

Form **943-X: Adjusted Employer's Annual Federal Tax Return for Agricultural Employees or Claim for Refund**

(Rev. February 2022)

Department of the Treasury — Internal Revenue Service

OMB No. 1545-0035

Employer identification number (EIN) -

Name (not your trade name)

Trade name (if any)

Address

Number Street Suite or room number

City State ZIP code

Foreign country name Foreign province/country Foreign postal code

Return You're Correcting...

Enter the calendar year of the return you're correcting:

(YYYY)

Enter the date you discovered errors:

/ /

(MM / DD / YYYY)

Read the separate instructions before completing this form. Use this form to correct errors you made on Form 943, Employer's Annual Federal Tax Return for Agricultural Employees. Use a separate Form 943-X for each year that needs correction. Type or print within the boxes. You MUST complete all five pages. Don't attach this form to Form 943 unless you're reclassifying workers; see the instructions for line 40.

Part 1: Select ONLY one process. See page 6 for additional guidance, including information on how to treat employment tax credits and social security tax deferrals.

- 1. Adjusted employment tax return.** Check this box if you underreported tax amounts. Also check this box if you overreported tax amounts and you would like to use the adjustment process to correct the errors. You must check this box if you're correcting both underreported and overreported tax amounts on this form. The amount shown on line 25, if less than zero, may only be applied as a credit to your Form 943 for the tax period in which you're filing this form.
- 2. Claim.** Check this box if you overreported tax amounts only and you would like to use the claim process to ask for a refund or abatement of the amount shown on line 25. Don't check this box if you're correcting ANY underreported tax amounts on this form.

Part 2: Complete the certifications.

- 3. I certify that I've filed or will file Forms W-2, Wage and Tax Statement, or Forms W-2c, Corrected Wage and Tax Statement, as required.**

Note: If you're correcting underreported tax amounts only, go to Part 3 on page 2 and skip lines 4 and 5. If you're correcting overreported tax amounts, for purposes of the certifications on lines 4 and 5, Medicare tax doesn't include Additional Medicare Tax. Form 943-X can't be used to correct overreported amounts of Additional Medicare Tax unless the amounts weren't withheld from employee wages.

- 4. If you checked line 1 because you're adjusting overreported federal income tax, social security tax, Medicare tax, or Additional Medicare Tax, check all that apply.** You must check at least one box.

I certify that:

- a.** I repaid or reimbursed each affected employee for the overcollected social security tax and Medicare tax for prior years. I have a written statement from each affected employee stating that he or she hasn't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection.
- b.** The adjustments of social security tax and Medicare tax are for the employer's share only. I couldn't find the affected employees or each affected employee didn't give me a written statement that he or she hasn't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection.
- c.** The adjustment is for federal income tax, social security tax, Medicare tax, or Additional Medicare Tax that I didn't withhold from employee wages.

- 5. If you checked line 2 because you're claiming a refund or abatement of overreported federal income tax, social security tax, Medicare tax, or Additional Medicare Tax, check all that apply.** You must check at least one box.

I certify that:

- a.** I repaid or reimbursed each affected employee for the overcollected social security tax and Medicare tax for prior years. I have a written statement from each affected employee stating that he or she hasn't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection.
- b.** I have a written consent from each affected employee stating that I may file this claim for the employee's share of social security tax and Medicare tax overcollected in prior years. I also have a written statement from each affected employee stating that he or she hasn't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection.
- c.** The claim for social security tax and Medicare tax is for the employer's share only. I couldn't find the affected employees; or each affected employee didn't give me a written consent to file a claim for the employee's share of social security tax and Medicare tax; or each affected employee didn't give me a written statement that he or she hasn't claimed (or the claim was rejected) and won't claim a refund or credit for the overcollection.
- d.** The claim is for federal income tax, social security tax, Medicare tax, or Additional Medicare Tax that I didn't withhold from employee wages.

Next

Part 3: Enter the corrections for the calendar year you're correcting. If any line doesn't apply, leave it blank.

