Instructions for Completing the 941 Employer's Quarterly Federal Tax Return

*Fields highlighted in yellow on the example 941 at the end of these instructions need to be completed.

The EIN is the Federal Identification Number that begins with 73 for conservation districts. Always be sure the EIN on the form you file exactly matches the EIN the IRS has assigned to your business. Be sure and carry this information forward to the second and third pages at the top.

Name / Address: Use the name and address that is associated with your EIN number that the IRS recognizes.

Check the appropriate box for the quarter.

Due Dates: Quarter 1 - April 30

Quarter 2 - July 31

Quarter 3 - October 31

Quarter 4 - January 31

Part 1:

Question 1 - Total number of employees for the quarter. This includes part-time/temporary employees who were paid wages at any point during the quarter.

Question 2 - Line 12 of the Payroll Worksheet for each month of the quarter added together for each employee. Be sure to add any longevity, one-time pay increases, or leave payout.

Question 3 - Line 13 of the Payroll Worksheet for each month of the quarter added together for each employee. Be sure to add any federal tax withholding for longevity, one-time pay increases, or leave payout.

Question 4: Do not check this box.

Question 5a – Column 1 - Line 6 of the Payroll Worksheet for each month of the quarter added together for each employee. Be sure to include any longevity, one-time pay increases, or leave payout.

Question 5a – Column 2 - Complete the math - multiplying Column 1 Box 5a x 0.124.

Question 5a (i) – Nothing goes in Column 1 or 2

Question 5a (ii) – Nothing goes in Column 1 or 2

Question 5b - Nothing goes in Column 1 or 2

Question 5c – Column 1 - Line 6 of the Payroll Worksheet for each month of the quarter added together for each employee. Be sure to include any longevity, one-time pay increases or leave payout.

Question 5c – Column 2 - Complete the math - multiplying Column 1 Box 5c x 0.029.

Question 5d - Nothing goes in Column 1 or 2

Question 5e - Complete according to the instructions on the form adding Column 2 - Box 5a and 5c.

Question 5f – Nothing goes in this box.

Question 6 – Complete according to the instructions on the form by adding Box 3 + Box 5e. Once this amount is figured **STOP!** Go to page 2 Part 2 of the report and complete line 16.

Part 2: This is the amount of federal monthly payroll tax that SHOULD HAVE BEEN

PAID each month in the respective quarter. This is the opportunity to reconcile the amounts that should have been paid with what was actually paid.

In theory the amounts should be the same. However if a mistake occurred in a month or a longevity or one time pay increase was missed the adjustments can be made here.

Question 16 - All districts will check the monthly scheduled depositor box and complete the tax liabilities for each month. Do the math for each month as instructed below and then add months 1, 2, and 3 together for the Total liability for the quarter. This amount must equal Line 10 and Line 12 on Page 1.

To calculate the monthly federal tax payment for the district:

From the payroll worksheet:

Line 6 * 15.3% + Line 13= Tax Payment for each employee. Add all employees together. Enter the total into the corresponding month box.

Go Back to Page 1 Part 1

Question 7 - Adjustments can be made for anything under \$1.00 when Box 6 and Box 10 of the 941 report do not match. This amount can be either added or subtracted. The need for adjustments can occur due to rounding when making the federal monthly tax deposits.

Question 8 – Nothing goes in this box.

Question 9 – Nothing goes in this box.

Question 10 - Must equal "Total Liability for the Quarter" under Part 2 - Line 16 on Page 2.

Question 11a – Nothing goes in this box.

Question 11b – Nothing goes in this box.

Question 11c – Nothing goes in this box.

Part 1 Page 2

Question 11d – Nothing goes in this box.

Question 11e – Nothing goes in this box.

Question 11f – Nothing goes in this box.

Question 11g – Nothing goes in this box.

Question 12 – Must equal Line 10 and must equal "Total Liability for the Quarter" under Part 2 - Line 16 on Page 2.

Question 13a - This is the amount of all federal tax deposits that were made for the quarter. Total all the 941 payments made for the quarter and enter the amount in the box.

If this amount does not equal Box 12 you have either over paid or under paid. If you believe it is necessary to complete a 941X to correct a mistake PLEASE CONTACT THE COMMISSION FOR ASSISTANCE.

