IOWA WORKFORCE DEVELOPMENT
Smart. Results.

Unemployment Insurance Tax Bureau
1000 E Grand Avenue
Des Moines, Iowa 50319

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).

Select 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.

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: _____ Zip+4/Postal Code: _____

By signing below, you agree to the terms above.

Print and sign completed form

_____ _____
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
☐ Denial

_____ _____
Unemployment Insurance Representative Date

Print Form

Election to become RMB 68-0463 (07-2018)