

STATUS REPORT

REPORT TO DETERMINE LIABILITY UNDER THE ARKANSAS EMPLOYMENT SECURITY LAW
 ARKANSAS EMPLOYMENT SECURITY DEPARTMENT P. O. Box 2981 - Little Rock, AR 72203-2981 Telephone (501) 682-3268

IDENTIFICATION SECTION

1. ACCOUNT NUMBER ASSIGNED BY ESD (IF ANY)	2. FEDERAL EMPLOYER I.D. NUMBER
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3. TYPE OF OWNERSHIP (CHECK ONE)					
1. <input type="checkbox"/> CORPORATION	3. <input type="checkbox"/> INDIVIDUAL (SOLE PARTNERSHIP)	5. <input type="checkbox"/> LIMITED PARTNERSHIP	7. <input type="checkbox"/> STATE AGENCY	9. <input type="checkbox"/> TRUST	
2. <input type="checkbox"/> PARTNERSHIP	4. <input type="checkbox"/> PROFESSIONAL ASSOCIATION	6. <input type="checkbox"/> ESTATE	6. <input type="checkbox"/> POLITICAL SUBDIVISION		

IF THE TYPE OF BUSINESS IS A CORPORATION ENTER THE CORPORATE NAME IN ITEM 4 BELOW.

4. NAME		5. MAILING ADDRESS			
CITY	STATE	ZIP CODE	PHONE NUMBER		

6. ENTER THE NAME (OR FIRM NAME) AND BUSINESS ADDRESS WHERE RECORDS OR PAYROLLS ARE KEPT (IF DIFFERENT FROM ITEM #5).

NAME		MAILING ADDRESS			
CITY	STATE	ZIP CODE	PHONE NUMBER		

If the type of ownership is an individual or partnership, enter the name(s) and social security number(s) as applicable below, or if the type of ownership is a corporation, complete the information for two officers. Do not list Board Members or Directors.

7. OWNERS OR CORPORATE OFFICERS ATTACH ADDITIONAL SHEET IF NECESSARY	NAME	SOCIAL SECURITY NUMBER	TITLE	RESIDENCE ADDRESS, CITY, STATE, ZIP

8. BUSINESS LOCATION IN ARKANSAS ATTACH ADDITIONAL SHEET IF NECESSARY	TRADE NAME	STREET ADDRESS, CITY, ZIP, COUNTY	TELEPHONE NO.	No. of Employees

9. IF YOUR BUSINESS IS A CORPORATION, ENTER: ▶▶	CHARTER NUMBER	STATE INCORPORATED	DATE INCORPORATED	REGISTERED AGENT'S NAME	
	ORIGINAL CORPORATE NAME, IF DIFFERENT THAN ABOVE			REGISTERED AGENT'S ADDRESS	

10. IF THE BUSINESS IN ARKANSAS WAS ACQUIRED FROM ANOTHER LEGAL ENTITY ENTER: ▶▶	PREVIOUS OWNER'S ACCOUNT NUMBER (IF KNOWN)		DATE OF ACQUISITION: ▶▶		MONTH	DAY	YEAR
	NAME OF PREVIOUS OWNER		ADDRESS		CITY	STATE	
	WHAT PORTION OF THE BUSINESS WAS ACQUIRED? (CHECK ONE) <input type="checkbox"/> ALL. <input type="checkbox"/> PART (SPECIFY PERCENTAGE) _____						

EMPLOYMENT SECTION

11. ENTER THE DATE YOU BECAME LIABLE FOR STATE UNEMPLOYMENT (HAD ONE OR MORE EMPLOYEES IN SOME PART OF TEN DAYS) (ACA 11-10-209)(1) OF ESD LAW. SEE INSTRUCTIONS ▶▶	MONTH DAY YEAR
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12. IF YOUR ACCOUNT HAS BEEN INACTIVE:	ENTER THE DATE YOUR ORGANIZATION RESUMED EMPLOYING SOMEONE IN ARKANSAS. ▶▶
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13. IF YOU ARE EXEMPT FROM FEDERAL INCOME TAXES UNDER INTERNAL REVENUE CODE OF 1954 SECTION 501 (C)(3), ATTACH A COPY OF YOUR EXEMPTION LETTER. INDICATE YOUR PREFERENCE: REIMBURSE CONTRIBUTION

DOMESTIC - HOUSEHOLD EMPLOYMENT SECTION

COMPLETE 14 ONLY IF YOU HAVE DOMESTIC OR HOUSEHOLD EMPLOYEES (INCLUDES MAIDS, COOKS, CHAUFFEURS, SITTERS, ETC.)

14. ENTER THE ENDING DATE OF THE FIRST CALENDAR QUARTER IN WHICH YOU PAID GROSS WAGES OF \$1000 OR MORE TO EMPLOYEES PERFORMING DOMESTIC SERVICE: ▶▶	MONTH DAY YEAR
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PAYROLL REPORTING SECTION

15. ARE YOU AN EMPLOYEE LEASING EMPLOYER? YES NO

ARE YOUR PAYROLL RECORDS MAINTAINED ON COMPUTERIZED FILES? YES NO

DO YOU WISH TO REPORT BY MAGNETIC MEDIA? IF YES, INDICATE YOUR PREFERENCE: DISC TAPE CARTRIDGE

AGRICULTURE EMPLOYMENT SECTION

16. ARE YOU AN AGRICULTURAL EMPLOYER? (FARM OR RANCH) YES NO

17. ENTER THE ENDING DATE OF THE TWENTIETH WEEK IN WHICH YOU HAD AT LEAST TEN EMPLOYEES IN ARKANSAS PERFORMING AGRICULTURAL LABOR: ▶▶

