Form **943-X:** Adjusted Employer's Annual Federal Tax Return for Agricultural (Rev. February 2011) Employees or Claim for Refund

nev. i ebiuary 201	i) = iii pi 0	-	nt of the Tre	asury – Inte	rnal Reven	ue Serv	ice		OMB No. 1	1545-000
Employer identi (EIN)	fication number								Return You Are Correcting Enter the Calendar Year of the ret	
Name (not your	trade name)								you are correcting:	
Trade Name (if	any)								(YYYY)	
Address										
	mber		Street	:			Suite or rooi	m number	Enter the date you discovered er	rors:
Ci	o correct errors				State		ZIP co		(MM / DD / YYYY)	
orrection. Plea	cultural Employ ase type or prir mplete all thre ect ONLY on	t within the e pages. R	boxes. D	o not atta	ach this f	orm to	Form 9	943.	form.	
and or for the	verreported amou e tax period in wh Check this box	unts on this fich you are f	form. The a filing this for eported ame	mount sho	wn on line	e 18, if vould li	less than	zero, ma	x if you are correcting both underreported by only be applied as a credit to your Form n process to ask for a refund or abatement of amounts on this form.	m 943
Note. If you a	quired. re correcting und	derreported	amounts	only, go to	Part 3 (s	skip line	es 4 and	5).	2c, Corrected Wage and Tax Statemen apply. (Check at least one.)	ıt,
I certif	fy that:									
		t from each	employee s						ax overcollected in prior years. I have a claim was rejected) and will not claim a	
		lid not give n	ne a writter						ly. I could not find the affected employee r the claim was rejected) and will not clair	
c.	The adjustment i	s for federal	income tax	c, social sec	curity tax,	and M	edicare t	ax that I c	did not withhold from employee wages.	
(Chec	checked line 2 l k at least one.) fy that:	pecause you	u are claim	iing a refui	nd or aba	atemer	t of ove	reported	l employment taxes, check all that app	oly.
		ach employe							ax overcollected in prior years. I have a w as rejected) and will not claim a refund or	
		licare tax ove	ercollected	in prior year	ars. I also	have a	written	statement	n for the employee's share of social t from each employee stating that he or s e overcollection.	she
	employee did no	t give me a v lid not give n	vritten cons ne a writter	sent to file a	a refund c	claim fo	r the em	ployee's s	could not find the affected employees; or share of social security and Medicare tax r the claim was rejected) and will not clair	; or
d.	The claim is for f	ederal incom	ne tax, soci	al security	tax, and N	/ledica	re tax tha	at I did no	t withhold from employee wages.	

Par	t 3: Enter the corrections for thi	is year. If any line o	loe	s not apply, leave i	t bla	ank.		
		Column 1 Total corrected	_	Column 2 Amount originally reported or as	=	Column 3 Difference (If this amount is a		Column 4
		amount (for ALL employees)		previously corrected (for ALL employees)		negative number, use a minus sign.)		Tax correction
6.	Total wages subject to social security tax (from line 2 of Form 943)		_		=	If you are correcting your empl	$\times .124^* =$ oyer share only, us	e .062. See instructions.
7.	Total wages subject to Medicare tax] –] =		× .029* =	0445 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(from line 4 of Form 943)		,		, "	you are correcting your emplo	yer snare only, use	e .0145. See instructions.
8.	Federal income tax withheld (from line 6 of Form 943)		_] =		Copy Column 3 here ►	*Commission of
9a.	Number of qualified employees paid exempt wages April 1 – December 31, 2010 (from line 7a of Form 943)*] –] =			*Complete lines 9a and 9b only for corrections to the 2010 Form 943.
9b.	Exempt wages paid to qualified employees April 1 – December 31, 2010 (from line 7b of Form 943)*] –] =		× .062 =	
10.	Tax adjustments (from line 8 of Form 943)		_] =		See instructions	
11.	Special addition to wages for federal income tax] –] =		See instructions	
12.	Special addition to wages for social security taxes		_] =		See instructions	
13.	Special addition to wages for Medicare taxes		_		=		See instructions	
14.	Subtotal: Combine the amounts in	n lines 6–13 of Colum	ın 4					
15.	Advance earned income credit (EIC) payments made to employees (from line 10 of Form 943)] –] =		See instructions	
16a.	COBRA premium assistance payments (from line 13a of Form 943)		_] =		See instructions	
16b.	Number of individuals provided COBRA premium assistance (from line 13b of Form 943)] –] =			*Complete lines 16c and 16d only for corrections to the 2010
16c.	Number of qualified employees paid exempt wages March 19–31, 2010 (from line 13c of Form 943)*] –] =			Form 943.
16d.	Exempt wages paid to qualified employees March 19–31, 2010 (from line 13d of Form 943)*] –] =		× .062 =	
17.	Total: Combine the amounts in lin	es 14–16d of Columr	ո 4					

