

## 2014 941P-ME ATS Testing Draft 10/16/2014

The following 4 scenarios are required for 2014 941P-ME testing. The 941P is to be submitted through the profile affiliated with the type of federal return included in the submission. For example, if the federal return is an 1120S, then use the 1120 profile. If the federal return is a 1065, then use the 1065 profile. ATS testing will include both profiles.

See ATS test scenario descriptions below. Please use the following specific data provided for each scenario. Vendors must bundle both test scenarios for each profile in one single transmission without any errors.

**\*Important- The IRS assigned Test SSN and EIN series as indicated in each test scenario must be used for all testing..**

### **941P-ME ATS Test Scenario #1**

#### **1065 profile**

Pass Thru Test 1A

One Test Ln

Jay, ME 04239

EIN: 00-2999900

Calendar year: 01-01-2014 to 12-31-2014

Address change box: checked

Line A Sch 3P box: checked

Line B total non-residents: 2

Line 1 entity withholding: \$200

Line 2 estimated pymts: \$260

Line 3b overpayment: \$60

Line 4a Maine sales: \$5,000

Line 4b everywhere sales: \$9,000

Line 4c apportionment factor: .555556

Line 5 entity income or loss: \$3,000

#### **Business Representative data**

Please fill the following fields:

Business Representative Name

Telephone #

Email address

Date signed (yesterday's date)

#### **Preparer data**

Please fill in the following fields:

Preparer's Signature

Date (please use current date)

Telephone

Business name  
Address  
Preparer's ID#

**Schedule 2P**

1<sup>st</sup> Member:

Line 6 member: Bounty Hunter  
Line 7 EIN: 00-2999901  
Line 9 Distributive Share %: 25%  
Line 10 Maine Tax Withheld: \$100

2<sup>nd</sup> Member:

Line 6 member: Jack Rabbit  
Line 7 SSN: 400-00-6580  
Line 9 Distributive Share %: 25%  
Line 10 Maine Tax Withheld: \$100

**Schedule 3P**

1<sup>st</sup> Member:

Line 13 Partner/Shareholder Name: Betty Snowbird  
Line 14 SSN: 400-00-6581  
Line 16 Distributive Share: 25%  
Line 17 Participating in Composite Return: check

2<sup>nd</sup> Member

Line 13 Partner/Shareholder Name: Forgotten Path  
Line 14 EIN: 00-2999902  
Line 16 Distributive Share: 25%  
Line 17 Participating in Composite Return: check  
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**941P-ME ATS Test Scenario #2**

**1065 profile**

Pass Thru Test 2A  
Two Test Ln  
Jay, ME 04239  
EIN: 00-2999903  
Calendar year: 01-01-2014 to 12-31-2014  
Correspondence Indicator in XML checked  
Attachment included (anything can be used as an attachment)  
Amended return box: checked  
Line A Sch 3P box: checked  
Line B # of non-resident members: 2  
Line 1 entity withholding: \$800

Line 2 estimated pymts: \$300  
Line 3a amount due: \$500  
Sch 1P if fiscal year, enter dates 04/01/2014 to 03-31-2015  
Line 4a Maine sales: \$345,000  
Line 4b everywhere sales: \$850,456  
Line 4c apportionment factor: .405665  
Line 5 entity income or loss: \$750,789.00

**Business Representative data**

Please fill the following fields:  
Business Representative Name  
Telephone #  
Email address  
Date signed (yesterday's date)

**Preparer data**

Please fill in the following fields:  
Preparer's Signature  
Date (please use current date)  
Telephone  
Business name  
Address  
Preparer's ID#

**Schedule 2P**

**1<sup>st</sup> Member:**

Line 6 member: Buddy Inc  
Line 7 EIN: 00-2999904  
Line 9 Distributive Share %: 25%  
Line 10 Maine Tax Withheld: \$400

**2<sup>nd</sup> Member:**

Line 6 member: George Lion  
Line 7 SSN: 400-00-6582  
Line 9 Distributive Share %: 25%  
Line 10 Maine Tax Withheld: \$400

**Schedule 3P**

**1<sup>st</sup> Member:**

Line 13 Partner/Shareholder Name: Red Ryder  
Line 14 SSN: 400-00-6583  
Line 16 Distributive Share: 25%  
Line 17 Participating in Composite Return: check

**2<sup>nd</sup> Member**

Line 13 Partner/Shareholder Name: Sidney Inc  
Line 14 EIN: 00-2999905

Line 16 Distributive Share: 25%  
Line 17 Participating in Composite Return: check

