



2004

MAINE REVENUE SERVICES

040622000

EMPLOYER'S RETURN OF MAINE INCOME TAX WITHHELD

FORM 941ME LOOSE

Form header section including Quarter #, Withholding Account Number, Name and Address, and tax calculation lines 1-3.

Schedule 1

Reconciliation of 900ME Voucher Payments or EFT Payments of Income Tax Withholding

For employers required to remit withholding taxes on a semi-weekly basis (see instructions).

Table with 3 columns: Date Wages Paid, Amount Withheld, Check Amount. Repeated three times for reconciliation.

4. Total withholding this quarter (Enter here and on line 1 above)

5. Total semi-weekly payments remitted this quarter (Enter here and on line 2 above)

CANCELLATION NOTICE

6. Check this box and complete the following section if your business is discontinued or payment of wages permanently ceases.

FINAL checkbox

Reason for cancellation

Last Payroll Date: Business Sold to: (address):

Date Sold: Telephone:

Make check payable to: Treasurer, State of Maine

Mail to: Maine Revenue Services P.O. Box 1061 Augusta, ME 04332-1061

Rev 1/03

Office use only box

Note: Use the Name and Address Change Form (Form 941/C1C-ME) to change your business name or address.

Name: \_\_\_\_\_  
Withholding Account No.: \_\_\_\_\_  
Period Covered: \_\_\_\_\_

**FORM 941ME LOOSE**

**Income Tax Withholding Listing**

7. Employee Name (Last, First, MI)	8. Social Security Number	9. Maine Income Tax Withheld in Quarter
a. _____	____-____-____	\$ ____-____.____
b. _____	____-____-____	____-____.____
c. _____	____-____-____	____-____.____
d. _____	____-____-____	____-____.____
e. _____	____-____-____	____-____.____
f. _____	____-____-____	____-____.____
g. _____	____-____-____	____-____.____
h. _____	____-____-____	____-____.____
i. _____	____-____-____	____-____.____
j. _____	____-____-____	____-____.____
k. _____	____-____-____	____-____.____
l. _____	____-____-____	____-____.____
m. _____	____-____-____	____-____.____
n. _____	____-____-____	____-____.____
o. _____	____-____-____	____-____.____
p. _____	____-____-____	____-____.____
q. _____	____-____-____	____-____.____
r. _____	____-____-____	____-____.____
s. _____	____-____-____	____-____.____
t. _____	____-____-____	____-____.____
u. _____	____-____-____	____-____.____
v. _____	____-____-____	____-____.____
w. _____	____-____-____	____-____.____

10. Total on this page ..... 10. \_\_\_\_-\_\_\_\_.\_\_\_\_  
11. Total for ALL pages (Enter here and on page 1, line 4, or line 1, if not completing Schedule 1) ..... 11. \_\_\_\_-\_\_\_\_.\_\_\_\_