



Asset Enhancement Solutions, LLC

Creative Solutions to Financial Challenges

Baker Foods Inc.

EIN: 12-3456789

2nd Draw

Calculation of Employer State & Local Taxes assessed on Employee Compensation

Calculation of Employer State & Local taxes assessed on employee compensation, primarily state unemployment insurance tax (Derived from State Quarterly Wage Reporting Forms)

To maximize PPP loan amount, 2019 or 2020 information can be used

Please attach documentation from the 940/W-3, 941's or other appropriate documentation based on your entity type that will support the amounts noted below
This documentation to be printed to a PDF and combined to a PDF printout of this page

	<u>Quarter Ending</u>	<u>Amount</u>
1st Quarter	3/31/2019	9,870
2nd Quarter	6/30/2019	5,425
3rd Quarter	9/30/2019	2,257
4th Quarter	12/31/2019	1,108
Total Employer State & Local taxes assessed on employee compensation		18,660
Average Monthly Employer State & Local taxes assessed on employee compensation		1,555

Quarterly Combined Withholding, Wage Reporting, And Unemployment Insurance Return



Reference these numbers in all correspondence:

UI Employer registration number 9999999

Withholding identification number 123456789

Employer legal name: Baker Foods

Mark an X in only one box to indicate the quarter (a separate return must be completed for each quarter) and enter the year.

Jan 1 - Mar 31 1 [X] Apr 1 - Jun 30 2 July 1 - Sep 30 3 Oct 1 - Dec 31 4 Year 19

Are dependent health insurance benefits available to any employee? Yes No [X]

If seasonal employer, mark an X in the box

For office use only Postmark

Received date

Number of employees Enter the number of full-time and part-time covered employees who worked during or received pay for the week that includes the 12th day of each month.

Table with 3 columns: a. First month (125), b. Second month (124), c. Third month (105)

UI SK AI SI WT SK

Part A - Unemployment insurance (UI) information

- 1. Total remuneration paid this quarter 730000.00
2. Remuneration paid this quarter in excess of the UI wage base since January 1 (see instr.) 322990.00
3. Wages subject to contribution (subtract line 2 from line 1) 407010.00
4. UI contributions due Enter your UI rate 2.35% 9565.00
5. Re-employment service fund (multiply line 3 x .00075) 305.00
6. UI previously underpaid with interest
7. Total of lines 4, 5, and 6 9870.00
8. Enter UI previously overpaid
9. Total UI amounts due (if line 7 is greater than line 8, enter difference) 9870.00
10. Total UI overpaid (if line 8 is greater than line 7, enter difference and mark box 11 below)
11. Apply to outstanding liabilities and/or refund

Part B - Withholding tax (WT) information

- 12. New York State tax withheld 46000
13. New York City tax withheld 27000
14. Yonkers tax withheld
15. Total tax withheld (add lines 12, 13, and 14) 73000
16. WT credit from previous quarter's return (see instr.)
17. Form NYS-1 payments made for quarter 73000
18. Total payments (add lines 16 and 17) 73000
19. Total WT amount due (if line 15 is greater than line 18, enter difference)
20. Total WT overpaid (if line 18 is greater than line 15, enter difference here and mark an X in 20a or 20b)*
20a. Apply to outstanding liabilities and/or refund
20b. Credit to next quarter withholding tax
21. Total payment due (add lines 9 and 19; make one remittance payable to NYS Employment Contributions and Taxes) 22531.30

* An overpayment of either UI contributions or withholding tax cannot be used to offset an amount due for the other.

Complete Parts D and E on back of form, if required.

Part C - Employee wage and withholding information

Quarterly employee/payee wage reporting and withholding information

(If more than five employees or if reporting other wages, do not make entries in this section; complete Form NYS-45-ATT. Do not use negative numbers; see instructions.)

Table with 5 columns: a Social Security number, b Last name, first name, middle initial, c Total UI remuneration paid this quarter, d Gross federal wages or distribution, e Total NYS, NYC, and Yonkers tax withheld

Totals (column c must equal remuneration on line 1; see instructions for exceptions)

Sign your return: I certify that the information on this return and any attachments is to the best of my knowledge and belief true, correct, and complete.

