Form 943 Department of the Treasury Internal Revenue Service		Employ	OMB No. 1545-0035								
			1993								
Your name	,						T				
address, employer		_			_		FF				
identification	on	Name (as distingu	ished from trade name)	Calendar year			FD				
number, and				E ' ''C			FP				
calendar		Trade name, if any	у	Employer identificat	tion number		I				
year of return.							T				
(If not		Address and ZIP	code		If	addre	ss is different				
correct, please								from prior return,			
change.)		_					nere				
If you do	not have to	file returns in the	future, write "FINAL RETUF	RN" here							
			s employed in the pay perio			1					
2 Tot	al wades sub	niect to social sec	urity taxes (see instructions)) 2							
3 So	cial socurity t	taves (multiply line	e 2 by 12.4% (.124))	,	· · · · · · · · · · · · · · · · · · ·	3					
4 Tot	al wades sub	piect to Medicare	taxes (see instructions) .								
5 Me	di wages sak dicara tavas	/multiply line / by	(2.9% (.029))		· · · · · · · · · · · · · · · · · · ·	5					
			instructions)			6					
7 Tot	al tavas (add	lines 3 5 and 6)				7		\top			
			941c (see instructions).			8					
			•			9		\top			
	otal taxes as adjusted (line 7 as adjusted by line 8)										
			ine 9)			11					
			g any overpayment from 19			12					
			m line 11—see instructions)			13					
			an line 11, enter here ►\$		to be: Applied to	$\overline{}$	eturn, or Refu	unded			
			ly depositor (see deposit rul								
			s than \$500, do not use this	your tax liability in the co							
			nem by January 31, 1994. If you	incurred.							
			d. Instead, complete and attach u are a monthly depositor, enter	The total tax liability	for the year (line M) sl	nould e	qual net taxes (line	a 11).			
Deposit period ending		Tax liability for mor	nth Deposit period ending	Tax liability for month	Deposit period end	ing	Tax liability for month				
A Janua	nry 31		F June 30		K November 30						
B Febru	ary 28		G July 31		L December 31						
C March 31			H August 31		M Total liability for						
D April 30			I September 30		year (add line	s A					
E May 3	31		J October 31		ťhrough L).						
~ :		es of perjury, I declare e, correct, and comple	that I have examined this return, inc	cluding accompanying schedu	ules and statements, and	to the	best of my knowled	dge and			
Sign	Deliei, It is IIU	ь, сонъст, ана сотпріє	ito.								
Here			Print	Your							
	Signature ►			e and Title >		Da	ite ▶				

Cat. No. 11252K

Form 943 (1993) Page **2**

General Instructions

Paperwork Reduction Act Notice.—We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is: Recordkeeping 9 hr., 34 min.; Learning about the law or the form 22 min.; Preparing the form 1 hr., 28 min.; Copying, assembling, and sending the form to the IRS 16 min. If you have comments concerning the accuracy of these time estimates or suggestions for making this form more simple, we would be happy to hear from you. You can write to both the Internal Revenue Service, Attention: Reports Clearance Officer, PC:FP, Washington, DC 20224; and the Office of Management and Budget, Paperwork Reduction Project (1545-0035), Washington, DC 20503. DO NOT send the tax form to either of these offices. Instead, see Where To File below. Social Security and Medicare Taxes.—The

security and \$135,000 for Medicare.

The social security tax rates are 6.2% and Medicare tax rates are 1.45% each for the employer and the employee. A 6.2% employee social security tax table and a 1.45% employee Medicare tax table are provided in Circular A, Agricultural Employer's Tax Guide.

1993 wage bases are \$57,600 for social

Reconciliation of Forms 943 and W-3.—To reduce the discrepancies between amounts reported on Forms W-2, W-3, and 943—

- 1. Be sure the amounts on Form W-3, Transmittal of Income and Tax Statements, agree with the total amounts from Forms W-2, Wage and Tax Statement.
- 2. Reconcile Form W-3 with your annual Form 943 by comparing amounts reported for—
- Social security wages, social security tips, and Medicare wages and tips. The amounts may not match if, for example, you made adjustments for a prior year on Form 941c. In that case, the amounts reported in boxes 13 and 14 of Form W-3 should include Form 941c adjustments only for the current year. If the Form 941c adjustments include amounts for a prior year, do not report those adjustments on the current year Forms W-2 and W-3.

