Use your mouse or Tab key to move through the fields. Use your mouse or space bar to enable check boxes.

Illinois Department of Revenue

Schedule P Illinois Withholding Schedule

Filing period: _____

Complete and attach to Form IL-941 and Form IL-941-X to verify Illinois income and withholding records. This form is **required.**

Business name _____ **FEIN** _____

Payee's/Employee's name	◇SSN (do not include dashes)◇	Income for Quarter	◇Withholding for Quarter◇

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This form is authorized under the Income Tax Act. Disclosure of this information is required. Failure to provide information may result in this form not being processed and may result in a penalty.

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