	Column 1 <i>Total corrected amount (for ALL employees)</i>	Column 2 <i>Amount originally reported or as previously corrected (for ALL employees)</i>	Column 3 <i>Difference (If this amount is a negative number, use a minus sign.)</i>	Column 4 <i>Tax correction</i>
6. Wages subject to social security tax (Form 943, line 2)	<input type="text"/>	<input type="text"/>	<input type="text"/> × 0.124* =	<input type="text"/>
			* If you're correcting your employer share only, use 0.062. See instructions.	
7. Qualified sick leave wages* (Form 943, line 2a)	<input type="text"/>	<input type="text"/>	<input type="text"/> × 0.062 =	<input type="text"/>
	* Use line 7 only for qualified sick leave wages paid after March 31, 2020, for leave taken before April 1, 2021.			
8. Qualified family leave wages* (Form 943, line 2b)	<input type="text"/>	<input type="text"/>	<input type="text"/> × 0.062 =	<input type="text"/>
	* Use line 8 only for qualified family leave wages paid after March 31, 2020, for leave taken before April 1, 2021.			
9. Wages subject to Medicare tax (Form 943, line 4)	<input type="text"/>	<input type="text"/>	<input type="text"/> × 0.029* =	<input type="text"/>
	* If you're correcting your employer share only, use 0.0145. See instructions.			
10. Wages subject to Additional Medicare Tax withholding (Form 943, line 6)	<input type="text"/>	<input type="text"/>	<input type="text"/> × 0.009* =	<input type="text"/>
	* Certain wages reported in Column 3 shouldn't be multiplied by 0.009. See instructions.			
11. Federal income tax withheld (Form 943, line 8)	<input type="text"/>	<input type="text"/>	<input type="text"/>	Copy Column 3 here ► <input type="text"/>
12. Tax adjustments (Form 943, line 10)	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
13. Qualified small business payroll tax credit for increasing research activities (Form 943, line 12a; you must attach Form 8974)	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
14. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken before April 1, 2021 (Form 943, line 12b)	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
15a. Nonrefundable portion of employee retention credit (Form 943, line 12c)	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
15b. Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021 (Form 943, line 12d)	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
15c. Nonrefundable portion of COBRA premium assistance credit (Form 943, line 12e)	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
15d. Number of individuals provided COBRA premium assistance (Form 943, line 12f)	<input type="text"/>	<input type="text"/>	<input type="text"/>	
16. Special addition to wages for federal income tax	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
17. Special addition to wages for social security taxes	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
18. Special addition to wages for Medicare taxes	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
19. Special addition to wages for Additional Medicare Tax	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
20. Subtotal. Combine the amounts on lines 6 through 19 of Column 4				<input type="text"/>

Part 3: Enter the corrections for the calendar year you're correcting. If any line doesn't apply, leave it blank. (continued)

	Column 1	Column 2	Column 3	Column 4
	Total corrected amount (for ALL employees)	Amount originally reported or as previously corrected (for ALL employees)	Difference (If this amount is a negative number, use a minus sign.)	Tax correction
21. Deferred amount of the employer share of social security tax* (Form 943, line 14b)	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
*Line 21 can only be used if correcting a 2020 Form 943.				
22. Deferred amount of the employee share of social security tax* (Form 943, line 14c)	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
*Line 22 can only be used if correcting a 2020 Form 943.				
23. Refundable portion of credit for qualified sick and family leave wages for leave taken before April 1, 2021 (Form 943, line 14d)	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
24a. Refundable portion of employee retention credit (Form 943, line 14e)	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
24b. Refundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021 (Form 943, line 14f)	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
24c. Refundable portion of COBRA premium assistance credit (Form 943, line 14g)	<input type="text"/>	<input type="text"/>	<input type="text"/>	See instructions <input type="text"/>
25. Total. Combine the amounts on lines 20 through 24c of Column 4				<input type="text"/>
If line 25 is less than zero:				
<ul style="list-style-type: none"> • If you checked line 1, this is the amount you want applied as a credit to your Form 943 for the tax period in which you're filing this form. • If you checked line 2, this is the amount you want refunded or abated. 				
If line 25 is more than zero, this is the amount you owe. Pay this amount by the time you file this return. For information on how to pay, see <i>Amount you owe</i> in the instructions.				
26. Qualified health plan expenses allocable to qualified sick leave wages for leave take before April 1, 2021 (Form 943, line 18)	<input type="text"/>	<input type="text"/>	<input type="text"/>	
27. Qualified health plan expenses allocable to qualified family leave wages for leave taken before April 1, 2021 (Form 943, line 19)	<input type="text"/>	<input type="text"/>	<input type="text"/>	
28. Qualified wages for the employee retention credit (Form 943, line 20)	<input type="text"/>	<input type="text"/>	<input type="text"/>	
29. Qualified health plan expenses for the employee retention credit (Form 943, line 21)	<input type="text"/>	<input type="text"/>	<input type="text"/>	
30. Credit from Form 5884-C, line 11, for the year* (Form 943, line 22)	<input type="text"/>	<input type="text"/>	<input type="text"/>	
*Line 30 can only be used if correcting a 2020 Form 943.				

Part 3: Enter the corrections for the calendar year you're correcting. If any line doesn't apply, leave it blank. (continued)

Column 1	Column 2	Column 3
Total corrected amount (for ALL employees)	Amount originally reported or as previously corrected (for ALL employees)	Difference (If this amount is a negative number, use a minus sign.)
—	=	

Caution: Lines 31–38 don't apply to years beginning before January 1, 2021.

