



QUARTERLY WAGE BASE CREDIT REQUEST

State Form 56667 (2-19)

Indiana Department of Workforce Development
ATTN: Quarterly Wage Base Credit Request
10 N. Senate Ave. SE 001
Indianapolis, IN 46204-2277

* This agency is requesting disclosure of your Social Security number in accordance with IC 4-1-8-1; disclosure is mandatory and this record cannot be processed without it. See also 646 IAC 5-2-2 for employee reporting requirements.

This form is used to request taxable wage base credit where an employer paid SUTA to a state other than Indiana for a worker prior to the worker performing covered services in Indiana.

Electronic filing and waiver requests are required under 646 IAC 5-2-2. Use this form only if you have an approved electronic filing waiver.

Non-employers that advise, encourage, or facilitate a violation of the Act may be subject to Civil Penalties of up to \$5000 per violation.

A. Quarter ___ Year _____ B. Total Waivers Being Requested _____ C. Number of Prior States _____

D. Contact Name _____ Telephone Number () _____ - _____

E. SUTA Account Number _____ FEIN _____ F. Page _____ of _____

*Print all information using **dark** ink in block letters. Include **only** the lines from the original report that need to be corrected.*

G. Social Security Number	H. Employee's Last Name	I. Employee's First Name	J. MI	K. Prior State Name	L. Prior State Gross Wages	M. Prior State Wage Base

Submitted by _____ Title / Relationship to Employer _____ Date (mm/dd/yy) _____

The information contained in this report is filed under penalty of perjury. By submitting this report, the employer is certifying that it is complete and accurate to the best of the employer's knowledge and belief. The employer further certifies that they have read and followed the requirements explained in the Unemployment Insurance Employer's Handbook and the instructions for this form.

Instructions: Reports must be in dark ink. DWD images reports when received. Using light ink or a pencil may prevent the report from being processed. Reports must be legible. Print your responses using block letters.

You may need to file more than one page if you are requesting a credit for more than 5 workers. Report only the workers where the employer paid SUTA to a state other than Indiana.

An Indiana Unemployment Insurance Auditor may contact the employer or the state where the employer paid wage base for the worker prior to reporting the worker to Indiana for verification or additional information.

In general, employers should report a worker to only one state per year. Please see the employer handbook for additional information on correctly reporting workers that perform services in more than one state (localization).

Usually, an employer will report a worker to more than one state only if the worker permanently relocates to a different state for the same employer during the calendar year.

The contact information in part **D** must be valid. If DWD cannot contact the requester, DWD cannot process the wage base credit request.

You must file a separate request for each quarter and year where you have been assessed taxes for a worker and need a credit. If you amend the report for any reason, you will need to file a new credit request.

Amending a report removes all prior credits.

In part **A**, write down the quarter number and the year for the period you reported the worker and are requesting a wage base credit in Indiana.

In part **B**, write down the total number of workers that qualify for a wage base credit.

In part **C**, write down the total amount of other states where the employer paid SUTA taxes in prior quarters.

In part **D**, write down a valid, employer, contact name and telephone number.

In part **E**, write down the SUTA account number assigned by DWD to the employer's account and the FEIN that will be used on the employee's W-2 or 1099 for the current year. If the employer operates under more than one FEIN, complete a new page for each FEIN.

In part **F**, write the page number for this page of your report and the total number of pages that you are reporting.

In part **G**, write down the Social Security Number or ITIN of the employee that you reported to more than one state.

In part **H**, write down the last name of the employee that you reported to more than one state.

In part **I**, write down the first name of the employee that you reported to more than one state.

In part **J**, write down the middle initial of the worker that you reported to more than one state— leave this blank if the employee does not have a middle name.

In part **K**, write down the name of the state where the employer paid SUTA for this worker during the same calendar year prior to reporting the worker in Indiana.

In part **L**, write down the employee's gross wages reported to the state you wrote down in **K**. If DWD calls the state in **K** and asks about the employee and wages, all the information must match.

In part **M**, write down the wage base for the state you wrote down in **K**. Indiana's wage base is \$9,500. The employer's credit is the lesser of the worker's gross wages, the other state's wage base or \$9,500. This means that you cannot get a credit for more than you reported to another state, more than the amount of wages subject to tax in another state, or more than the amount of wages subject to tax in Indiana.

If you have any questions, call DWD at 800-891-6499 option 2 for Employer Assistance or refer to the Employer Handbook.