**Financial Transaction**

State Payment:  
Checking account chosen  
Routing number 011200608  
Account number 258258  
Payment amount: \$500  
Requested payment date: (current date)  
Not an IAT transaction

**941P-ME ATS Test Scenario #3**

**1120 profile**

Pass Thru Test 3  
Three Test Ln  
Jay, ME 04239  
EIN: 00-2999905  
Calendar year: 01-01-2014 to 12-31-2014  
Address change box: checked  
Line A Sch 3P box: checked  
Line B total non-residents: 2  
Line 1 entity withholding: \$4,400  
Line 2 estimated pymts: \$5,000  
Line 3b overpayment: \$600  
Sch 1P if fiscal year, enter dates 04/01/2014 to 03-31-2015  
Line 4a Maine sales: \$76,000  
Line 4b everywhere sales: \$98,000  
Line 4c apportionment factor: .775510  
Line 5 entity income or loss: \$42,555

**Business Representative data**

Please fill the following fields:  
Business Representative Name  
Telephone #  
Email address  
Date signed (yesterday's date)

**Preparer data**

Please fill in the following fields:  
Preparer's Signature  
Date (please use current date)  
Telephone  
Business name  
Address

Preparer's ID#

**Schedule 2P**

1<sup>st</sup> Member:

Line 6 member: Fireball Inc  
Line 7 EIN: 00-2999906  
Line 9 Distributive Share %: 35%  
Line 10 Maine Tax Withheld: \$3,300

2<sup>nd</sup> Member:

Line 6 member: Ray Sun  
Line 7 SSN: 400-00-6584  
Line 9 Distributive Share %: 15%  
Line 10 Maine Tax Withheld: \$1,100

**Schedule 3P**

1<sup>st</sup> Member:

Line 13 Partner/Shareholder Name: Brook Trout  
Line 14 SSN: 400-00-6585  
Line 16 Distributive Share: 25%  
Line 17 Participating in Composite Return: check

2<sup>nd</sup> Member

Line 13 Partner/Shareholder Name: Due Date Inc  
Line 14 EIN: 00-2999907  
Line 16 Distributive Share: 25%  
Line 17 Participating in Composite Return: check

**941P-ME ATS Test Scenario #4**

**1120 profile**

Pass Thru Test 4  
Four Test Ln  
Jay, ME 04239  
EIN: 00-2999908  
Calendar year: 01-01-2014 to 12-31-2014  
Correspondence Indicator in XML checked  
Attachment included (anything as attachment)  
Amended change box: checked  
Line A Sch 3P box: checked  
Line B # of non-resident members: 2  
Line 1 entity withholding: \$8,400  
Line 2 estimated pymts: \$8,100  
Line 3a amount due: \$300

Line 4a Maine sales: \$845,000  
Line 4b everywhere sales: \$951000  
Line 4c apportionment factor: .888538  
Line 5 entity income or loss: \$450,646

**Business Representative data**

Please fill the following fields:  
Business Representative Name  
Telephone #  
Email address  
Date signed (yesterday's date)

**Preparer data**

Please fill in the following fields:  
Preparer's Signature  
Date (please use current date)  
Telephone  
Business name  
Address  
Preparer's ID#

**Schedule 2P**

1<sup>st</sup> Member:

Line 6 member: Bear Inc  
Line 7 EIN: 00-2999909  
Line 9 Distributive Share %: 25%  
Line 10 Maine Tax Withheld: \$4200

2<sup>nd</sup> Member:

Line 6 member: Mary Seasonal  
Line 7 SSN: 400-00-6586  
Line 9 Distributive Share %: 25%  
Line 10 Maine Tax Withheld: \$4200

**Schedule 3P**

1<sup>st</sup> Member:

Line 13 Partner/Shareholder Name: Easy Test  
Line 14 SSN: 400-00-6587  
Line 16 Distributive Share: 25%  
Line 17 Participating in Composite Return: check

2<sup>nd</sup> Member

Line 13 Partner/Shareholder Name: Keywest Sunset  
Line 14 EIN: 00-2999910  
Line 16 Distributive Share: 25%

Line 17 Participating in Composite Return: check

**Financial Transaction**

State Payment:

Checking account chosen

Routing number 011200608

Account number 258258

Payment amount: \$300

Requested payment date: (current date)

Not an IAT transaction