 Social security and Medicare taxes. The amounts shown on the annual Form 943 including the current year adjustments should be approximately twice the amounts shown on Form W-3.

- Income tax withheld.
- Advance earned income credit.

As noted, amounts reported on Forms W-2, W-3, and 943 may not match for valid reasons. If they do not match, determine that the reasons are valid. Keep your reconciliation so you will have a record of why amounts did not match in case there are inquiries.

Additional Information.—Circular A has information you may need for social security tax, Medicare tax, Federal unemployment (FUTA) tax, and withheld income tax. It includes tables showing the social security tax, Medicare tax, and income tax to withhold from an employee's wages.

Purpose of Form.—Use Form 943 to report income tax withheld and employer and employee social security and Medicare taxes on farmworkers. Also, use this form to report taxes on wages of household employees in a private home on a farm operated for profit. They are considered farm employees. If you paid taxable wages to an employee for services other than farmwork, do not include them on Form 943. Instead, use Form 941, Employer's Quarterly Federal Tax Return. If you paid wages for domestic services in your private, nonfarm home, use Form 942, Employer's Quarterly Tax Return for Household Employees.

See Circular A for more information concerning agricultural employment tax returns. Who Must File.—File Form 943 if you paid to one or more farmworkers wages subject to social security and Medicare taxes or income tax withholding. For a definition of agricultural workers (farmworkers) and wages, see Circular A.

How To Determine if Social Security and Medicare Taxes Are Due and if the Wages Are Subject to Income Tax Withholding. The \$150 Test or the \$2,500 Test.—Employer and employee social security and Medicare taxes are due and the wages are subject to income tax withholding if you meet either test below.

- You pay an employee cash wages of \$150 or more in a calendar year for farmwork.
- You pay cash wages of \$2,500 or more to all of your farmworkers.

Exception: If you pay a farmworker less than \$150 in annual cash wages, those wages are not subject to social security and Medicare taxes even if you pay \$2,500 or more to all your farmworkers, if the farmworker:

- **a.** Is employed in agriculture as a hand harvest laborer.
- **b.** Is paid piece rates in an operation that is usually paid on a piece-rate basis in the region of employment,
- **c.** Commutes daily from his or her home to the farm, and
- **d.** Has been employed in agriculture less than 13 weeks in the preceding calendar year (1992).

The amounts you pay these seasonal farmworkers, however, count toward the \$2,500-or-more test for determining the social security and Medicare coverage of other farmworkers. If the \$2,500-or-more group test is not met, the \$150-or-more individual test still applies.

Social security and Medicare taxes apply to most payments of sick pay, including payments made by third parties such as insurance companies. For details, see **Pub. 952**, Sick Pay Reporting, and the instructions on Form W-3.

When To File.—For 1993, file Form 943 by January 31, 1994. However, if you made deposits on time in full payment of the taxes due for the year, you may take an additional 10 days from January 31 to file the return.

After you file your first return, we will send you a form every year. If you receive a form for a year in which you are not liable for filing, write "NONE" on line 11 and send the form back to the IRS.

If you stop paying wages during the year, file a final return for 1993. Be sure to fill in the line at the top. If you later become liable for any of the taxes, notify the IRS.

Where To File.—
If your legal residence,

If your legal residence, principal place of business, office, or agency is in File with the Internal Revenue Service Center at

Florida, Georgia, South Carolina

New Jersey, New York (New York City and counties of Nassau, Rockland, Suffolk, and Westchester) Atlanta, GA 39901

Return without payment: Holtsville, NY 00501

Return with payment: P.O. Box 254 Newark, NJ 07101-0254

Form Department of the Treasury

Indiana, Kentucky, Michigan,

Ohio, West Virginia

Kansas, New Mexico, Oklahoma, Texas

Return without

Chicago, IL 60680-6538

payment: Cincinnati, OH 45999

Return with payment: P.O. Box 6538

Austin, TX 73301

Employer's Annual Tax Return for Agricultural Employees

► For Paperwork Reduction Act Notice, see page 2.

OMB No. 1545-0035

► For more information, see Circular A.

