Form **8974:** Qualified Small Business Payroll Tax Credit for Increasing Research Activities

951823

(Rev. December 2023) Department of the Treasury — Internal Revenue Service

OMB No. 1545-0029

Employer identification number (EIN) ☐☐ – ☐☐☐☐☐☐☐

Name *(not your trade name)* _____

The credit from Part 2, line 12 or, if applicable, line 17, will be reported on (check only one box):

☐ **Form 941** (all **941** series)

☐ **Form 943** (all **943** series)

☐ **Form 944** (all **944** series)

Calendar year _____   You must select a quarter if you file Form 941.

Report for this quarter...

Check only one box.

☐ **1:** January, February, March

☐ **2:** April, May, June

☐ **3:** July, August, September

☐ **4:** October, November, December

Part 1:   Tell us about your income tax return.

	(a) Ending date of income tax period	(b) Income tax return filed that included Form 6765	(c) Date income tax return was filed	(d) EIN used on Form 6765	(e) Amount from Form 6765, line 44 or, if applicable, the amount that was allocated to your EIN	(f) Amount of credit from column (e) taken on a previous period(s)	(g) Remaining credit (subtract column (f) from column (e))
1	/ /		/ /		.	.	.
2	/ /		/ /		.	.	.
3	/ /		/ /		.	.	.
4	/ /		/ /		.	.	.
5	/ /		/ /		.	.	.
6	Add lines 1(g) through 5(g) and enter the total here						.

Part 2:   Determine the credit that you can use this period.

7 Enter the amount from Part 1, line 6(g) . . . . **7** ☐ .

8 Enter the amount from Form 941, line 5a, column 2; Form 943, line 3; or Form 944, line 4a, column 2 . . **8** ☐ .

9 Enter the amount from Form 941, line 5b, column 2; or Form 944, line 4b, column 2 . . . . **9** ☐ .

10 Add lines 8 and 9 . . . . **10** ☐ .

11 Multiply line 10 by 50% (0.50). Check this box ☐ if you're a third-party payer of sick pay or check this box ☐ if you received a Section 3121(q) Notice and Demand. See the instructions before completing line 11 . . . . **11** ☐ .

12 **Credit against the employer share of social security tax.** Enter the smaller of line 7 or 11, but not more than $250,000. See the instructions before entering an amount if you file Form 943 or Form 944. If you entered the amount from line 7, stop here and also enter this amount on Form 941, line 11a; Form 943, line 12a; or Form 944, line 8a . . . . **12** ☐ .

13 Subtract line 12 from line 7 . . . . **13** ☐ .

14 Enter the amount from Form 941, line 5c, column 2; Form 943, line 5; or Form 944, line 4c, column 2 . . **14** ☐ .

15 Multiply line 14 by 50% (0.50). If you're a third-party payer of sick pay or you received a Section 3121(q) Notice and Demand, see the instructions before completing line 15 **15** ☐ .

16 **Credit against the employer share of Medicare tax.** Enter the smaller of line 13 or 15 . **16** ☐ .

17 **Total credit.** Add lines 12 and 16. Also, enter this amount on Form 941, line 11a; Form 943, line 12a; or Form 944, line 8a . . . . **17** ☐ .

For Paperwork Reduction Act Notice, see the separate instructions.   *www.irs.gov/Form8974*   Cat. No. 37797C   Form **8974** (Rev. 12-2023)