

Utah Department of Workforce Services
 Unemployment Insurance
 140 East 300 South
 P.O. Box 45288
 Salt Lake City, Utah 84145-0288
 TEL (801) 526-9235 option 2 • Toll Free 1-800-222-2857 option 2
 FAX (801) 526-9236



DOMESTIC EMPLOYMENT STATUS REPORT
READ INSTRUCTIONS ON REVERSE SIDE THEN COMPLETE ALL ITEMS

1. Type of Ownership <input checked="" type="checkbox"/> Private Home <input type="checkbox"/> College Clubs <input type="checkbox"/> Other Sorority _____ Fraternity _____ Specify: _____				
2. Corporation, trade or business name and mailing address for quarterly contribution (tax) reports: Premier Financial Management Services 10425 W North Ave Suite 345 Milwaukee, WI 53226			4. Federal Employee Identification Number (FEIN): [] [] [] [] [] [] [] []	
3. Telephone Number: (855) 224-5810 Fax Number: (888) 471-1731			5. County in Utah where principal activity is located:	6. Number of permanent worksites employing domestic help: 1
7. Mailing address for Wage and Separation Requests (if different from item 2): Premier Financial Management Services 10425 W North Ave Suite 345 Milwaukee, WI 53226		8. Street address of principal permanent work site in Utah (if different from items 2, 7, or 9):	9. Street address of business headquarters (if different from item 2):	
10. List sole proprietor, general partners, corporate officers or LLC members:				
Name	SSN	Title	Home/Address	Home Phone
_____ ()				
_____ ()				
_____ ()				
11. Describe in detail the type of domestic employment: (see instructions on reverse side) Services for Persons with Disabilities			12. Date of first payment of wages in Utah:	
READ INSTRUCTIONS ON THE REVERSE SIDE BEFORE COMPLETING ITEMS 13-13E				
Did you acquire the organization, trade, or business of another operator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Type of acquisition: <input type="checkbox"/> Change of ownership <input type="checkbox"/> Merger or reorganization <input type="checkbox"/> Sale, lease or sub-lease <input type="checkbox"/> Purchased assets through court <input type="checkbox"/> Other, please explain: _____				
13a. Name, address and UI account number (if available) of previous owner (predecessor): _____ # _____ Date acquired _____				
13b. Did you acquire all or a portion of the predecessor's organization, trade or business? <input type="checkbox"/> 90% or more <input type="checkbox"/> Less than 90%				
13c. Did you retain all of the predecessor's employees? <input type="checkbox"/> Yes <input type="checkbox"/> No Date acquired _____				
13d. Is your predecessor still in business? <input type="checkbox"/> Yes <input type="checkbox"/> No				
13e. Was predecessor's business closed prior to acquisition? <input type="checkbox"/> Yes <input type="checkbox"/> No Date closed _____				
14. Enter below the amount of wages you have paid in Utah. If you have not paid wages enter "NONE."				
	Jan. 1 to Mar. 31	Apr. 1 to Jun. 30	Jul. 1 to Sep. 30	Oct. 1 to Dec. 31
Current Year:				
Preceding Year:				
15. If you have not paid wages, do you expect to in the future? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Estimated date _____				
16. Are you an employer in a business activity? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Name of business _____ Address _____ Current Employer Identification Number _____				
I certify that the information contained in this report is true and correct.				
_____	HHCSR	()	_____	
Name	Title	Telephone Number	Date	

INSTRUCTIONS

The Utah Employment Security Act provides that the Department of Workforce Services must determine the status of each business and each person independently established in a trade, occupation, or profession. This report is to be completed immediately and returned to P.O. Box 45288, Salt Lake City, Utah 84145-0288.

All items must be completed. If an item does not apply to your business, enter N/A (Not Applicable).

Except as indicated below, all items are self-explanatory:

ITEM 2: If you have more than one trade name or business name, also list the name or names by which your company is best known by the public.

ITEM 7: Address of agent or office able to provide wage data, weeks of employment and other information about employees separated from your employment, if different from item 2.

ITEM 8: If there is more than one permanent work site, please attach a separate sheet listing the name, address and telephone number of each site.

ITEM 11: Please describe your primary domestic activity, whether you are a private household employing domestic help, child care services, in-home nursing services; a fraternity or sorority or some other type of domestic activity.

ITEM 12: The definition of wages is currently defined by Section 3306(b), of the Internal Revenue Code of 1986, with modifications, subtractions, and adjustments provided in Section 35A-4-208 Subsections (2), (3), and (4), of the Utah Employment Security Act with regard to how the wage base is determined. Wages means all remuneration for employment including commissions, bonuses, **salaries or draws to corporate officers**, tips and the cash value of all remuneration in any medium other than cash.

Wages in Item 12 refers only to wages for employment covered by the Employment Security Act. Under the Act wages paid for services performed by a **sole proprietor's** spouse, parents or children under the age of 21 are not wages for unemployment. Wages paid to the entity owner (i.e. sole proprietor, partners and LLC members) are not wages for unemployment.

ITEM 13: If you acquired (in whole or part) the business activity previously conducted by another entity, or if the business entity has changed (for example, from a proprietorship to a corporation, even if the owners are still principally the same) please complete Items 13-13e. "Acquired" means to have obtained the use of the business or assets through any legal means. It is not necessary to purchase the assets in order to have acquired them, nor is it necessary for your predecessor to have actually owned the business or assets for you to have acquired the business or assets from him. An acquisition can include change in the form of ownership, inheritance, repossession, foreclosure, gift, sale or lease.

ITEM 14: A domestic employer is subject if, during any calendar quarter in the current or preceding calendar year, you paid cash remuneration of \$1,000 or more. In completing item 14, please provide only the amount of cash remuneration and not the value of non cash remuneration such as meals and lodging provided by you, the employer. (The non cash remuneration may be deemed a wage when filing Employer's Quarterly Contribution Report, but is not considered when calculating whether you as an employer have reached \$1,000 in a calendar quarter.)

If additional information is needed, please call 801-526-9235 option 2 or 1-800-222-2857 option 2 (Instate toll free number). Fax 801-526-9236.