YOU	JR C	OPY Befor	e filing the retu	urn, be	e sure to show on this	copy your name	, addr	ess, and employ	er ide	entification nu	mber.	
Name ▶					Employer identification number ▶							
Add	ress a	and ZIP cod	e ▶									
one tran	emplo sfer o	oyer to anoth ccurs, for exa	ner, each must fi ample, if a sole p	ile a se propriet	s sold or transferred by eparate return. Such a or forms a partnership ort wages paid by the	however, the cand report was	continu ges is	en a statutory mer ling corporation's of the same as if the ation or corporation	bligat conti	tion to file a Fo inuing corporati	rm 943	
If vo	u do	not have to	file returns in th	ne futu	re, write "FINAL RETURI	N" here		•				
1					ployed in the pay period				1			
2					taxes (see instructions)				-			
3	Soc	ial security t	axes (multinly li	ne 2 h	12 4% (124))			<u> </u>	3			
4	Tota	al wades sub	piect to Medicar	e taxe	y 12.4% (.124)) s (see instructions)		1					
5	Med	dicare taxes	(multiply line 4 l	bv 2.9	% (.029))				5			
6					ructions)				6			
7	Tota	ıl taxes (add	lines 3, 5, and	6) .					7			
8	Adju	ustment to ta	axes, attach For	m 941	c (see instructions)				8			
9	Tota	ıl taxes as a	djusted (line 7 a	ıs adju	sted by line 8)				9			
10					payments, if any (see ins				10			
11)				11			
12					y overpayment from 199				12			
13	Bala	ance due (s	ubtract line 12 f	rom lir	ne 11—see instructions).				13	<u></u>		
14								o be: 🗌 Applied to				
<u>Che</u>	ck if	you are a fir	st-time semiwee	ekly de	positor (see deposit rule	es on page 4).				<u></u>	<u> </u>	
recor are a	d. Pay semiw	the taxes with eekly depositor	Form 943 or deposit , do not use this rec	them by	n \$500, do not use this y January 31, 1994. If you tead, complete and attach a monthly depositor, enter	incurred.		umn next to the month for the year (line M) s		•		
Deposit period ending		riod ending	Tax liability for m	onth	Deposit period ending	Tax liability for mo	nth	Deposit period ending		Tax liability for	month	
Α.	Januar	v 31			F June 30			K November 30				
					G July 31			L December 31				
C March 31					H August 31			NA Total liability	· ·			
D April 30				I September 30			M Total liability year (add line					
<u>E</u>	May 3	<u> 1</u>			J October 31			through L).				
Sig			es of perjury, I decla e, correct, and comp		have examined this return, incl	uding accompanying	schedul	es and statements, and	d to the	best of my knowle	edge and	
He	ere Signature ▶				Print Your Name and Title ▶			Date ►				
New York (all other counties), Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont			Alaska, Arizona, California (counties of Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Glenn, Return without			due, (2) give Form W-2 to employees, (3) keep records, and (4) for filing false returns or submitting bad checks. Interest is charged on taxes paid late at the rate set by law. See						
Illinois, Iowa, Minnesota, Missouri, Wisconsin Kansas City, MO 64999			Humboldt, Lake, Lassen, Mari Mendocino, Modoc, Napa, Ne	evada, Ögden, UT 8420	1	Circular A for mor	e deta	ils.				
Delaware, District of Columbia, Maryland, Pennsylvania, Virginia Return without payment: Philadelphia, PA 19255			Placer, Plumas, Sacramento, San Joaquin, Shasta, Sierra, Siskiyou, Solano, Sonoma, Sutter, Tehama, Trinity, Yolo, and Yuba), Colorado, Idaho, Montana, Nebraska, Return with payment: P.O. Box 7028 San Francisco, CA 94120-7028			Caution: If income, social security, and Medicare taxes that must be withheld are not withheld or are not paid to the IRS, the Trust Fund Recovery Penalty may apply. The penalty is 100% of such unpaid taxes. This penalty may						
			Return with pa P.O. Box 2288' Newark, NJ 07101-2887		Nevada, North Dakota, Orego South Dakota, Utah, Washing Wyoming California (all other counties),		03888	apply to you if the immediately collect business. See Circ	se unp cted fro	paid taxes canno om the employer	ot be or	

Penalties and Interest.—There are penalties for filing a return late and paying or depositing taxes late, unless there is reasonable cause. If you are late, please attach an explanation to your return. There are also penalties for willful failure to (1) file returns and pay taxes when

