

**Form 8941 - Small Emp. Health Ins. Prem. Credit**

<b>TSJ</b>  <b>PAN</b>	<div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto; line-height: 20px;">1</div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto; line-height: 20px;">2</div>	<p style="text-align: center;"><b>Worksheet 1 - Most Employees</b></p> <p>Complete the columns below for all employees who are not "excluded." ("Excluded" employees include business owners, partners, more-than-2% shareholders, etc. See Screen Help and Form 8941 instructions for more information.)</p> <p><b>IMPORTANT: Hawaii employers do not qualify for the credit.</b></p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th rowspan="2">Employee Identifier</th> <th colspan="2">Hours of Service</th> <th colspan="2">Wages Paid</th> <th rowspan="2">Employer Premiums Paid 2018</th> <th rowspan="2">Employer Premiums Paid 2019</th> <th rowspan="2">Average Premiums</th> </tr> <tr> <th>2018</th> <th>2019</th> <th>2018</th> <th>2019</th> </tr> </thead> <tbody> <tr><td>3</td><td></td><td>4</td><td></td><td>5</td><td></td><td>6</td><td>7</td></tr> <tr><td>8</td><td></td><td>9</td><td></td><td>10</td><td></td><td>11</td><td>12</td></tr> <tr><td>13</td><td></td><td>14</td><td></td><td>15</td><td></td><td>16</td><td>17</td></tr> <tr><td>18</td><td></td><td>19</td><td></td><td>20</td><td></td><td>21</td><td>22</td></tr> <tr><td>23</td><td></td><td>24</td><td></td><td>25</td><td></td><td>26</td><td>27</td></tr> <tr><td>28</td><td></td><td>29</td><td></td><td>30</td><td></td><td>31</td><td>32</td></tr> <tr><td>33</td><td></td><td>34</td><td></td><td>35</td><td></td><td>36</td><td>37</td></tr> <tr><td>38</td><td></td><td>39</td><td></td><td>40</td><td></td><td>41</td><td>42</td></tr> <tr><td>43</td><td></td><td>44</td><td></td><td>45</td><td></td><td>46</td><td>47</td></tr> <tr><td>48</td><td></td><td>49</td><td></td><td>50</td><td></td><td>51</td><td>52</td></tr> <tr><td>53</td><td></td><td>54</td><td></td><td>55</td><td></td><td>56</td><td>57</td></tr> <tr><td>58</td><td></td><td>59</td><td></td><td>60</td><td></td><td>61</td><td>62</td></tr> <tr><td>63</td><td></td><td>64</td><td></td><td>65</td><td></td><td>66</td><td>67</td></tr> <tr><td>68</td><td></td><td>69</td><td></td><td>70</td><td></td><td>71</td><td>72</td></tr> <tr><td>73</td><td></td><td>74</td><td></td><td>75</td><td></td><td>76</td><td>77</td></tr> <tr><td>78</td><td></td><td>79</td><td></td><td>80</td><td></td><td>81</td><td>82</td></tr> <tr><td>83</td><td></td><td>84</td><td></td><td>85</td><td></td><td>86</td><td>87</td></tr> <tr><td>88</td><td></td><td>89</td><td></td><td>90</td><td></td><td>91</td><td>92</td></tr> <tr><td>93</td><td></td><td>94</td><td></td><td>95</td><td></td><td>96</td><td>97</td></tr> <tr><td>98</td><td></td><td>99</td><td></td><td>100</td><td></td><td>101</td><td>102</td></tr> <tr><td>103</td><td></td><td>104</td><td></td><td>105</td><td></td><td>106</td><td>107</td></tr> <tr><td>108</td><td></td><td>109</td><td></td><td>110</td><td></td><td>111</td><td>112</td></tr> <tr><td>113</td><td></td><td>114</td><td></td><td>115</td><td></td><td>116</td><td>117</td></tr> <tr><td>118</td><td></td><td>119</td><td></td><td>120</td><td></td><td>121</td><td>122</td></tr> <tr><td>123</td><td></td><td>124</td><td></td><td>125</td><td></td><td>126</td><td>127</td></tr> </tbody> </table>	Employee Identifier	Hours of Service		Wages Paid		Employer Premiums Paid 2018	Employer Premiums Paid 2019	Average Premiums	2018	2019	2018	2019	3		4		5		6	7	8		9		10		11	12	13		14		15		16	17	18		19		20		21	22	23		24		25		26	27	28		29		30		31	32	33		34		35		36	37	38		39		40		41	42	43		44		45		46	47	48		49		50		51	52	53		54		55		56	57	58		59		60		61	62	63		64		65		66	67	68		69		70		71	72	73		74		75		76	77	78		79		80		81	82	83		84		85		86	87	88		89		90		91	92	93		94		95		96	97	98		99		100		101	102	103		104		105		106	107	108		109		110		111	112	113		114		115		116	117	118		119		120		121	122	123		124		125		126	127	<p style="text-align: center;"><b>Worksheet 4 - Enrolled Employees</b></p> <p>Complete the columns below for each employee who is enrolled in health insurance coverage provided under a qualifying arrangement.</p>
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**NOTE: Complete the fields below ONLY on the first 8941 screen for each spouse.**

**A** Did you pay premiums during your tax year for employee health insurance coverage you provided through a Small Business Health Options Program (SHOP) Marketplace or do you qualify for an exception to this requirement?

Enter Marketplace ID (if any) 128

Exception applies 129

**B** Employer Identification Number used to report employment taxes for above individuals 130

**C** Does a tax return you filed for a tax year beginning in 2014, 2015, 2016, or 2017 include a Form 8941 with line A checked "Yes" and a positive amount on line 12?

131

Yes

132

No

**10** Total amount of any state premium subsidies paid and any state tax credit available 133

Carry to Schedule C or Schedule F 134

Multi-form code 135

**8941  
12-20**