	MONTH	DAY	YEAR
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18. ENTER THE ENDING DATE OF THE FIRST CALENDAR QUARTER IN WHICH YOU PAID TOTAL WAGES OF \$20,000.00 OR MORE FOR AGRICULTURAL LABOR: ▶▶

VOLUNTARY ELECTION SECTION

19. IF YOU ARE NOT LIABLE UNDER A COMPULSORY PROVISION OF THE ARKANSAS EMPLOYMENT SECURITY LAW, AND YOU WISH TO VOLUNTARILY ELECT COVERAGE FOR YOUR EMPLOYEES, CHECK HERE , AND ENTER THE YEAR YOU WISH LIABILITY TO BEGIN: _____

AT THE END OF TWO (2) YEARS FROM THIS DATE, OR AT THE END OF ANY SUBSEQUENT CALENDAR YEAR, YOU MAY WITHDRAW THIS ELECTION BY FILING A WRITTEN REQUEST.

YOU WILL BE NOTIFIED OF THIS DETERMINATION IN WRITING.

NATURE OF BUSINESS SECTION

20. DESCRIBE FULLY THE NATURE OF BUSINESS IN ARKANSAS AND LIST THE PRINCIPAL PRODUCTS IN ORDER OF IMPORTANCE: ▶▶

SELECT ONE OF THE SHORT TITLES BELOW WHICH MOST CLOSELY DESCRIBES YOUR BUSINESS OPERATIONS IN ARKANSAS AND ENTER THE APPROPRIATE CODE IN THE SPACE PROVIDED.

CODE	SHORT TITLE	CODE	SHORT TITLE	CODE	SHORT TITLE	
						INDUSTRY CODE
01 - Agricultural Production - Crops		36 - Electric and Electronic Equipment		64 - Insurance Agents, Brokers & Service		
02 - Agricultural Production - Livestock		37 - Transportation Equipment		65 - Real Estate		
07 - Agricultural Services		38 - Instruments and Related Products		67 - Holding and Other Investment Offices		
08 - Forestry		39 - Miscellaneous Manufacturing Industries		70 - Hotels and Other Investment Offices		
09 - Fish, Hunting, and Trapping		Nonmanufacturing		72 - Personal Services		
10 - Metal Mining		40 - Railroad Transportation		73 - Business Services		
12 - Coal Mining		41 - Local and Interurban Passenger Transit		75 - Auto Repair, Services, and Garages		
13 - Oil and Gas Extraction		42 - Trucking and Warehousing		76 - Miscellaneous Repair Services		
14 - Nonmetallic Minerals, Except Fuels		43 - U.S. Postal Service		78 - Motion Pictures		
15 - General Building Contractors		44 - Water Transportation		79 - Amusement & Recreation Services		
16 - Heavy Construction Contractors		45 - Transportation by Air		80 - Health Services		
17 - Special Trade Contractors		46 - Pipe Lines, Except Natural Gas		81 - Legal Services		
Manufacturing		47 - Transportation Services		82 - Educational Services		
20 - Food and Kindred Products		48 - Communication		83 - Social Services		
21 - Tobacco Manufactures		49 - Electric, Gas, and Sanitary Services		84 - Museums, Botanical, Zoological Gardens		
22 - Textile Mill Products		50 - Wholesale Trade - Durable Goods		86 - Membership Organizations		
23 - Apparel and Other Textile Products		51 - Wholesale Trade - Nondurable Goods		87 - Engineering, Accounting, Research, Management		
24 - Lumber and Wood Products		52 - Building Material & Garden Supplies		88 - Private Households (Inc. Domestic Employment)		
25 - Furniture and Fixtures		53 - General Merchandise Stores		89 - Miscellaneous Services		
26 - Paper and Allied Products		54 - Food Stores		91 - Executive, Legislative, and General		
27 - Printing and Publishing		55 - Automotive Dealers & Service Stations		92 - Justice, Public Order, and Safety		
28 - Chemicals and Allied Products		56 - Apparel and Accessory Stores		93 - Finance, Taxation & Monetary Policy		
29 - Petroleum and Coal Products		57 - Furniture and Home Furnishings		94 - Administration of Human Resources		
30 - Rubber and Misc. Plastics Products		58 - Eating and Drinking Places		95 - Environmental Quality and Housing		
31 - Leather and Leather Products		59 - Miscellaneous Retail		96 - Administration of Economic Programs		
32 - Stone, Clay, and Glass Products		60 - Depository Institutions		97 - National Security and Intl Affairs		
33 - Primary Metal Industries		61 - Nondepository Credit Institutions		99 - Nonclassifiable Establishments		
34 - Fabricated Metal Products		62 - Security, Commodity Brokers & Services				
35 - Machinery, Except Electrical		63 - Insurance Carriers				

AGENCY USE ONLY	SIC CODE:	BLS OWN CODE:	AUX CODE:	COUNTY CODES:	SEASON CODE	Type Reimbursable _____ Origination Code _____
				STATUS BLS		

SIGNATURE SECTION

21. I HEREBY CERTIFY THAT THE PRECEDING INFORMATION IS TRUE AND CORRECT, AND THAT I AM AUTHORIZED TO EXECUTE THIS STATUS REPORT ON BEHALF OF THE EMPLOYING UNIT NAMED HEREIN.
(THIS REPORT MUST BE SIGNED BY THE OWNER, OFFICER, PARTNER OR INDIVIDUAL FOR WHOM A VALID POWER-OF-ATTORNEY IS ON FILE WITH THE ARKANSAS EMPLOYMENT SECURITY DEPARTMENT.)

SIGNED BY:	TITLE:
FAX NO.:	TELEPHONE:
	DATE: