A EMPLOYER INFORMATION

Acct. No. 1 5

Name:

Telephone:

"X" If Reprocess ☐

ACCUPAY®

0 12

State: 13

No. Employees on 12th Day: 1st Month 16, 2nd Month 19, 3rd Month 22

Form 941 12th Day 3rd Mth: 36

X = Employee Labels: 37

Ship Method: 45

"S" to Suppress Filing Labels: 53 60

Apy Use: 76

"C" for Confid: 77

Apy Use: 78

Primary State: 80

Second State: 82

Print-back S = Std: 83

Alphabetize proforma Y = Yes: 84

FOURTH QUARTER ONLY — W-2 Option "P"=Paper "M"=Mag: 85

Enter "W" for W-2 Only Service

1 12

APAY Use Fields: 13 21 29 37

Apy Use: 53

FICA/SDI X to Adjust or A to print Actual on W-2 (see instr.): 61

"X" To Force Bal. Due: 62

941 63 940 64 943 65 — "X" = Apply Overpmt, "S" = Suppress Line

AGRICULTURAL ONLY: 66 Enter X, R or A; 67 Enter X if 940 Req'd.; 68 77 No. of Employees

TERMINATED ONLY: / / Enter Date Final Wages Paid

2 12

Employer's Name (28 Char): 13

Trade Name (40 Char): 41

3 12

No. & Street (22 Char): 13

Suite, Bldg., Room (15 Char): 35

City (22 Char): 50

State: 72

ZIP: 74

Ext. ZIP: 79

4 12

State Employer Contrib. Rate: 13

Calif. ETT Rate: 21

Secondary State Contrib. Rate: 23

Other Rate: 30

Federal Deposit State: 35

Federal ID No.: 37

Primary State ID No.: 47

Secondary State ID No.: 65

Household Employer Only Employer's SSN: 83 91

"X" to Print Paid Preparer Info: 92

"S" if Preparer is Self-Employed: 93

Preparer's PTIN: 94 104

Preparer's Name: 105 31 Characters

5 12

	Line	U.I.	E.T.T.	S.D.I.	State W/H
Calif Deposits Current Quarter	13 01	21	31	41	51
Total Previous Quarters (TPQ)	13 02	21	31	41	51

DE-6: 61 Enter "Q" for Mag. Media filing of DE-6

DE-7: 62 Enter "Y" for Mag Media Filing of DE-7

Year End DE88: 63 Enter "R" for rounding adjmt on YrEnd DE7

Electronic Depositor: 64 "F" = Fed, "S" = State, "B" = Both

DE-34: 61 Enter "X" for New Employee Registry form

3rd Party Designee: 62 "X" to suppress question

941/W-3 Reconciliation: 63 S = Suppress report

Apay Use: 64

7 12 Form **941** - Deposits for Qtr. Form **944** - Deposits for Yr.: 13

Form **941** Liabilities ▶ FIRST MONTH: 23 SECOND MONTH: 33

"X" for Form 944: 43

"X" if Seasonal 941: 44

MEMO-Prior Qtr Ovrpmt

Form **941** Record of Daily Liabilities (Complete only if Form 941, Schedule B is required)

8 12

	MTH	DAY	LIABILITY	MTH	DAY	LIABILITY	MTH	DAY	LIABILITY	MTH	DAY	LIABILITY	MTH	DAY	LIABILITY
13 **01**	21	24	25	35	38	39	49	52	53	63	66	67	77	80	81
02															
03															
04															
05															

9 12 Deposit due dates

Form 941: 13 16 (Mth Day)

Form 943: 17 20 (Mth Day)

Form DE88: 21 24 (Mth Day)

Form **940** Federal Unemployment Liability

Qtr. 1: 25

Qtr. 2: 35

Qtr. 3: 45

Form **940** Deposits

Current Quarter: 55

Total Previous Quarter: 55

Form **943** Agricultural Employer YTD Deposits (Include any prior year overpayment): 75