

Instructions for completing the Wyoming Quarterly UI/WC and UI Only Summary Report form

WY096 - (12/2015)
DO NOT STAPLE

Inquiries about
UNEMPLOYMENT INSURANCE
Call: (307) 235-3217

WORKERS' COMPENSATION
Call: (307) 777-6763

Use WIRE to file on the internet
<http://dos.state.wy.us/wire/>

WYOMING QUARTERLY UI/WC SUMMARY REPORT

Business Name ABC SAMPLE CO INC

Quarter End Date 03/31/2018

Due Date 04/30/2018

STATE OFFICE USE ONLY	UNEMPLOYMENT INSURANCE (UI)	Quarter/Year	1 2018
		Account Number	012345678

1. Total UI Wages For The Quarter (Including Tips)	61738 75
2. Excess Wages (2018 TAXABLE WAGE BASE \$24,700.00)	2980 00
3. Taxable Wages (Line 1 minus Line 2)	58758 75
4. Tax Due (Multiply Line 3 by .0262) (INCLUDES .00136 FOR EMPLOYMENT SUPPORT FUND)	1539 48
5. Interest Due 2% (0.02) Per Month From Due Date Shown Above	
6. Amount Due From Prior Report Periods	
7. Outstanding Unemployment Insurance Credit	
8. Total Unemployment Insurance Amount Due (4+5+6-7)	1539 48

Number of Workers by Month	JAN	FEB	MAR
For each month, report the number of covered workers who worked during or received pay for the payroll period on the 12th of the month. Enter zeros if there were no workers.	4	4	3

Employer number 007654321

9A. NAICS/Class Code	9B. # Of Employees	9C. Total Wages For NAICS/Class Code (Excluding Tips)	9D. Rate	9E. Taxes Due = 9C X 9D
000010	1	5000 00	.0043	21 50
236115C	1	11339 25	.0568	644 07
236115	4	13978 90	.0568	794 00
10. TOTALS	6	30318 15		1459 57

11. Interest Due 1% Per Month from Due Date. An Additional \$100.00 Late Penalty will be Assessed on Reports not Filed Within 30 days of Due Date.

12. Amount Due From Prior Report Periods

13. Outstanding Workers' Compensation Credit And/Or Payment

14. Total Workers' Compensation Amount Due (10 + 11 + 12 - 13) **1459 57**

15. From Line 8- Amount of UI Taxes Enclosed **1539 48**

16. Total Amount Enclosed (14+15) **2999 05**

INCLUDE WAGE LISTING FORM: and Return This Form To: EMPLOYER SERVICES P.O. Box 2648 Casper, WY 82602-2648

Date 4/15/18

Business Phone # 307-123-4567

Signature Joe Sample

Title President

Make Checks Payable To: Department of Workforce Services

Return the Original: Photo Copies or Substitute forms will not be accepted
Information inserted needs to be vertically and horizontally aligned. **Please do not use commas, dollar signs or decimals.** Enter zeros in the "cents" column when applicable **Use Black Ink Only**

Use Black Ink Only
Unemployment Insurance Filing

Line 1: Enter Total Wages from the wage list including Corp. Officer wages
Line 2: Enter Excess Wages (if any) ** See below
Line 3: Line 1 minus line 2. Line 3 cannot be a negative number
Line 4: Multiply line 3 (taxable wages) by the assigned rate and enter the tax amount due on line 4
Line 5, Line 6, and Line 7: Enter as necessary
Line 8: Add line 4, line 5, line 6, and subtract line 7. Enter the result on line 8
Line 9: (UI Only report) Enter the amount from line 8

Number of Workers by Month: Enter the number of employees who worked on or received pay on the 12th of the month

Workers' Compensation Filing

Column 9A: NAICS/Class Codes assigned to the account (to be used in A5 of the Employee Wage Listing)
Column 9B: Enter the number of employees for each NAICS/Class Code
Column 9C: Enter the total wages for each NAICS/Class Code. (Use the WC Average Wage of \$11,339.25 for 2018 to report Corp. Officer wages if the NAICS/Class Code ends in the letter C)
Column 9E: Multiply each wage amount from column 9C by the Rate(s) in 9D and enter the results for each line
Line 10: Enter totals for columns 9B, 9C, and 9E
Line 11, Line 12, and Line 13: Enter as necessary

Line 14: Enter the total Workers' Compensation tax due
Line 15: Enter the total Unemployment tax due from Line 8 above
Line 16: Enter the results of Line 14 plus Line 15
This is the amount of payment that should be sent for UI and WC taxes
Make Checks payable to: Department of Workforce Services

** Excess wages are any wages for an Employee over the taxable wage base for the year. The Taxable Wage Base for 2018 is \$24,700.00

Note: Once the taxable wage base has been met, excess wages cannot exceed the quarter's total wage for the employee. To correct or file reports for a prior quarter call (307) 235-3217 or visit our website at: <http://www.wyomingworkforce.org> to obtain forms.

