At the top of each page of this form, write, "This return is filed under authorization granted in accordance with Section 3504 of the Internal Revenue Code."

Complete with Fiscal/Employer Agent's separate EIN. This EIN should <i>only</i> Fiscal/Employer Agent. After Fiscal/Employer Agent's name, write "HCSR Agen	
941 for 2015: Employer's QUARTERLY Federal Tax Return 950114 Nev. January 2015) Department of the Treasury – Internal Revenue Service OMB No. 1545-0029 Report for this Quarter of 2015 Report for this Quarter of 2015	Check box for the quarter represented on this return.
Employer identification number (EIN) (Check one.) Name (not your trade name) 1: January, February, March Trade name (# any) 2: April, May, June 3: July, August, September 3: July, August, September	Enter the number of participants' employees paid in quarter. Do not include employees of Fiscal/Employer Agent.
Address Number Street Suite or room number Instructions and prior year forms are available at www.irs.gov/form941.	Enter sum of total wages and other compensation paid to all participants' employees.
Foreign country name Foreign province/country Foreign postal code ead the separate instructions before you complete Form 941. Type or print within the boxes. Foreign postal code Cart 1: Answer these questions for this quarter.	Enter total Federal Income Tax withheld from wages etc. reported in Box 2.
1 Number of employees who received wages, tips, or other compensation for the pay period including: Mar. 12 (Quarter 1), June 12 (Quarter 2), Sept. 12 (Quarter 3), or Dec. 12 (Quarter 4) 1 2 Wages, tips, and other compensation 2 3 Federal income tax withheld from wages, tips, and other compensation 3 4 If no wages, tips, and other compensation are subject to social security or Medicare tax Check and go to line 6.	A Fiscal/Employer Agent would very rarely check Box 4. This would only happen if all employees either earned less than the FICA threshold for the year OR were FICA exempt family employees, students or foreign employees.
Column 1 Column 2 5a Taxable social security wages • × .124 = • 5b Taxable social security tips • × .124 = • 5c Taxable Medicare wages & tips • × .029 = • 5d Taxable wages & tips subject to Additional Medicare Tax withholding • × .009 = •	Note that if a single Fiscal/Employer Agent serves multiple participant direction programs, wages, taxes, employees ,etc. for all programs represented by the Fisca/Employer Agent and its separate EIN should be reported on a single IRS Form 941. Records for each individual program should be maintained by Fiscal/Empoyer Agent.
In Box 5a and 5c, Column 1, enter all Social Security & Medicare taxable wages. Do not Include wages that were lower than the FICA threshold for the	
year and have already had withheld FICA refunded (this would only happen for the 4th Qtr. 941). Do not enter wages paid to FICA exempt family employees.	tiplication shown and enter the product in Column 2.
Example of First Half of Page 1 of IRS Form 941	

Used for Fiscal/Employer Agent

To File Employers' Quarterly Tax Return in Aggregate

		;			
5e	Add Column 2 from lines 5a, 5b, 5c, and 5d	Perform the calculation shown, and enter the			
5f	Section 3121(q) Notice and Demand-Tax due on unreported tips (see instructions) 5f	result in 5e.			
6	Total taxes before adjustments. Add lines 3, 5e, and 5f				
7	Current quarter's adjustment for fractions of cents	5f should generally be blank for Fiscal/Employer Agent			
8	Current quarter's adjustment for sick pay	Forms 941.			
9	Current quarter's adjustments for tips and group-term life insurance				
10	Total taxes after adjustments. Combine lines 6 through 9	Perform the calculation shown and enter the result in 6. Complete lines 7,8 and 9 as			
11	1 Total deposits for this quarter, including overpayment applied from a prior quarter and overpayments applied from Form 941-X, 941-X (PR), 944-X, 944-X (SP) filed in the current quarter				
12	Balance due. If line 10 is more than line 11, enter the difference and see instructions 12	Perform the calculation shown and enter the result in 10.			
13	Overpayment. If line 11 is more than line 10, enter the difference Check one: Apply to next return Send a refund.				
You MUST complete both pages of Form 941 and SIGN it. Next					
	rivacy Act and Paperwork Reduction Act Notice, see the back of the Payment Voucher. Cat. No. 17001Z Form 941 (Rev. 2015)	Enter total deposits made this quarter using EFTPS or other method.			
	a value is entered in Box 13, the Agent has deposited more tax than is due. The Agent can apply the over- leposited tax to a future return or request that the US	Ensure this value includes any overpayments from a			
	Treasury sends as a refund check. interest.	prior quarter or 941X.			

Example of Second Half of Page 1 of IRS Form 941 Used for Fiscal/Employer Agent to File Employers' Quarterly Tax Return in Aggregate

	950214	· · · · · · · · · · · · · · · · · · ·
Name (not your tradie name)	Employer identification number (EIN)	Enter Fiscal/Employer Agent's name and EIN as recorded on Page 1 of Form 941.
Part 2- Tell us about your deposit schedule and tax liability for this quarter.		recorded on Fage 1 of Form 941.
If you are unsure about whether you are a monthly schedule depositor or a semiwee (Circular E), section 11.	ekly schedule depositor, see Pub. 15	·····
14 Check one: Line 10 on this return is less than 32,500 or line 10 on the return for the prix \$100,000 next-day deposit obligation during the current quarter. If line 10 for the is \$100,000 next-day deposit obligation during the current quarter. If line 10 for the is \$100,000 next-day deposit obligation during the current quarter. If line 10 for the schedule below, if you are a semiweekly schedule depositor, attach Schedule B For You were a monthly schedule depositor for the entire quarter. liability for the quarter, then go to Part 3. Tax liability: Month 1 Month 2 Month 3 Total liability for quarter Total liability for quarter Month 2 Month 3 Total liability for quarter	e prior quarter was less than \$2,500 but line 10 on this return au are a monthly schedule depositor, complete the deposit m 941). Go to Part 3.	Agents are either monthly or semi-weekly depositors. It is critical to deposit per the correct schedule to avoid penalties and interest. See Publication 15, Circular E for information on when to deposit. If the Agent is a semi-weekly depositor, Schedule B must be completed.
You were a semiweekly schedule depositor for any part of this Report of Tax Liability for Semiweekly Schedule Depositors, and at		
Part 3: Tell us about your business. If a question does NOT apply to your business 15 If your business has closed or you stopped paying wages	ter of the year Check here.	Complete Section 14 per instructions. Note that the Agent's tax liability for a time period and the tax that was actually deposited for the time period may be different. Report liability, not deposits, in this section.
Yes. Designee's name and phone number Select a 5-digit Personal Identification Number (PIN) to use when talking to the No.		
Sign your name here Pr	Information of which prepare has any knowledge. Int your	If the Agent will not serve as an Agent after this quarter, check the box on 15 and enter the last date that wages were paid to participants' employees.
Date / Hitl Date / Be Paid Preparer Use Only Only Preparer's name Only Preparer's signature Only Firm's name (or yours) Only	e here	Complete Part 4 per instructions. Complete Schedule B if Agent is a semi-weekly depositor and submit both pages of Form 941 and any schedules to the IRS based on Agent's location: http://www.irs. gov/file/article/0,,id=111163,00.html
If self-employed) Address	Phone	<u>.</u>
City State	ZIP code	Complete part 5 as applicable.
Page 2	Form 941 (Rev. 1-2015)	
	nple of Page 2 of IRS Form	0/1

Example of Page 2 of IRS Form 941 Used for Fiscal/Employer Agent to File Employers' Quarterly Tax Return in Aggregate