

October 1, 2023

Tax Year 2023  
943 MeF ATS Scenario 5  
Lilac Farms and Fertilization  
00-3775634

The information below identifies the contents of this scenario:

- Form 943
- Form 94-A

This return results in an overpayment and send refund. This is the most current copy of Form 943 and Form 943-A available at this time.

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OMB No. 1545-0035

2023

Form **943**  
Department of the Treasury  
Internal Revenue Service

**Employer's Annual Federal Tax Return  
for Agricultural Employees**

Go to [www.irs.gov/Form943](http://www.irs.gov/Form943) for instructions and the latest information.

<b>Type or Print</b>	Name (as distinguished from trade name) <u>Lilac Farms and Fertilization</u>	Employer identification number (EIN) 00 - 3775634	<b>If address is different from prior return, check here</b> <input type="checkbox"/>
	Trade name, if any		
	Address (number and street) <u>1st Test Street</u>		
	City or town, state or province, country, and ZIP or foreign postal code <u>Fort Washington, MD 20744</u>		
	If you don't have to file returns in the future, check here <input type="checkbox"/>		

<b>1</b>	Number of agricultural employees employed in the pay period that includes March 12, 2023	<b>1</b>	4	
<b>2</b>	Wages subject to social security tax*	<b>2</b>	36,449	95
<b>a</b>	Qualified sick leave wages*	<b>2a</b>		
<b>b</b>	Qualified family leave wages*	<b>2b</b>		
<b>3</b>	Social security tax (multiply line 2 by 12.4% (0.124))	<b>3</b>	4,519	79
<b>a</b>	Social security tax on qualified sick leave wages (multiply line 2a by 6.2% (0.062))	<b>3a</b>		
<b>b</b>	Social security tax on qualified family leave wages (multiply line 2b by 6.2% (0.062))	<b>3b</b>		
<b>4</b>	Wages subject to Medicare tax	<b>4</b>	36,449	95
<b>5</b>	Medicare tax (multiply line 4 by 2.9% (0.029))	<b>5</b>	1,057	05
<b>6</b>	Wages subject to Additional Medicare Tax withholding	<b>6</b>		
<b>7</b>	Additional Medicare Tax withholding (multiply line 6 by 0.9% (0.009))	<b>7</b>		
<b>8</b>	Federal income tax withheld	<b>8</b>	220	20
<b>9</b>	Total taxes before adjustments. Add lines 3, 3a, 3b, 5, 7, and 8	<b>9</b>	5,797	04
<b>10</b>	Current year's adjustments	<b>10</b>		
<b>11</b>	Total taxes after adjustments (line 9 as adjusted by line 10)	<b>11</b>		
<b>12a</b>	Qualified small business payroll tax credit for increasing research activities. Attach Form 8974	<b>12a</b>		
<b>b</b>	Nonrefundable portion of credit for qualified sick and family leave wages for leave taken before April 1, 2021	<b>12b</b>		
<b>c</b>	Reserved for future use	<b>12c</b>		
<b>d</b>	Nonrefundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021, and before October 1, 2021	<b>12d</b>		
<b>e</b>	Reserved for future use	<b>12e</b>		
<b>f</b>	Reserved for future use			
<b>g</b>	Total nonrefundable credits. Add lines 12a, 12b, and 12d	<b>12g</b>		
<b>13</b>	Total taxes after adjustments and nonrefundable credits. Subtract line 12g from line 11	<b>13</b>	5,797	04

**You MUST complete all three pages of Form 943 and SIGN it.**

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<b>14a</b>	Total deposits for 2023, including overpayment applied from a prior year and Form 943-X . . . . .	<b>14a</b>	6,130	00
<b>b</b>	Reserved for future use . . . . .	<b>14b</b>		
<b>c</b>	Reserved for future use . . . . .	<b>14c</b>		
<b>d</b>	Refundable portion of credit for qualified sick and family leave wages for leave taken before April 1, 2021 . . . . .	<b>14d</b>		
<b>e</b>	Reserved for future use . . . . .	<b>14e</b>		
<b>f</b>	Refundable portion of credit for qualified sick and family leave wages for leave taken after March 31, 2021, and before October 1, 2021 . . . . .	<b>14f</b>		
<b>g</b>	Reserved for future use . . . . .	<b>14g</b>		
<b>h</b>	Total deposits and refundable credits. Add lines 14a, 14d, and 14f . . . . .	<b>14h</b>	6,130	00
<b>i</b>	Reserved for future use . . . . .	<b>14i</b>		
<b>j</b>	Reserved for future use . . . . .	<b>14j</b>		
<b>15</b>	<b>Balance due.</b> If line 13 is more than line 14h, enter the difference and see the instructions . . . . .	<b>15</b>		
<b>16</b>	<b>Overpayment.</b> If line 14h is more than line 13, enter the difference . . . . .	<b>16</b>	332	96

INTERNAL USE ONLY

- **All filers:** If line 13 is less than \$2,500, **don't** complete line 17 or Form 943-A.
- **Semiweekly schedule depositors:** Complete Form 943-A and check here
- **Monthly schedule depositors:** Complete line 17 and check here

<b>17 Monthly Summary of Federal Tax Liability</b> (Don't complete if you were a semiweekly schedule depositor.)						
	Tax liability for month		Tax liability for month		Tax liability for month	
<b>A</b> January . . . . .			<b>F</b> June . . . . .		<b>K</b> November . . . . .	
<b>B</b> February . . . . .			<b>G</b> July . . . . .		<b>L</b> December . . . . .	
<b>C</b> March . . . . .			<b>H</b> August . . . . .		<b>M</b> Total liability for year (add lines <b>A</b> through <b>L</b> ) . . . . .	
<b>D</b> April . . . . .			<b>I</b> September . . . . .			
<b>E</b> May . . . . .			<b>J</b> October . . . . .			

