



Department of the Treasury
Internal Revenue Service
Ogden, UT 84201-0038

Notice	CP207
Tax period	September 30, 2020
Notice date	February 15, 2021
Employer ID number	47-1229072
To contact us	Phone 800-829-0115

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ABC HYDRAULIC LLC
COREY CARPENTER SOLE MBR
PO BOX 966
MOSES LAKE WA 98837-0145

We need more information regarding your September 30, 2020 Form number (941)

Submit the enclosed Schedule B (Form number (941))

We found errors or missing information in the Record of Federal Tax Liability (ROFTL) section of your September 30, 2020 Form number (941).

We need this information to verify the timeliness of your required deposits against your actual tax liability amounts and the dates these liabilities were incurred.

Please complete and return the enclosed Schedule B for your Form number (941) and the Response form by April 1, 2021.

What you need to do

Complete the enclosed Schedule B for your Form number (941). Have the appropriate person sign the attached Response form and return it with the completed Schedule B so we receive it by April 1, 2021.

To make sure your corrected Schedule B is accepted, please be sure to do the following:

- Report each tax liability, but don't include your deposits.
- Don't show negative amounts. If an adjustment results in a decrease in your tax liability, apply the decrease to the corresponding tax liability amount on the ROFTL but don't reduce the amount below zero. Apply any remaining decrease to later liability amounts.
- If you are required to follow a monthly deposit schedule, list the total liability amount for each month.
- If you are required to follow a semi-weekly deposit schedule, list tax liability amounts for each day in a month (rather than just the total for each month). See Additional information below for requirements.
- Check that the total amount on your Schedule B equals your total tax liability on your return.

If we don't hear from you

If we don't hear from you by April 1, 2021, we'll figure a penalty and send you a bill using the information available to us. We'll figure your penalty by averaging the total tax liability and distributing it equally throughout the tax period. Your deposits and payments will be applied to the average liabilities in the date order we received them. Any amounts not properly or timely deposited will be charged at the penalty rates explained below:

2% for deposits made 1 to 5 days late.

5% for deposits made 6 to 15 days late.

10% for deposits made 16 or more days late.

10% for amounts subject to electronic deposit requirements but not deposited using EFTPS.

15% for amounts unpaid more than 10 days after the date of the first notice we sent you requesting payment for the tax due.

Continued on back...



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INTERNAL REVENUE SERVICE
OGDEN, UT 84201-0038



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Fold here

Response form

Complete this form and send it to us with your Schedule B for Form number (941) in the enclosed envelope so we receive it by April 1, 2021. Be sure our address shows through the window.

Provide your contact information

If your address has changed, please call 800-829-0115 or visit www.irs.gov.

ABC HYDRAULIC LLC
COREY CARPENTER SOLE MBR
PO BOX 966
MOSES LAKE WA 98837-0145

Primary Phone	Best time to call	Secondary Phone	Best time to call
	☐ a.m. ☐ p.m.		☐ a.m. ☐ p.m.

1. Indicate your agreement

Under penalties of perjury, to the best of my knowledge, the information in the enclosed Schedule B (Form number (941)) and any supporting documentation is correct and complete. I understand that it is a permanent part of my record and will be used to adjust my return.

Signature _____ Date _____

Title _____

2. Send this Response form to us

Mail your Response form to us along with your Schedule B as soon as possible. If you're using your own envelope, mail your package to the address on this form.

Schedule B (Form 941):

960311

Report of Tax Liability for Semiweekly Schedule Depositors

OMB No. 1545-0029

(Rev. January 2017)

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 form with Form 941 or Form 941-SS, don't change your tax liability by adjustments reported on any Forms 941-X or 944-X. You must fill out this form and attach it to Form 941 or Form 941-SS 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 or Form 941-SS.

Total liability for the quarter

