

October 10, 2017

Account Number:

RECEIVED
 OCT 17 2017

SAMPLE FORM

Be sure this notice reaches the person or agent responsible for the Unemployment Insurance tax.

If you have questions, call (608) 261-6700

This is your Unemployment Insurance tax rate notice for next year. UI Tax Rates are not appealable. You have the option of making a voluntary contribution which may lower your tax rate. Please see other side for instructions. If you decide to make one, **your voluntary contribution must be received by November 30.**

2018 Rate Information

Taxable Payroll Fiscal Year Ending June 30, 2017	Code	Reserve Account Balance as of June 30, 2017	Code	Reserve Percentage (C as % of A)	Basic Rate %	Code	Solvency Rate %	Total Rate (F + H) %
A	B	C	D	E	F	G	H	J
+1,225,122.91		+101,770.20		+8.30	0.50		0.40	0.90

Explanation of Tax Rates. The wage base (the maximum taxable amount of wages per employee per year) for 2018 is \$14,000. Your Unemployment Insurance tax rate is recalculated each year based on your fiscal year taxable payroll and the reserve balance in your Unemployment Insurance account as of June 30. The reserve account balance (col. C) includes any benefit charges as of June 30 and any required contributions received by July 31. The solvency rate (col. H) determines the amount credited to a shared risk account, to which all employers contribute. The tax bracket and associated rates for your reserve percentage (col. E) are from the rate schedule on the other side.

To determine if you will benefit by making a voluntary contribution to lower your rate and for payment instructions see directions on the back of this form.

VOLUNTARY CONTRIBUTION - DEADLINE November 30

Account Number:



Please submit your payment by Electronic Funds Transfer (EFT) at <http://dwd.wisconsin.gov/uitax/> or by check

Your voluntary contribution must be received by November 30

Instructions on the reverse side

Mail check payments and this form to:
 DWD
 Unemployment Insurance
 P.O. Box 7945
 Madison, WI 53707-7945

Print Name of Signer	Position of Signer	Amount of Check \$
Signature of Person Completing Form	Telephone Number of Signer	Date Signed (MM/DD/YYYY)