DRAFT AS OF  
April 27, 2023

<b>18</b>	Qualified health plan expenses allocable to qualified sick leave wages for leave taken before April 1, 2021 . . . . .	<b>18</b>		
<b>19</b>	Qualified health plan expenses allocable to qualified family leave wages for leave taken before April 1, 2021 . . . . .	<b>19</b>		
<b>20</b>	Reserved for future use . . . . .	<b>20</b>		
<b>21</b>	Reserved for future use . . . . .	<b>21</b>		

**You MUST complete all three pages of Form 943 and SIGN it.**

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22	Qualified sick leave wages for leave taken after March 31, 2021, and before October 1, 2021 . . .	22		
23	Qualified health plan expenses allocable to qualified sick leave wages reported on line 22 . . .	23		
24	Amounts under certain collectively bargained agreements allocable to qualified sick leave wages reported on line 22 . . . . .	24		
25	Qualified family leave wages for leave taken after March 31, 2021, and before October 1, 2021 . . .	25		
26	Qualified health plan expenses allocable to qualified family leave wages reported on line 25 . . .	26		
27	Amounts under certain collectively bargained agreements allocable to qualified family leave wages reported on line 25 . . . . .	27		
28	Reserved for future use . . . . .	28		
29	Reserved for future use . . . . .	29		

**Third-Party Designee** Do you want to allow another person to discuss this return with the IRS? See the separate instructions.  Yes. Complete the following.  No.

<b>Designee's name</b>	<b>Phone no.</b>	<b>Personal identification number (PIN)</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Sign Here** 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.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Print your name and title** \_\_\_\_\_

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	David Smith				P-00000001
	Firm's name Smith RA Service			Firm's EIN	00-9999887
	Firm's address 67 Freeby St. Fort Washington, MD 20744			Phone no.	555-555-5555

Form 943 (2023)

April 27, 2023

**Agricultural Employer's Record of  
 Federal Tax Liability**  
 Go to [www.irs.gov/Form943A](http://www.irs.gov/Form943A) for instructions and the latest information.  
 File with Form 943 or Form 943-X.

Name (as shown on Form 943) <u>Lilac Farms and Fertilization</u>	Employer identification number (EIN) 00-3775634
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You must complete this form if you're a semiweekly schedule depositor or became one because your accumulated tax liability during any month was \$100,000 or more. Show tax liability here, not deposits. (The IRS gets deposit data from electronic funds transfers.) Don't change your current year tax liability by adjustments reported on any Forms 943-X.

January Tax Liability			February Tax Liability			March Tax Liability		
1	16		1	16		1	16	
2	17		2	17		2	17	
3	18	235.10	3	18		3	18	
4	19		4	19		4	19	
5	20		5	20	255.41	5	20	
6	21		6	21		6	21	255.41
7	22		7	22		7	22	
8	23		8	23		8	23	
9	24	255.41	9	24		9	24	
10	25		10	25		10	25	235.10
11	26		11	26		11	26	
12	27		12	27		12	27	
13	28		13	28		13	28	
14	29		14	29	235.10	14	29	
15	30		15			15	30	
	31						31	
<b>A Total liability for month</b>		490.51	<b>B Total liability for month</b>		490.51	<b>C Total liability for month</b>		490.51

April Tax Liability			May Tax Liability			June Tax Liability		
1	16		1	16		1	16	
2	17		2	17		2	17	
3	18		3	18	235.10	3	18	255.41
4	19		4	19		4	19	
5	20	255.41	5	20		5	20	
6	21		6	21		6	21	
7	22		7	22		7	22	
8	23		8	23		8	23	
9	24		9	24		9	24	235.10
10	25		10	25		10	25	
11	26	235.10	11	26		11	26	
12	27		12	27		12	27	
13	28		13	28	255.41	13	28	
14	29		14	29		14	29	
15	30		15	30		15	30	
	31			31				
<b>D Total liability for month</b>		490.51	<b>E Total liability for month</b>		490.51	<b>F Total liability for month</b>		490.51

July Tax Liability			August Tax Liability			September Tax Liability		
1		16	1		16	1		16
2		17	2		17	2		17
3	255.41	18	3		18	3		18
4		19	4		19	4		19
5		20	5		20	5		20
6		21	6		21	6	255.41	21
7		22	7		22	7		22
8		23	8		23	8		23
9		24	9		24	9		24
10		25	10		25	10		25
11		26	11	235.10	26	11		26
12		27	12		27	12		27
13		28	13		28	13		28
14		29	14		29	14		29
15		30	15		30	15	255.41	30
		31			31			
<b>G Total liability for month</b>			<b>H Total liability for month</b>			<b>I Total liability for month</b>		
490.51			490.51			490.51		

October Tax Liability			November Tax Liability			December Tax Liability		
1		16	1		16	1		16
2		17	2		17	2	255.41	17
3		18	3		18	3		18
4		19	4		19	4		19
5		20	5		20	5		20
6	255.41	21	6		21	6		21
7		22	7		22	7		22
8		23	8		23	8		23
9		24	9		24	9		24
10		25	10		25	10		25
11		26	11		26	11		26
12		27	12		27	12		27
13		28	13		28	13		28
14		29	14	255.41	29	14		29
15		30	15		30	15		30
		31			31			
<b>J Total liability for month</b>			<b>K Total liability for month</b>			<b>L Total liability for month</b>		
490.51			401.43			490.51		
<b>M Total tax liability for year (add lines A through L). This must equal line 13 on Form 943</b>								5,797.04