Alabama, Arkansas, Louisiana, Mississippi, North Carolina,

If you have no legal residence

or principal place of business

Tennessee

in any state

Fresno, CA 93888

Memphis, TN 37501

Philadelphia, PA 19255

Forms W-2 and W-3.—By January 31, 1994, give Form W-2 to each employee who was working for you at the end of 1993. If an employee stops working for you before the end of the year, give him or her Form W-2 any time after employment ends but no later than January 31 of the following year. If the employee asks you for Form W-2, give him or her the completed form within 30 days of the request or the last wage payment, whichever is

By February 28, 1994, send Copy A of all Forms W-2 with Form W-3 to the SSA Data

Operations Center for your state. The addresses are in the instructions for Form W-3. Filing on Magnetic Media.—If you prepare 250 or more W-2s in 1 year, you are required to use magnetic media instead of filing Copy A of Form W-2. You can get the rules for reporting W-2 information on magnetic media from the Social Security Administration, Attn: Magnetic Media Group, P.O. Box 2317, Baltimore, MD 21235.

Specific Instructions

Line 1.—Do not include household employees in your private nonfarm home, persons who receive no pay during the pay period, pensioners, or members of the Armed Forces.

Line 2.—Show the total taxable cash wages you paid all your employees for farmwork in the calendar year. Do not include (a) the value of noncash items such as food or lodging or (b) pay for services other than farmwork. Report the full cash wages before tax was deducted. If you paid an employee more than \$57,600 in 1993, show only \$57,600 for that employee.

Line 4.—Show the total taxable cash wages you paid all your employees for farmwork in the calendar year. Do not include (a) the value of noncash items such as food or lodging or (b) pay for services other than farmwork. Report the full cash wages before tax was deducted. If you paid an employee more than \$135,000 in 1993, show only \$135,000 for that employee.

Line 6.—You must withhold income tax from employees from whom you withhold social security and Medicare taxes, see Circular A. Enter income tax withheld on wages paid to employees. If you are not required to withhold income tax, enter -0-.

Line 8.—Use line 8 to correct errors in social security and Medicare taxes reported on an earlier return or to correct errors in credits for overpayments of penalty or interest paid on tax for an earlier year. If you report both an underpayment and an overpayment, show only the difference. Because any amount shown on line 8 increases or decreases your tax liability, the adjustment must be included on your record of Federal tax liability on Form 943 or 943-A. Your deposit requirements determine which liability report is used. Include the adjustment in the report entry area that corresponds with the date on which the error was found.

Except for fractions of cents or third-party sick pay, explain any amount on line 8 on Form 941c, Supporting Statement to Correct Information, or attach a statement that shows: (a) what the error was, (b) year in which the error was made and the amount of the error, (c) year in which you found the error, (d) that you repaid the employee tax or got each affected employee's written consent to this refund or credit, if the entry corrects an overcollection, and (e) if the entry corrects social security and Medicare taxes overcollected in an earlier year, that you got from the employee a written statement that he or she has not claimed and will not claim a refund or credit for the amount.

If you are adjusting an employee's social security wages, Medicare wages, or tax withheld for a prior year, you must also file Form W-2c, Statement of Corrected Income and Tax Amounts, and Form W-3c, Transmittal of Corrected Income and Tax Statements, with the social security office where you filed Forms W-2. You can get these from the IRS.

Enter on Form 941c or include in the statement the total wages for all your employees as previously reported and as corrected. DO NOT file Form 941c separately from Form 943. Form 941c is not an amended return, but is a statement providing necessary certification background information supporting

the adjustments on line 8 on Form 943. You can get Form 941c from the IRS.

Fraction of cents.—If there is a difference between the total tax on lines 3 or 5 and the total deducted from your employees' wages because of fractions of cents added or dropped in collecting the tax, report the difference on line 8. If this difference is the only entry, write "Fractions only" in the margin.

Line 9.—Add line 7 to line 8 if reporting additional taxes. Subtract line 8 from line 7 if reducing taxes previously reported.

Line 10.—Employees who are eligible can receive advance EIC payments with their wages by giving you Form W-5, Earned Income Credit Advance Payment Certificate, annually. For details, see Circular A.

Line 12.—Show the total amount deposited for the year, including any overpayment from 1992, as shown in your records.

Line 13.—You should have a balance due only if your total tax liability for the year (line 11) is less than \$500.

Exception. The balance due may be \$500 or more if you are a monthly depositor and are making payments under the Accuracy of Deposits (98% Rule), discussed below. If line 11 is \$500 or more and you have deposited all taxes when due, the amount shown on line 13 (balance due) should be zero. Please write your EIN, "Form 943," and "1993" on your check. Caution: If you fail to make required deposits at a qualified depositary and instead pay these amounts with your return, you may be subject to a penalty.