Question 13b – Nothing goes in this box.

Question 13c – Nothing goes in this box.

Question 13d – Nothing goes in this box.

Question 13e – Nothing goes in this box.

Question 13f – Nothing goes in this box.

Question 13g – Should equal box 13a.

Question 13h – Nothing goes in this box.

Question 13i – Nothing goes in this box.

Question 14 – Do the math; if line 12 is less than 13g you have underpaid the 941 taxes for the quarter and a balance is due. Enter the amount due, if applicable, in box 14; if no balance is due, leave box 14 blank. If a balance is due, payment should be made electronically through the EFTPS process as a balance due on a return. Be sure and select the proper quarter to apply the payment to.

Question 15 – Do the math; if line 13g is more than line 12 you have overpaid the 941 taxes for the quarter and a refund is due. Enter the amount overpaid, if applicable, in box 15 and check "Send a refund;" if no balance is due, leave box 15 blank and do not check a box.

Part 3 Page 3 – Nothing to complete here unless the District is going out of business. If that is the case, please contact OCC for assistance.

Part 4:

You must check "yes" in this box and complete the name, phone number and 5-digit pin if the district wants to allow a district employee (such as the district secretary, who usually completes the report) to discuss this report with the IRS.

Part 5:

The person completing the report must sign and date it here. Be sure and keep a copy of the report and make note of the date it was sent. The report must be mailed to:

Department of Treasury Internal Revenue Service Ogden, UT 84201-0005

950122 **941 for 2022:** Employer's **QUARTERLY** Federal Tax Return OMB No. 1545-0029 Report for this Quarter of 2022 Employer identification number (EIN) (Check one.) Name (not your trade name) 1: January, February, March 2: April, May, June Trade name (if any) 3: July, August, September 4: October, November, December Address Number Street Suite or room number Go to www.irs.gov/Form941 for instructions and the latest information. ZIP code City State Foreign country name Foreign province/county Foreign postal code Read the separate instructions before you complete Form 941. Type or print within the boxes. Answer these questions for this quarter. Part 1: Number of employees who received wages, tips, or other compensation for the pay period including: June 12 (Quarter 2), Sept. 12 (Quarter 3), or Dec. 12 (Quarter 4) 1 2 Wages, tips, and other compensation . . Federal income tax withheld from wages, tips, and other compensation . 3 Check and go to line 6. If no wages, tips, and other compensation are subject to social security or Medicare tax Column 1 Column 2 *Include taxable qualified sick and Taxable social security wages*. \times 0.124 = 5a family leave wages paid in this quarter of 2022 for leave taken $\times 0.062 =$ (i) Qualified sick leave wages* 5a after March 31, 2021, and before October 1, 2021, on line 5a. Use (ii) Qualified family leave wages* \times 0.062 = 5a lines 5a(i) and 5a(ii) only for taxable qualified sick and family leave Taxable social security tips . $\times 0.124 =$ 5b wages paid in this quarter of 2022 for leave taken after March 31, Taxable Medicare wages & tips. \times 0.029 = 2020, and before April 1, 2021. 5c Taxable wages & tips subject to 5d \times 0.009 = Additional Medicare Tax withholding Total social security and Medicare taxes. Add Column 2 from lines 5a, 5a(i), 5a(ii), 5b, 5c, and 5d 5e 5e Section 3121(q) Notice and Demand—Tax due on unreported tips (see instructions) 5f 5f Total taxes before adjustments. Add lines 3, 5e, and 5f. 6 Current quarter's adjustment for fractions of cents . 8 Current quarter's adjustment for sick pay . 8 Current quarter's adjustments for tips and group-term life insurance 9 10 Total taxes after adjustments. Combine lines 6 through 9 Qualified small business payroll tax credit for increasing research activities. Attach Form 8974 11a Nonrefundable portion of credit for qualified sick and family leave wages for leave taken 11b before April 1, 2021 Reserved for future use . . ► You MUST complete all three pages of Form 941 and SIGN it.

For Privacy Act and Paperwork Reduction Act Notice, see the back of the Payment Voucher.