Instructions for completing the Wyoming Employee Wage Listing

To correct or file reports for a prior quarter call (307) 235-3217 or visit our website at: <http://www.wyomingworkforce.org> to obtain forms.

Do not enter more than 12 employees or 4 Corporate Officers per page. To obtain additional blank forms call (307) 235-3217.

Substitute forms will not be accepted.

WY078 - (12/2015)
DO NOT STAPLE

WYOMING EMPLOYEE WAGE LISTINGS

Quarter/Year 1 2018 Business name ABC SAMPLE CO INC
 UI Account Number 012345678 Instructions Located At: 111 SAMPLE RD
 WC Account Number 007654321 www.wyomingworkforce.org/business/ui/ SAMPLE TOWN, US 111111
USE BLACK INK & PRINT IN ALL CAPS

A1. Social Security Number	A2. Employee Name Last, First	A3. Tips	A4. Total Wages (Excl. Tips)	A5. NAICS/Class Code	A6. Type B,U,W	A7. New Hire Date	A8. Total Hours This QTR
123 45 6789	JONES SAM		1899 00	236115	B	01 20 2018	236
223 45 6789	SMITH TOM	30 35	3543 45	236115	B		294
323 45 6789	BROWN DON		7762 45	236115	B		659
423 45 6789	SIMPSON ABLE	49 50	774 00	236115	B	02 13 2018	86
523 45 6789	SAMPLE TERRI		5000 00	000010	B		200
EMPLOYEE SUBTOTALS:		A3. <u>79 85</u>	A4a. <u>18978 90</u>	A3 + A4a. <u>19058 75</u>			
▼ CORPORATE OFFICER/LLC MEMBERS INFORMATION ONLY							
A1. Social Security Number	A2. Officer Name Last, First	A9. WC Avg. Wages	A4. Total Wages (With Tips)	A5. NAICS/Class Code	A6. Type B,U,W	A7. New Hire Date	A8. Total Hours This QTR
623 45 6789	SAMPLE JOE	11339 25	27680 00	236115C	B		647
723 45 6789	SAMPLE SALLY		15000 00		U		200
CORPORATE OFFICER SUBTOTALS:		A9. <u>11339 25</u>	A4b. <u>42680 00</u>	GRAND TOTALS A3 + A4a + A4b. <u>61738 75</u>			

USE BLACK INK ONLY

***A1:** Enter the Social Security Number of each covered employee receiving wages during this quarter
***A2:** Enter the Last and First Name of the employee identified by the Social Security Number in item A1
A3: Enter the amount of tips each employee earned during this quarter. NOTE: Tips are included as wages for UI tax computations but not included as wages for WC tax computations. Enter the Tips subtotal at the bottom of this column (A3)

***A4:** Enter the total of all wages, excluding tips, earned by each employee during this quarter. Enter the subtotal of wages at the bottom of this column (A4a)

A5: Enter the NAICS/Class Code for each employee as assigned by WC (see 9A of the Quarterly UI/WC Summary report).

Required if filing both UI and WC on this form

***A6:** Enter the appropriate type for each employee:

- **B** if covered by both UI and WC
- **U** if covered only by UI
- **W** if covered only by WC

A7: Enter the date of hire for each employee hired during this quarter

A8: Enter the hours each employee worked during this quarter, rounded to the nearest hour. Do not use fractions or decimals (Salary use 522 hrs.)

***A3+A4a:** Enter the subtotal of Tips and Wages for the employees

***A3+A4a+A4b:** Enter the grand total of all employee and corporate officer wages

***Required Field**

CORPORATE OFFICER/LLC MEMBER INFORMATION

A9: Enter the Workers' Compensation Corporate Officer/LLC Member/Owner average wage only if Workers' Compensation Corporate Officer/LLC Member/Owner coverage has been elected and a class code ending in the letter "C" has been assigned to the account (see 9A of the Quarterly UI/WC Summary report). Do not use actual wages in this field (to report actual wages see A4 instructions below). Enter the subtotal at the bottom of this column (A9).

A4: Enter the actual wages, including tips, earned by each Corporate Officer (required for UI) or LLC Member (optional for UI) during the quarter. Enter the subtotal at the bottom of this column (A4b)

Workers Compensation Corporate Officer Average Wage for 2018 is \$11,339.25