

QUARTERLY CONTRIBUTION RETURN FOR SCHOOL EMPLOYERS

PLEASE TYPE THIS FORM - DO NOT ALTER PREPRINTED INFORMATION

APPROVED EXTENSION TO:

QUARTER ENDED		DUE		DELINQUENT IF NOT POSTMARKE OR RECEIVED BY	D		YR QTR
						Employer Acc	ount No.
				_			
					DO NOT	ALTER THIS	AREA
				DEPT. USE ONLY	P1 P2 C	$\begin{array}{ c } P \\ \hline Day \\ \hline Yr. \\ \hline = \\ \hline \end{array}$	
					DATE		
periods that includ	PLOYEES earning wages de the 12th day of the ca Il fields. Blank fields wil	lendar month (e	nter numerals only).	1st Month	2nd Month	3rd Month	
B. TOTAL SUBJECT V	wages paid this qua	ARTER (Same fig	ure on line L on DE 90	2)	(B)		
C. EMPLOYER'S UI C	CONTRIBUTIONS		% Times B		(C)		
D. ADJUSTMENT TO PRIOR QUARTERS QUARTERLY RETURN ADJUSTMENT FORM FOR SCHOOL EMPLOYERS, DE 938SEF, MUST BE ATTACHED (D)							
-	JE (Add items C and D)		\rightarrow (E)				
Make check payable to EMPLOYMENT DEVELOPMENT DEPARTMENT Include employer account number on check. Do not staple check to return.							DEPT USE
HELP US IMPROVE THE QUALITY OF OUR EMPLOYMENT TAX SERVICES. PLEASE RATE OUR CURRENT SERVICES BY ENTERING							
THE APPROPRIATE NUMBER IN THE BOX: 4 = EXCELLENT 3 = GOOD 2 = FAIR 1 = POOR F. BE SURE TO SIGN THIS DECLARATION. I DECLARE that the information herein is true and correct to the best of my knowledge and belief.							
Signature				Phone ()	Ext	
Title (Administrator, Accou	Intant, Preparer. etc.)			Fax ()	Date	
NOTE: IMPORTANT Please check the appropriate box:			No pay	roll. Enter "0" on line B	. Final re	eturn	
Individual employees wages that are subject to Unemployment Insurance (UI) are reported on:				Attached Quarterly Contribution Return and Report of Wages (Continuation), DE 9C Electronic Media			
INSTRUCTIONS Note: For Items A through D, if the amount is zero, enter "0". ITEM A. Number of Employees - For each of the three months in the quarter, enter the number of employees earning wages during or receiving pay for the pay period(s) that includes the 12th day of each month. Please complete all fields. Blank fields will be identified as missing data.				INFORMATION Employer UI contributions are due and payable on the first day of the calendar month following the close of each calendar quarter. Payment shall be delinquent if not paid on or before the last day of such month. FILING THE RETURN - This return must report all UI subject California			
ITEM B. Total Wages in Subject Employment - Enter the total of ALL UI subject wages paid. For special classes of employment and payments considered subject wages, refer to <i>Information Sheet: Types of Employment</i> , DE 231TE, and <i>Information Sheet: Types of Payments</i> , DE 231TP. ITEM C. Employer's UI Contributions - Multiply the amount entered in Item B by the employer's UI contribution rate, and enter this calculated amount in C.				wages paid (refer to Item B and the <i>California Employer's Guide</i> , DE 44.) PENALTY of 15% (10% for periods prior to the 3rd quarter 2014) is added for failure to make payment by the delinquent date of the return. An additional 15% (10% for periods prior to the 3rd quarter 2014) is added if the return and report of wages is not filed within 60 days of the delinquent date of the return. Interest accrues from the delinquent date for the return.			
ITEM D. Adjustment to Prior Quarters - Employers who are making an adjustment to a prior quarter must complete and attach a DE 938SEF. The total debit or credit amount indicated on the DE 938SEF must be entered on line D. If no adjustment is being made, enter "0." To expedite an adjustment to a prior DE 9423, use a DE 938SEF instead of an amended DE 9423.				NOTE: If you combine schools, you must file and pay the final return within 10 days of merging to avoid penalty and interest. If your school was merged or if a change in district occurred during the period covered by this Quarterly Contribution Return, each district must			
ITEM E. Total Taxes Due - Add items C and D. Enter the sum in E. If the sum is zero, enter "0" in line E and check the box on the front of the return envelope. Make check payable to EMPLOYMENT DEVELOPMENT DEPARTMENT. If a DE 938SEF is attached, the amount remitted should reflect the adjustment.				file a separate return tax forms) during whi	covering only that part c ich the particular district	of the quarter (or year fo operated.	or income
(EXAMPLE: Line E shows \$500.00 due for the quarter. A DE 938SEF is attached for a credit of \$200.00. Remittance should be for \$300.00.)				they meet the criteria	a of UI subject wages (ref	fer to Item B and the D	E 44).
ITEM F. Signature of preparer or responsible individual, including title, phone number, fax number, and date. Did you know you can file this form online using the EDD			is no wage limit.	11T - Total individual emp	, ,		
e-Services for Business? Please visit the website at www.edd.ca.gov/e-Services_for_Business for further ins				If you need assistance completing this form, contact the Employment Development Department, School Employees Fund at 916-653-5380.			