



REPORT TO DETERMINE LIABILITY FOR DOMESTIC EMPLOYMENT UNDER THE UNEMPLOYMENT INSURANCE ACT

If you or your organization paid a domestic worker or combination of domestic workers cash wages totaling at least \$1,000 in a calendar quarter during the current or preceding four years, you or your organization is an employer liable under the Unemployment Insurance Act. Cash wages include payment by check, but do not include payments in kind, such as room and board. A domestic worker is an individual who performs domestic service in a private home, local college club, or local chapter of a college sorority or fraternity. Common types of domestic employees are: live-in companions, housekeepers, butlers, maids, chauffeurs and baby sitters. Baby sitting, laundry or other services performed outside the home of the person or organization for which the services are provided do not constitute domestic service.

If, on the basis of paying for domestic service, you or your organization is an employer for Unemployment Insurance purposes, please complete this form and mail to: **IDES REVENUE DIVISION, 33 South State Street, Chicago, Illinois 60603-2802**. The Department will establish an employer account number for you or your organization and provide the materials necessary to meet the responsibilities of an employer under the Illinois Unemployment Insurance Act. If you need assistance in filling out this form, you may contact the Department at telephone number or (800) 247-4984, option 2. The TTY number is (866) 212-8831.

1. Please enter your name or your organization's name, address, telephone number and contact person for additional information.

a. Name _____

b. Address and Telephone Number _____

(Street & Number or Rural Route)

(City or Town) (County) (State) (ZIP Code) (Area Code) (Telephone Number)

c. Person to contact for additional information _____
(Name) (Telephone Number if Different from Above)

d. Employer's e-mail address _____

2. Did you pay cash wages of \$1,000 or more for domestic service in any quarter in the current or preceding four calendar years?
 Yes No If YES, please indicate the earliest quarter:

Year _____ Quarter (check one): 1st - January through March 2nd - April through June
 3rd - July through September 4th - October through December

3. Enter the Date of Hire _____ and First Pay Date _____ for the first DOMESTIC worker you or your organization hired during the year indicated in question 2.

4. Enter the Federal Employer Identification Number (FEIN) under which you or your organization file Social Security Returns for DOMESTIC workers:

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If you or your organization do not have a FEIN, contact the nearest office of the U.S. Internal Revenue Service and request Form SS-4 (FEIN Application), Publication 926 (Household Employer's Tax Guide) and Publication 15 Circular E (Employer's Tax Guide).

33 South State Street
Chicago, Illinois 60603-2802

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If you employ only household workers and are eligible to use schedule H (IRS Form1040) for the purpose of filing your federal taxes with regard to these workers (whether or not you use it), you can elect to file your State of Illinois Unemployment Insurance Contributions and Wage Report annually.

5. Do you elect to file your State of Illinois Unemployment Insurance Contributions and Wage Report annually? Yes No

CERTIFICATION: I hereby certify that the information contained in this report and any sheets attached hereto is true and correct. This report must be signed by you, a partner, officer or authorized agent within the employing enterprise. If signed by any other person, a power of attorney must be attached.

Signed by _____ Date _____

Please keep a copy of the completed form for your records. **To have correspondence sent to another address, please use the UI-1M, Special Mailing Form.**

-- Do not write in the area below. For Department use only --

This state agency is requesting information that is necessary to accomplish the statutory purpose as outlined under 820 ILCS 405/100-3200. Disclosure of this information is Required. Failure to disclose this information may result in statutorily prescribed liability and sanction, including penalties and interest.

Area	Industry	Source _____	Rec'd Date _____	
		A/C _____	NL _____	
		Liab. Date _____	Qtr _____	Sec _____
		Analyst _____	Date _____	