

# STATE OF NEVADA

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Department of Employment, Training and Rehabilitation  
Employment Security Division

## **Presentation of Unemployment Insurance Employer Self Service (ESS)**

**Agenda item 6a and 6b**

**Thursday, March 22, 2018**




# Welcome

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## Employer Self Service (ESS) and Electronic Filing of Unemployment Insurance Contribution and Wage Reports



# Employer Summary Screen


Good Afternoon AEY031218ESS AEY031218ESS
Monday, March 12, 2018
[Help](#) | [Contact](#) | [Resources](#) | [Logoff](#)

## EMPLOYER SUMMARY

**AMYS EMPLOYER ACCOUNT 040029578**

Doing Business As : Amys Employer Account
Business Type : Corporation
FEIN : 99-1234567

**Profile Information**

Primary Address 500 E 3RD ST  
CARSON CITY, NV 89713 - 0001  
Ph:

Grant Year : Rate 2018 : UI 2.95%; CEP 0.05%

01/01/2017

Status Active

Status Date 01/01/2017

Business Activity Real Estate Credit

Total Due Amount \$1,802.56

UI Tax Due \$531.99

P & I Due \$1,227.65

CEP Tax Due \$42.92

UnAllocated Payments \$0.00

Reserve Balance \$2,000.00

**Smart Links**

[Contribution Report Due: Q2Y2017](#)

[Wage Report Due: Q4Y2017](#)

[Wage Report Due: Q3Y2017](#)

[Wage Report Due: Q2Y2017](#)

[Payments Due](#)

**Recent Payments**

Payment Date	Payment Amount	Payment Type
03/12/2018	\$ 2,000.00	Manual

**Employer Requests**

Req Type	Req Date	Status	Sts Date	Req Amt

**Quarterly Report Summary**

Qtr/Year	Total Wages	Taxable Wages	Contr Due	Contr Pd	Interest Due	Interest Pd	Penalty Due	Penalty Pd	CEP Due	CEP Pd	Balance
1/2018	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4/2017	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3/2017	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2/2017	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
1/2017	\$85,830.19	\$85,830.19	\$2,531.99	(\$2,000.00)	\$278.52	\$0.00	\$949.13	\$0.00	\$42.92	\$0.00	\$1,802.56

**Navigation Menu**

- Home
- Summary Information
- File Reports
- Make Payments
- Profile Maintenance
- Submit a Request
- Change Account Status
- Appeal Information
- My Documents
- Maintain Users
- Benefits Information
- Multi Claimant Group
- Payments



# Quarterly Reporting Options

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## QUARTERLY REPORTING OPTIONS

**AMYS EMPLOYER ACCOUNT 040029578**

**Doing Business As :** Amys Employer Account **Business Type :** Corporation **FEIN :** 99-1234567

Fields marked with an asterisk \* are required.

Enter Report using UInv  Upload Report Using File

\* Reporting Quarter Quarter 2 \* Reporting Year 2017

**Employer Options**

Both Contribution and Wage Reports  Contribution Report Only

No Wages to Report

Wage Report Only

**Quarterly Employer Packet**

Your account is set to either receive or not receive a quarterly reporting packet in the mail. If you wish to change this setting, please make the appropriate change below.

Send  Do Not Send

**Important Information**

By selecting "Do NOT Send" I understand that the Nevada Department of Employment, Training and Rehabilitation will stop sending paper forms used for filing quarterly contribution and wage reports to my address of record. I understand that because I will no longer receive paper forms for reporting, I must log into UInv each quarter and electronically file my contribution and wage reports online. I understand that I may withdraw my consent to no longer receive paper forms by logging into UInv and updating my reporting options. If my

- Home
- ▶ Summary Information
- ▼ File Reports
- Reporting Options
- View Upload Status
- Make Payments
- ▶ Profile Maintenance
- ▶ Submit a Request
- Change Account Status
- Appeal Information
- My Documents
- ▶ Maintain Users
- ▶ Benefits Information
- Multi Claimant Group
- ▶ Payments



# Wage Report Details

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## WAGE REPORT DETAILS

**AMYS EMPLOYER ACCOUNT 040029578**

Doing Business As : Amys Employer Account Business Type : Corporation FEIN : 99-1234567

Wage Details for Quarter/Year 2/2017

**Important Information**

Please select the Add button to enter new SSN, name, and wage information for each employee paid during the quarter.

Use the Update button to review your Total Gross Wages and Total Taxable Wages.

Please select the Next button to save your data before leaving this page.

**Employee Wages**

Fields marked with an asterisk \* are required.

