(Rev. January 1994) Department of the Treasury

4141

Employer's Quarterly Tax Return for Household Employees Medicare, and Withheld Income Taxes) See s

OMB No. 1545-0034

• Enclose but do not staple your payment with this return.

Inte	nal Revenue Service	(FOI	Social Secu	rity, iviedica	re, and v	vvitnneia	income i	axes) Se	ee separ	ate instr	uctions.				
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the	cial security and calendar quarte	r covered	by this ret	urn. For in	format	ion on F	ederal (Jnempl	loyment	t (FUTA) Tax, s	wag ee pa	es of \$50 ige 3 of li	or m	tions.
	ou will NOT need											•			· [_]
1	Total cash wages s	subject to s	ocial securit	y taxes (see	e page 1	of Instru	uctions) .	1				1			T
												_			
_	Social security ta			•							·, ·	2			
3	Total cash wages	subject to	Medicare t	axes (see p	page 1 c	of Instru	ctions) .	3			1				
4	Medicare taxes (multiply lir	ne 3 by 2.9	% (.029))								4			<u> </u>
5	Federal income t	tax withhe	ld (if reque	sted by yo	ur emp	loyee) (s	see page	2 of In	structio	ns) .		5			-
6	Total taxes (add	lines 2, 4,	and 5) .									6			
7	Advance earned i	ncome cre	dit (EIC) pa	yments ON	LY, if a	ny (see _l	page 2 of	f Instruc	ctions) .			7			-
8	Total taxes due If no tax is due, Send Form 942	write NO	NE								[8	a 2 of Ins	structi	ons)
				•											
ımı	oortant: You MUST	give a Fori	n w-2 to ea	cn employe	e and III	e Copy /	4 with the	Social	Security	Admini	istration	ı—see	page 3 o	Tinstru	ictions.
	ler penalties of perjury	, I declare tha	at I have exan	nined this retu	urn, and to	o the best	of my kno	owledge a	ind belief,	it is true,	correct,	and co	mplete.		
	nature employer ►									[Date ►				
					(Cat. No. 1	0250E						Form 9	42 (Re	ev. 1-94)
					DO	O NOT D	ETACH								
Form	942-V (Rev. January 1994) Department of the Treasu	ury	ter below th		aid with	this retu	rn. (if an y	of the	preprint	ed infor		is	OMB No	. 1545-	0034
	Internal Revenue Service	<u> </u>	incorrect	, make the	change	3 UH FUI	111 74Z, N	ot on th	e payine	ziit vouc					
									nter an			\$ _			
													payable		

Form 942 (Rev. January 1994) Department of the Treasury Internal Revenue Service

Employer's Quarterly Tax Return for Household Employees

(For Social Security, Medicare, and Withheld Income Taxes) See separate Instructions.

OMB No. 1545-0034

KEEP FOR YOUR RECORDS

	Name			Date quarter ended							
ΙΝ	Address IPORTANT: Keep the employer	r your	your name, address, ne return.								
	Make ch	eck or money orde	r payable to, and ma	ail to, the Internal Ro	evenue Servi	ce.					
Sc	ocial security and Med e calendar quarter cov	dicare taxes are duvered by this return.	e for each household For information on F	d employee to whon ederal Unemployme	n you paid ca ent (FUTA) Tax	sh wag k, see pa	es of \$50 or age 3 of Instri	more in uctions.			
lf :	you will NOT need to fi	ile Form 942 in the	future, check here .								
2	Social security taxes	otal cash wages subject to social security taxes (see page 1 of Instructions) . focial security taxes (multiply line 1 by 12.4% (.124))									
၁	Total Casif Wages Subje	ect to iviedicate taxes	s (see page 1 of instruc	clions) . L	l I						
4	Medicare taxes (multi	4									
5	Federal income tax w	5									
6	Total taxes (add lines	6									
7	Advance earned incom	Advance earned income credit (EIC) payments ONLY, if any (see page 2 of Instructions)									
8	Total taxes due (subtract line 7 from line 6). Pay this amount to the Internal Revenue Service. If no tax is due, write NONE										
 Im	portant: You MUST give	, , ,		<u> </u>			,				
			. ,								
qu	Employee Information (Optional).—The schedule below will help you complete Form W-2. Fill in the spaces that apply each quarter; add the quarterly amounts at the end of the year; and complete Form W-2. If you have more than one employee, you may keep a similar record for each employee.										
No	ote: The box numbers of	or letters below corr	respond to the box nu	ımbers or letters on F	orm W-2.						
	Employee's social security number (box d)	,	Employee's name, address, and ZIP code (boxes e and f)								
	Wages subject to income tax (box 1) w	Federal income tax vithheld (if any) (box 2)	Wages subject to social security taxes (box 3)	Employee social security tax withheld (box 4)	Wages subje Medicare taxes						