co	recting a 2020 Form 944.	] =		See instructions	
	Deferred amount of the employee share of social security tax* (Form 944, line 10c)	*Line 24 can only be used	] –		] =		See instructions	
	Refundable portion of credit for qualified sick and family leave wages for leave taken before April 1, 2021 (Form 944, line 10d)	Line 24 can only be used	_	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	] =		See instructions	
Э.	Refundable portion of employee retention credit (Form 944, line 10e)		] –		] =		See instructions	
<b>)</b> .	Refundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021 (Form 944, line 10f)		] –		] =		See instructions	
c.	Refundable portion of COBRA premium assistance credit (Form 944, line 10g)		] –		] =	_	See instructions	
	Total. Combine the amounts on line	es 22 through 26c of C	olur	nn 4				
	If line 27 is less than zero:  • If you checked line 1, this is the control of th	941 or Form 941-SS, Ene amount you want renis is the amount you	Emp func	loyer's QUARTERLY F ded or abated.	ede	eral Tax Return, see the	instructions.)	
	Qualified health plan expenses allocable to qualified sick leave wages for leave taken before April 1, 2021 (Form 944, line 15)		] –		] =			
	Qualified health plan expenses allocable to qualified family leave wages for leave taken before April 1, 2021 (Form 944, line 16)		] –		] =			
	Qualified wages for the employee retention credit (Form 944, line 17)		] –		] =			

#### Part 3: Enter the corrections for the calendar year you're correcting. If any line doesn't apply, leave it blank. (continued)

					_	,
		Column 1		Column 2		Column 3
		Total corrected amount (for ALL employees)	-	Amount originally reported or as previously corrected (for ALL employees)	=	Difference (If this amount is a negative number, use a minus sign.)
31.	Qualified health plan expenses for the employee retention credit (Form 944, line 18)		_		=	
32.	Credit from Form 5884-C, line 11, for the year* (Form 944, line 19)	*Line 32 can only be used i	_ f cor	recting a 2020 Form 944.	=	
Cautio	on: Lines 33-40 don't apply to years b	peginning before Janua	ry 1	, 2021.		
33.	Qualified sick leave wages for leave taken after March 31, 2021 (Form 944, line 19)		] –		=	
34.	Qualified health plan expenses allocable to qualified sick leave wages for leave taken after March 31, 2021 (Form 944, line 20)		] –		=	
35.	Amounts under certain collectively bargained agreements allocable to qualified sick leave wages for		] –		=	
	leave taken after March 31, 2021 (Form 944, line 21)					
36.	Qualified family leave wages for leave taken after March 31, 2021 (Form 944, line 22)		_		=	
37.	Qualified health plan expenses allocable to qualified family leave wages for leave taken after March 31, 2021 (Form 944, line 23)		] –		=	
38.	Amounts under certain collectively bargained agreements allocable to qualified family leave wages for leave taken after March 31, 2021 (Form		] –		=	
39.	944, line 24)  If you're eligible for the employee		1		l _	
	retention credit in the third quarter of 2021 solely because your business is a recovery startup business, enter the total of any amounts included on Form 944, lines 8c and 10e (or, if corrected, Form 944-X, lines 17a and 26a), for the third quarter of 2021 (Form 944, line 25)			•	=	
40.	If you're eligible for the employee retention credit in the fourth quarter of 2021 solely because your business is a recovery startup business, enter the total of any amounts included on Form 944, lines 8c and 10e (or, if corrected, Form 944-X, lines 17a and 26a), for the fourth quarter of 2021 (Form 944, line 26)		] –		=	

Name	e (not y	our trade name)		Employer id	enuncau	on number (EIN)	Correcting Calendar Year (YYYY)						
Par	t 4:	Explain your corrections for the	calendar year you	re corre	cting.								
	41.	Check here if any corrections you entered Explain both your underreported and overreported	on a line include both	underrepor		overreported an	nounts.						
	42.	Check here if any corrections involve reclassified workers. Explain on line 43.											
	43.	You must give us a detailed explanation of how you determined your corrections. See the instructions.											
	rt 5:	Sign here. You must complete al											
aco	compa	enalties of perjury, I declare that I have filed inying schedules and statements, and to the ban taxpayer) is based on all information of whic	est of my knowledge a	nd belief, it									
	Y				Print y								
4		Sign your			Print y	our							
		name here			title he								
_					Best	daytime phone							
Pa	ala Pi	reparer Use Only				Check if you'	re self-employed						
Pre	eparer	's name				PTIN							
Pre	eparer	's signature				Date	/ /						
Firi sel	m's na f-empl	me (or yours if loyed)				EIN							
Ad	dress					Phone							
Cit	:V		Stat	e		ZIP code							

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### Form 944-X: Which process should you use?

## Type of errors you're correcting

Unless otherwise specified in the separate instructions, an underreported employment tax credit or social security tax deferral should be treated like an overreported tax amount. An overreported employment tax credit or social security tax deferral 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 or social security tax deferral* 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 944-X.

## Overreported tax amounts ONLY

The process you use depends on **when** you file Form 944-X.

If you're filing Form 944-X MORE THAN 90 days before the period of limitations on credit or refund for Form 944 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 944, 941, or 941-SS for the period in which you file Form 944-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 944-X WITHIN 90 days of the expiration of the period of limitations on credit or refund for Form 944...

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 944-X.

If you're filing Form 944-X MORE THAN 90 days before the period of limitations on credit or refund for Form 944 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 944, 941, or 941-SS.

- File one Form 944-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 944-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 944-X.
- For the claim process, file a second Form 944-X to correct the overreported tax amounts. Check the box on line 2.

If you're filing Form 944-X WITHIN 90 days of the expiration of the period of limitations on credit or refund for Form 944...

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

File two separate forms.

- 1. For the adjustment process, file one Form 944-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 944-X.
- 2. For the claim process, file a second Form 944-X to correct the overreported tax amounts. Check the box on line 2.

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