501(c)3 Election or Change of Status
68-0463 (03-12)

IOWA WORKFORCE DEVELOPMENT

Unemployment Insurance Tax Bureau
1000 E Grand Ave
Des Moines IA 50319
Phone: 888-848-7442 option #3 then option #7

This form is for a 501(c)(3) non-profit employer covered under Iowa Code section 96.19-16i to request or terminate an election to make payments in lieu of contributions (Reimbursable Status).

☑ **Check the option you are requesting**

☐ **Request Reimbursable Status**

- You agree to reimburse Iowa Workforce Development for benefits paid for regular benefits and one-half of extended benefits.
- You must remain a reimbursable employer for at least two consecutive calendar years.
- At the end of each quarter, you will be billed for any benefits charged to your account during the quarter.
- Payments are due within 30 days after the quarterly statement was mailed.

☐ **Request to Terminate Reimbursable Status**

- You must have been a reimbursable employer for at least two consecutive calendar years.
- All of your payments and reports must be current.

Note: All requests must be received by December 1st. If approved, your change in status will be effective on January 1st of the following year.

UI Account #: _____ FEIN: _____

Legal Business Name: _____

DBA: _____

Address 1: _____

Address 2: _____

City: _____ State/Province: _____ Zip+4/Postal Code: _____

By signing below, you agree to the terms above.

_____ _____
Authorized Signature Date

_____ _____ _____
Print Name Title Phone

Return signed form to: Iowa Workforce Development
Unemployment Insurance Tax Bureau
1000 E Grand Ave
Des Moines IA 50319-0209

Agency Approval

_____
UI Representative

_____
Approval Date

Equal Opportunity Employer/Program
Auxiliary aids & services are available upon request to individuals with disabilities.
For deaf and hard of hearing, use Relay 711.