Illinois Department of Revenue

Schedule P Illinois Withholding Payroll Schedule

Filing period: ______________

Complete and attach to Form IL-941-X or Form IL-2000 to verify Illinois income and withholding records.

Business name ____ **FEIN** ________________________________

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

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.