Name	(not you	ur trade name)		Employer I	dentification Number (EIN)	Calendar Year (YYYY)
Pa	art 3: C	Continued				
18.			1 page 2			
		ne 18 is less than ze				
	• If y		his is the amount you want applied as	a credit to your	Form 943 for the tax perio	d in which you are filing
	• If y	you checked line 2, t	this is the amount you want refunded o	or abated.		
			zero, this is the amount you owe. Pa	y this amount wh	nen you file this return. For	information on how to
Pa	ırt 4: E	Explain your corre	ctions for this year.			
	19.		y corrections you entered on a lin underreported and overreported ar			rreported amounts.
	20.	Check here if an	y corrections involve reclassified	workers. Explai	in on line 21.	
	21.	You must give u	s a detailed explanation for how y	ou determined	your corrections. See the	ne instructions.
Pa	rt 5: S	Sian here. You mu	st complete all three pages of this	form and sign	it.	
Unc stat	der pena ements	alties of perjury, I decla that are attached, and	re that I have filed an original Form 943 and to the best of my knowledge and belief, th th preparer has any knowledge.	that I have examin	ned this adjusted return or clai	
.0 0		*	property rate any rate meage.		Print your name here	
4	X	Sign your name here			Print your	
					title here	
		Date			Best daytime phone	
Pa	id Pre	eparer Use Only		Check	if you are self-employed	
Pre	parer's	s name			PTIN	
	reparer's signature			Date		
	n's nam -emplo	ne (or yours if oyed)			EIN	
		Address			Phone	
		City		State	ZIP code	

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Type of errors you are correcting	Form 94	43-X: Which proces	ss should you use?			
Underreported amounts ONLY	 Use the adjustment process to correct underreported amounts. Check the box on line 1. Pay the amount you owe from line 18 when you file Form 943-X. 					
Overreported amounts ONLY	The process you use depends on when you file Form 943-X.	If you are filing Form 943-X MORE THAN 90 days before the period of limitations on credit or refund for Form 943 expires	Choose either process to correct the overreported amounts. Choose the adjustment process if you want the amount shown on line 18 credited to your Form 943 for the period in which you file Form 943-X. Check the box on line 1. OR Choose the claim process if you want the amount shown on line 18 refunded to you or abated. Check the box on line 2.			
		If you are filing Form 943-X WITHIN 90 days of the expiration of the period of limitations on credit or refund for Form 943	You must use the claim process to correct the overreported amounts. Check the box on line 2.			
BOTH underreported and overreported	The process you use depends on when you file Form 943-X.	If you are filing Form 943-X MORE THAN 90 days before the period of limitations on credit or refund for Form	Choose either the adjustment process or both the adjustment process and the claim process when you correct both underreported and overreported amounts.			
amounts		943 expires	Choose the adjustment process if you want to offset your underreported amounts with your overreported amounts.			
			 File one Form 943-X, and Check the box on line 1 and follow the instructions on line 18. 			
			OR			
			Choose both the adjustment process and claim process if you want the overreported amount refunded to you.			
			File two separate forms.			
			1. For the adjustment process, file one Form 943-X to correct the underreported amounts. Check the box on line 1. Pay the amount you owe from line 18 when you file Form 943-X.			
			2. For the claim process, file a second Form 943-X to correct the overreported amounts. Check the box on line 2.			
		If you are filing Form 943-X WITHIN 90 days of the expiration of the period of	You must use both the adjustment process and claim process.			
		limitations on credit or	File two separate forms:			
		refund for Form 943	 For the adjustment process, file one Form 943-X to correct the underreported amounts. Check the box on line 1. Pay the amount you owe from line 18 when you file Form 943-X. 			
			2. For the claim process, file a second Form 943-X to correct the overreported amounts. Check the box on line 2.			