Form 941 (Rev. 6-2022)

Cat. No. 17001Z

Name ((not your trade name)	Employer identification number (EIN)	
		- 13 Table 1	
Part 1: Answer these questions for this quarter. (continued)			
11d		• taken 11d	
11e	Reserved for future use	11e	
11f	Reserved for future use		
1 <mark>1</mark> g	Total nonrefundable credits. Add lines 11a, 11b, and 11d	11g	
12	Total taxes after adjustments and nonrefundable credits. Subtract line 11g from line	10 . 12	
13a	Total deposits for this quarter, including overpayment applied from a prior quart overpayments applied from Form 941-X, 941-X (PR), 944-X, or 944-X (SP) filed in the current of		
13b	Reserved for future use	13b	
13c	Refundable portion of credit for qualified sick and family leave wages for leave before April 1, 2021	taken 13c	
13d	Reserved for future use	13d	
13e	Refundable portion of credit for qualified sick and family leave wages for leave after March 31, 2021, and before October 1, 2021		
13f	Reserved for future use	13f	
13g	Total deposits and refundable credits. Add lines 13a, 13c, and 13e	13g	
13h	Reserved for future use	13h	
13i	Reserved for future use	13i	
14	Balance due. If line 12 is more than line 13g, enter the difference and see instructions.	14 u	
15	Overpayment. If line 13g is more than line 12, enter the difference	Check one: Apply to next return. Send a refund.	
Part 2: Tell us about your deposit schedule and tax liability for this quarter.			
If you're unsure about whether you're a monthly schedule depositor or a semiweekly schedule depositor, see section 11 of Pub. 15.			
Line 12 on this return is less than \$2,500 or line 12 on the return for the prior quarter was less than \$2,500, and you didn't incur a \$100,000 next-day deposit obligation during the current quarter. If line 12 for the prior quarter was less than \$2,500 but line 12 on this return is \$100,000 or more, you must provide a record of your federal tax liability. If you're a monthly schedule depositor, complete the deposit schedule below; if you're a semiweekly schedule depositor, attach Schedule B (Form 941). Go to Part 3.			
	You were a monthly schedule depositor for the entire quarter. Enter your tax liability for each month and total liability for the quarter, then go to Part 3.		
	Tax liability: Month 1		
	Month 2		
	Month 3		
Total liability for quarter Total must equal line 12.			
You were a semiweekly schedule depositor for any part of this quarter. Complete Schedule B (Form 941), Report of Tax Liability for Semiweekly Schedule Depositors, and attach it to Form 941, Go to Part 3.			

Name (not your trade name)	Employer identification number (EIN)		
Part :	3: Tell us about your business. If a question does NOT apply to your busines	ss, leave it blank.		
17	17 If your business has closed or you stopped paying wages			
	enter the final date you paid wages / / ; also attach a statement to	your return. See instructions.		
18	If you're a seasonal employer and you don't have to file a return for every quarter	of the year Check here.		
19	Qualified health plan expenses allocable to qualified sick leave wages for leave taken before Apr	il 1, 2021 19		
20	Qualified health plan expenses allocable to qualified family leave wages for leave taken before Ap	ril 1, 2021 20		
21	Reserved for future use	21		
22	Reserved for future use	22		
23	Qualified sick leave wages for leave taken after March 31, 2021, and before October	1,2021 23		
24	Qualified health plan expenses allocable to qualified sick leave wages reported on			
25	Amounts under certain collectively bargained agreements allocable to qualif leave wages reported on line 23	ied sick 25 ■		
26	Qualified family leave wages for leave taken after March 31, 2021, and before October	1, 2021 26		
27	Qualified health plan expenses allocable to qualified family leave wages reported or			
28	Amounts under certain collectively bargained agreements allocable to qualifie			
	leave wages reported on line 26	28		
Part 4		his return with the IDS? See the instructions		
Do you want to allow an employee, a paid tax preparer, or another person to discuss this return with the IRS? See the instructions for details.				
Yes. Designee's name and phone number				
Select a 5-digit personal identification number (PIN) to use when talking to the IRS.				
□ No.				
Part 5: Sign here. You MUST complete all three pages of Form 941 and SIGN it. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge				
and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Print your				
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	Date / / Be	st daytime phone		
Paid Preparer Use Only Check if you're self-employed				
Prepa	arer's name	PTIN		
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