

Employer Reg.

Dist. Ind. **Assign. Type** **Form Type**
 W

Received Date **CI** **AI**

Emp. Reg. No.

Amount Paid

ANNUAL SUPPLEMENTARY CONTRIBUTION REPORT OF WAGES NOT PREVIOUSLY REPORTED AS REMUNERATION FOR CALENDAR YEAR 2008	USE THIS FORM - IF YOUR TOTAL TAX RATE IS 5.4% OR LOWER IF YOUR TAX RATE IS HIGHER, REQUEST AND USE FORM IA 7A.
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IMPORTANT: Read Carefully ANSWER ALL ITEMS	DOLLARS ONLY	The amount of wages in Item 1 should exclude amounts in excess of the first \$8,500 paid to an employee during the calendar year.
1. Wages for New York State employment subject to the federal unemployment tax.	\$	This report must be filed by employers who are liable under the Federal Unemployment Tax Act for taxes on: 1. wages to High School students. 2. dismissal wages. 3. sick pay (except Workers' Compensation).
2. Wages reported quarterly to this Division for the calendar year.	\$	
3. Difference in wages (Item 1 less Item 2) <i>if Item 2 is equal to or greater than Item 1, NO TAX is due. Enter zero (0) and sign certification below.</i>	\$	
4. Additional UI Contributions due. Multiply Item 3 by your New York State Tax Rate (Normal and Subsidiary Rates only.)	DOLLARS CENTS \$	<i>This report is not to be prepared if you reported these wage payments on quarterly reporting forms NYS-45, Quarterly Combined Withholding, Wage Reporting and Unemployment Insurance Return, for all four quarters of the year.</i>
5. Additional Re-employment Service Fund due. Multiply Item 3 by 0.075% (.00075)	\$	
6. Total of Lines 4 and 5	\$	
7. Amount of Remittance PAYABLE TO: N.Y.S. UNEMPLOYMENT INSURANCE ENTER EIGHT - DIGIT EMPLOYER REGISTRATION NUMBER ON YOUR REMITTANCE FOR ASSISTANCE CALL 1-888-899-8810	\$	

I certify that the information contained in this report is true and correct.

Signature of Officer, Partner or Proprietor

Title

Date

Late payments of contributions are subject to interest at the rate of 1% per month from the due date to date of payment.