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|--|--|---|--|---|--|
| 31. Qualified sick leave wages for leave taken after March 31, 2021 (Form 943, line 22) | <input style="width: 100px; height: 20px;" type="text"/> | — | <input style="width: 100px; height: 20px;" type="text"/> | = | <input style="width: 100px; height: 20px;" type="text"/> |
| 32. Qualified health plan expenses allocable to qualified sick leave wages for leave taken after March 31, 2021 (Form 943, line 23) | <input style="width: 100px; height: 20px;" type="text"/> | — | <input style="width: 100px; height: 20px;" type="text"/> | = | <input style="width: 100px; height: 20px;" type="text"/> |
| 33. Amounts under certain collectively bargained agreements allocable to qualified sick leave wages for leave taken after March 31, 2021 (Form 943, line 24) | <input style="width: 100px; height: 20px;" type="text"/> | — | <input style="width: 100px; height: 20px;" type="text"/> | = | <input style="width: 100px; height: 20px;" type="text"/> |
| 34. Qualified family leave wages for leave taken after March 31, 2021 (Form 943, line 25) | <input style="width: 100px; height: 20px;" type="text"/> | — | <input style="width: 100px; height: 20px;" type="text"/> | = | <input style="width: 100px; height: 20px;" type="text"/> |
| 35. Qualified health plan expenses allocable to qualified family leave wages for leave taken after March 31, 2021 (Form 943, line 26) | <input style="width: 100px; height: 20px;" type="text"/> | — | <input style="width: 100px; height: 20px;" type="text"/> | = | <input style="width: 100px; height: 20px;" type="text"/> |
| 36. Amounts under certain collectively bargained agreements allocable to qualified family leave wages for leave taken after March 31, 2021 (Form 943, line 27) | <input style="width: 100px; height: 20px;" type="text"/> | — | <input style="width: 100px; height: 20px;" type="text"/> | = | <input style="width: 100px; height: 20px;" type="text"/> |
| 37. If you're eligible for the employee retention credit in the third quarter of 2021 solely because your business is a recovery startup business, enter the total of any amounts included on Form 943, lines 12c and 14e (or, if corrected, Form 943-X, lines 15a and 24a), for the third quarter of 2021 (Form 943, line 28) | <input style="width: 100px; height: 20px;" type="text"/> | — | <input style="width: 100px; height: 20px;" type="text"/> | = | <input style="width: 100px; height: 20px;" type="text"/> |
| 38. If you're eligible for the employee retention credit in the fourth quarter of 2021 solely because your business is a recovery startup business, enter the total of any amounts included on Form 943, lines 12c and 14e (or, if corrected, Form 943-X, lines 15a and 24a), for the fourth quarter of 2021 (Form 943, line 29) | <input style="width: 100px; height: 20px;" type="text"/> | — | <input style="width: 100px; height: 20px;" type="text"/> | = | <input style="width: 100px; height: 20px;" type="text"/> |

Form 943-X: Which process should you use?

Unless otherwise specified in the separate instructions, an underreported employment tax credit or social security tax deferral should be treated like an overreported tax amount. An overreported employment tax credit or social security tax deferral should be treated like an underreported tax amount. For more information, including which process to select on lines 1 and 2, see *Correcting an employment tax credit or social security tax deferral* in the separate instructions.

Type of errors you're correcting

Underreported tax amounts ONLY

Use the adjustment process to correct underreported tax amounts.

- Check the box on line 1.
- Pay the amount you owe from line 25 by the time you file Form 943-X.

Overreported tax amounts ONLY

The process you use depends on **when** you file Form 943-X.

If you're filing Form 943-X MORE THAN 90 days before the period of limitations on credit or refund for Form 943 expires...

Choose either the adjustment process or the claim process to correct the overreported tax amounts.

Choose the adjustment process if you want the amount shown on line 25 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 25 refunded to you or abated. Check the box on line 2.

If you're 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 tax amounts. Check the box on line 2.

BOTH underreported and overreported tax amounts

The process you use depends on **when** you file Form 943-X.

If you're filing Form 943-X MORE THAN 90 days before the period of limitations on credit or refund for Form 943 expires...

Choose either the adjustment process or both the adjustment process and the claim process when you correct both underreported and overreported tax amounts.

Choose the adjustment process if combining your underreported tax amounts and overreported tax amounts results in a balance due or creates a credit that you want applied to Form 943.

- File one Form 943-X, and
- Check the box on line 1 and follow the instructions on line 25.

OR

Choose both the adjustment process and the claim process if you want the overreported tax amount refunded to you or abated.

File two separate forms.

- 1. For the adjustment process**, file one Form 943-X to correct the underreported tax amounts. Check the box on line 1. Pay the amount you owe from line 25 by the time you file Form 943-X.
- 2. For the claim process**, file a second Form 943-X to correct the overreported tax amounts. Check the box on line 2.

If you're 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 both the adjustment process and the claim process.

File two separate forms.

- 1. For the adjustment process**, file one Form 943-X to correct the underreported tax amounts. Check the box on line 1. Pay the amount you owe from line 25 by the time you file Form 943-X.
- 2. For the claim process**, file a second Form 943-X to correct the overreported tax amounts. Check the box on line 2.