FORM
WA

OREGON AGRICULTURAL ANNUAL WITHHOLDING TAX RETURN
For 1996 and Subsequent Tax Years

Year

Agricultural employers who qualify to file annually may use this form. Use your federal Form 943 and your Oregon withholding tax records to complete this information. **REMEMBER —** the due dates for paying your Oregon withholding taxes are the same as the due dates for making your federal deposits.

Revenue Use Only
Date Received

THIS RETURN IS DUE BY

NO PAYROLL: If you had no payroll write -0- in Box 1 and Box 2. Sign Form WA and file by the due date.

Business name and address

Business ID Number

BOX 1 Fill in Oregon gross payroll for the calendar year. Include total wages, salaries, commissions, bonuses, fees, etc.

BOX 2 Enter total Oregon tax withheld from employees pay this year (from Sections A and B).

BOX 3 Enter total Oregon tax paid this year.

BOX 4 AMOUNT DUE—If Box 3 is less than Box 2, enter difference in Box 4. Include payment and payment coupon **(Form OTC)** with this return.

BOX 5 CREDIT—If Box 3 is more than Box 2, enter difference in Box 5.

1	Fill in Oregon gross payroll paid		
2	Total Oregon tax withheld		
3	Total Oregon tax paid		
4	AMOUNT DUE		
5	CREDIT		

Section A: Complete if you are a monthly depositor. Enter Oregon tax liability in column next to the month liability was incurred.

Deposit Period Ending	Tax Liability for Month	Deposit Period Ending	Tax Liability for Month	Deposit Period Ending	Tax Liability for Month
A January 31..................		**F** June 30.......................		**K** November 30..............	
B February 28		**G** July 31		**L** December 31..............	
C March 31		**H** August 31		**Total for year**	
D April 30		**I** September 30.............		(Enter here and in Box 2 above)	
E May 31........................		**J** October 31			

Section B: You must complete this section if you are required to deposit on a semiweekly basis, or if your federal tax liability on any day is $100,000 or more. Enter Oregon tax liability here, not deposits.

A. Daily Tax Liability — January				B. Daily Tax Liability — February				A. Daily Tax Liability — March			
1		16		1		16		1		16	
2		17		2		17		2		17	
3		18		3		18		3		18	
4		19		4		19		4		19	
5		20		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	
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		29		14		29	
15		30		15				15		30	
		31								31	
Total Liability for Month A →				Total Liability for Month B →				Total Liability for Month C →			

1. Total for Quarter (Add lines A, B, and C) .... →

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Second, third, and fourth quarter information on page 2

D. Daily Tax Liability — April				E. Daily Tax Liability — May				F. Daily Tax Liability — June			
1		16		1		16		1		16	
2		17		2		17		2		17	
3		18		3		18		3		18	
4		19		4		19		4		19	
5		20		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	
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		29		14		29	
15		30		15		30		15		30	
						31					
Total Liability for Month D �				Total Liability for Month E �				Total Liability for Month F �			

2. Total for Quarter (Add lines D, E, and F) .... �

G. Daily Tax Liability — July				H. Daily Tax Liability — August				I. Daily Tax Liability — September			
1		16		1		16		1		16	
2		17		2		17		2		17	
3		18		3		18		3		18	
4		19		4		19		4		19	
5		20		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	
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		29		14		29	
15		30		15		30		15		30	
		31				31					
Total Liability for Month G �				Total Liability for Month H �				Total Liability for Month I �			

3. Total for Quarter (Add lines G, H, and I) .... �

J. Daily Tax Liability — October				K. Daily Tax Liability — November				L. Daily Tax Liability — December			
1		16		1		16		1		16	
2		17		2		17		2		17	
3		18		3		18		3		18	
4		19		4		19		4		19	
5		20		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	
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		29		14		29	
15		30		15		30		15		30	
		31								31	
Total Liability for Month J �				Total Liability for Month K �				Total Liability for Month L �			

4. Total for Quarter (Add lines J, K, and L) .... �

5. TOTAL FOR YEAR (Add lines 1, 2, 3 and 4) (enter here and in Box 2 on the front) .... �

In addition to Form WA, be sure to file Form WR, Oregon Withholding Tax Annual Reconciliation Report, by the last day of March following the year being filed. For more information, call the Oregon Department of Revenue, 503-945-8091.

SIGN HERE �	This report is true, correct, and is filed under penalty of false swearing.	Date	Your Telephone No.

Mail to:
**Oregon Department of Revenue
PO Box 14800
Salem OR 97309-0920**

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