**Total Gross Wages :** 62,227.00  
**Total Taxable Wages :** 52,687.16

Row	<input type="checkbox"/> Sel	Location	<u>SSN</u> *	<u>Last Name</u> *	<u>First Name</u> *	MI	<u>Gross Wages</u> *	Tip Amount	<u>Taxable Wages</u>	Override Reason	Override Tax Wage calc?
1	<input type="checkbox"/>	1	111-11-2222	Eeone	One		1425.22	0.00	1425.22		<input type="checkbox"/>
2	<input type="checkbox"/>	1	111-11-3333	Eetwo	Two		3249.87	0.00	3249.87		<input type="checkbox"/>
3	<input type="checkbox"/>	1	111-11-4444	Eethree	Three		25154.21	0.00	15614.37		<input type="checkbox"/>
4	<input type="checkbox"/>	1	111-11-5555	Eefour	Four		322.41	0.00	322.41		<input type="checkbox"/>
5	<input type="checkbox"/>	1	111-11-6666	Eefive	Five		16878.02	0.00	16878.02		<input type="checkbox"/>
6	<input type="checkbox"/>	1	111-11-7777	Eesix	Six		6854.35	0.00	6854.35		<input type="checkbox"/>
7	<input type="checkbox"/>	1	111-11-8888	Eeseven	Seven		25.11	0.00	25.11		<input type="checkbox"/>
8	<input type="checkbox"/>	1	111-11-9999	Eeeight	Eight		8102.36	0.00	8102.36		<input type="checkbox"/>
9	<input type="checkbox"/>	1	111-11-1111	Eenine	Nine		715.45	0.00	715.45		<input type="checkbox"/>





# Contribution Report Details

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Wednesday, March 14, 2018

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## CONTRIBUTION REPORT DETAILS

**AMYS EMPLOYER ACCOUNT 040029578**

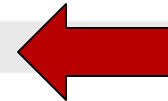
Doing Business As : Amys Employer Account

Business Type : Corporation

FEIN : 99-1234567

### Contribution Report entry for 2/2017

Total Gross Wages*	62227.00
Excess Wages	
<a href="#">Total Taxable Wages *</a>	52687.16



Please enter the Number of covered employees who received pay for any part of the payroll period including the 12<sup>th</sup> of each month of the quarter.

April*	10
May*	7
June*	8



# Certification

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## CERTIFICATION

**AMYS EMPLOYER ACCOUNT 040029578**

**Doing Business As :** Amys Employer Account **Business Type :** Corporation **FEIN :** 99-1234567

**Certification**

\*  I, Amy Yukish, certify that the information provided on these forms is correct and true to the best of my knowledge.

**Report Summary for Quarter/Year 2/2017**

Legal Business Name	AMYS EMPLOYER ACCOUNT	Business Type	Corporation
			99-1234567

**Number of Covered Employees**

	<b>April: 10</b>	<b>May: 7</b>	<b>June: 8</b>	
Total Gross Wages:	\$62,227.00	Contribution:	\$1,554.27	
Total Taxable Wages:	\$52,687.16	Interest:	\$124.32	
Excess Wages:	\$0.00	Penalty:	\$426.52	
Tax Rate:	2.95%	Special Charge:	\$0.00	
Total Amount Due:	\$2,131.45	CEP:	\$26.34	

**Employee Wages**

Location	SSN	Last Name	First Name	MI	Gross Wages	Tip Amount	Taxable Wages	Override Reason
1	111-22-1111	Eenine	Nine		\$215.45	\$0.00	\$215.45	
1	111-11-9999	Eeeight	Eight		\$8,102.36	\$0.00	\$8,102.36	
1	111-11-8888	Eeseven	Seven		\$25.11	\$0.00	\$25.11	
1	111-11-7777	Eesix	Six		\$6,854.35	\$0.00	\$6,854.35	
1	111-11-6666	Eefive	Five		\$16,878.02	\$0.00	\$16,878.02	



# Confirmation

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Wednesday, March 14, 2018

[Help](#) | [Contact](#) | [Resources](#) | [Logoff](#)

## CONFIRMATION

**AMYS EMPLOYER ACCOUNT 040029578**

**Doing Business As :** Amys Employer Account

**Business Type :** Corporation

**FEIN :** 99-1234567

**Confirmation Page**

[Print](#)

**Congratulations! You have successfully submitted your Contribution and Wage report with the Nevada Department of Employment, Training & Rehabilitation**

**Your confirmation number is 7516766**

Account:	040029578
Legal Name:	AMYS EMPLOYER ACCOUNT
Report Quarter:	2
Report Year:	2017
Number of Records:	9
Total Gross Wages:	\$62,227.00
Total Taxable Wages:	\$52,687.16
Report Amount Due:	\$2,131.45
Date/Time:	Wednesday, March 14, 2018 03:22:51 PM

Please print this page and keep for your records.

[Home](#)