Signature (see instructions) Signer's name (please print) Title

Date Telephone number

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Withholding identification number 123456789

Employer legal name: Baker Foods

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Jan 1 - Mar 31 1, Apr 1 - Jun 30 2, July 1 - Sep 30 3, Oct 1 - Dec 31 4, Year 19

Are dependent health insurance benefits available to any employee? Yes No X

If seasonal employer, mark an X in the box

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Received date

Number of employees Enter the number of full-time and part-time covered employees who worked during or received pay for the week that includes the 12th day of each month.

Table with 3 columns: a. First month (125), b. Second month (124), c. Third month (105)

UI SK, AI, SI, WT SK

Part A - Unemployment insurance (UI) information

- 1. Total remuneration paid this quarter 730000.00
2. Remuneration paid this quarter in excess of the UI wage base since January 1 (see instr.) 506289.00
3. Wages subject to contribution (subtract line 2 from line 1) 223711.00
4. UI contributions due Enter your UI rate 2.35% 5257.00
5. Re-employment service fund (multiply line 3 x .00075) 168.00
6. UI previously underpaid with interest
7. Total of lines 4, 5, and 6 5425.00
8. Enter UI previously overpaid
9. Total UI amounts due (if line 7 is greater than line 8, enter difference) 5425.00
10. Total UI overpaid (if line 8 is greater than line 7, enter difference and mark box 11 below)
11. Apply to outstanding liabilities and/or refund

Part B - Withholding tax (WT) information

- 12. New York State tax withheld 46000
13. New York City tax withheld 27000
14. Yonkers tax withheld
15. Total tax withheld (add lines 12, 13, and 14) 73000
16. WT credit from previous quarter's return (see instr.)
17. Form NYS-1 payments made for quarter 73000
18. Total payments (add lines 16 and 17) 73000
19. Total WT amount due (if line 15 is greater than line 18, enter difference)
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Withholding identification number 123456789

Employer legal name: Baker Foods

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Are dependent health insurance benefits available to any employee? Yes No X

If seasonal employer, mark an X in the box

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Table with 3 columns: a. First month (125), b. Second month (124), c. Third month (105)

UI SK AI SI WT SK

Part A - Unemployment insurance (UI) information

- 1. Total remuneration paid this quarter 730000.00
2. Remuneration paid this quarter in excess of the UI wage base since January 1 (see instr.) 636928.00
3. Wages subject to contribution (subtract line 2 from line 1) 93072.00
4. UI contributions due Enter your UI rate 2.35% 2187.00
5. Re-employment service fund (multiply line 3 x .00075) 70.00
6. UI previously underpaid with interest
7. Total of lines 4, 5, and 6 2257.00
8. Enter UI previously overpaid
9. Total UI amounts due (if line 7 is greater than line 8, enter difference) 2257.00
10. Total UI overpaid (if line 8 is greater than line 7, enter difference and mark box 11 below)
11. Apply to outstanding liabilities and/or refund

Part B - Withholding tax (WT) information

- 12. New York State tax withheld 46000
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If seasonal employer, mark an X in the box []

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Table with 3 columns: a. First month (125), b. Second month (124), c. Third month (105)

UI SK AI SI WT SK

Part A - Unemployment insurance (UI) information

Part B - Withholding tax (WT) information

- 1. Total remuneration paid this quarter 730000.00
2. Remuneration paid this quarter in excess of the UI wage base since January 1 (see instr.) 684309.00
3. Wages subject to contribution (subtract line 2 from line 1) 45691.00
4. UI contributions due Enter your UI rate 2.35% 1074.00
5. Re-employment service fund (multiply line 3 x .00075) 34.00
6. UI previously underpaid with interest
7. Total of lines 4, 5, and 6 1108.00
8. Enter UI previously overpaid
9. Total UI amounts due (if line 7 is greater than line 8, enter difference) 1108.00
10. Total UI overpaid (if line 8 is greater than line 7, enter difference and mark box 11 below)
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