Line 14.—If you deposited more than the correct amount for a year, you can have the overpayment refunded or applied to your next return.

Deposit requirements.—In general, you must deposit employer and employee social security taxes and withheld income tax of \$500 or more with an authorized financial institution or a Federal Reserve bank (FRB). Do not send deposits to the IRS or you will be subject to a penalty. Include Form 8109, Federal Tax Deposit Coupon, with each deposit. Please follow the instructions in the Federal Tax Deposit Coupon Book.

If you hand-deliver your deposit to an authorized depositary on the due date, be sure to deliver it before the depositary closes its business day. If you make your deposit with an FRB, it must be made with the one for your area. Also, it must be in a form of payment that the FRB considers to be an immediate credit item. If you need more information, contact an authorized depositary or an FRB.

Deposit Rules

For more details and examples of the following rules, see Circular A.

Warning: The new deposit rules were effective January 1, 1993.

These rules determine when you must deposit Federal employment taxes (other than FUTA taxes). They apply to backup withholding; Federal income tax withheld on wages, pensions, and annuities; and social security and Medicare taxes.

You are either (1) a monthly depositor or (2) a semiweekly depositor. However, if you accumulate taxes of \$100,000 or more at any time during the year, you are subject to the \$100,000 one-day deposit rule, discussed later. The IRS will notify you each November whether you are a monthly or a semiweekly depositor for the coming calendar year. If you do not receive the notification, you must determine your own deposit status. You determine your status at the beginning of the calendar year based on the total tax you

reported on your original Form 943 in the lookback period (explained below).

Lookback Period.—The lookback period is the second calendar year preceding the current calendar year. For example, the lookback period for the calendar year 1993 is the calendar year 1991.

Adjustments to lookback period taxes.—To determine your taxes for the lookback period, use only the tax you reported on the original return (Form 943). **Do not** include adjustments made on a supplemental return filed after the due date of the return. However, if you make adjustments on Form 943, the adjustments are included in the total tax for the period in which the adjustments are reported.

Monthly Depositor Rule.—If the total tax reported on Form 943 for the lookback period is \$50,000 or less, you are a monthly depositor for the current year. You must deposit employment taxes and taxes withheld on payments made during a calendar month by the 15th day of the following month.

New employers.—If you are a new employer, your taxes for the lookback period are considered to be zero. Therefore, you are a monthly depositor for the year in which you first became an employer (but see the \$100,000 One-Day Deposit Rule later). Semiweekly Depositor Rule.—If the total tax reported on Form 943 for the lookback period is more than \$50,000, you are a semiweekly depositor for the current year. If you are a semiweekly depositor, you must deposit on Wednesday and/or Friday depending on what day of the week you make payments as shown below:

Payment Days/Deposit Periods Deposit By

Wednesday, Thursday, and/or Friday. . . . Following Wednesday Saturday, Sunday, Monday, and/or Tuesday . . . Following Friday

Deposits on Banking Days Only.—If a deposit is required to be made on a Saturday, Sunday, or legal holiday, the deposit is considered to be made timely if it is made by the close of the next banking day.

\$100,000 One-Day Deposit Rule.—If you accumulate taxes of \$100,000 or more on any day during a deposit period, you must deposit it by the close of the next banking day, whether you are a monthly or a semiweekly depositor. For monthly depositors, the deposit period is a calendar month. For semiweekly depositors, the deposit periods are Wednesday through Friday and Saturday through Tuesday.

For purposes of the \$100,000 rule, do not continue accumulating taxes after the end of a deposit period.

If you are a monthly depositor and you accumulate \$100,000 on any day, you become a semiweekly depositor on the next day for the remainder of the calendar year and for the following calendar year.

Accuracy of Deposits (98% Rule).—You will satisfy your deposit obligation if you deposit timely at least 98% of the required deposit or all but \$100 of the required deposit. For this rule to apply, you must deposit any underpayment by the shortfall makeup date. See Circular A for the definition of shortfall.

\$500 Exception.—If you accumulate less than a \$500 tax liability during a year, no deposits are required. You may pay with the tax return for the year. However, if you are unsure that you will accumulate less than \$500 for the year, deposit under the appropriate rules so that you will not be subject to failure to deposit penalties.