

Payroll North Dakota Reporting

Banyon's Payroll Software generates the following reports.

ND Quarterly Wages Report: Sample report on next page

| U.C. Acct | 2344 | Qtr/Yr | 1st / 01 | Jan | Feb | Mar |
|------------------|------------|----------------------------------|----------|-------------|-----|-----|
| Federal ID | 41-45655 | Due | // | 4 | 2 | 0 |
| Employee Name | QTD Gross | Total Wages | | \$10,935.01 | | |
| Johnson, William | \$6,875.01 | Exclusions Over <u>\$999,999</u> | | \$0.00 | | |
| KELLY, CHAD | \$760.00 | Taxable Payroll | | \$10,935.01 | | |
| SMITH, TOM | \$920.00 | Tax Rate | | 0.00% | | |
| WILSON, NICOLE | \$2,380.00 | Contribution Tax Due | | \$0.00 | | |
| | | Interest Due | | \$0.00 | | |
| | | Penalty For Late Report | | \$0.00 | | |
| | | Adjustments for Prior Balance | | \$0.00 | | |
| | | Total Payment Due | | \$0.00 | | |
| | | Contact Name | | | | |
| | | Telephone | () - | | | |

View Wage Report

ND Quarterly Wage Report: Software prints report & data

**EMPLOYER'S CONTRIBUTION
AND WAGE REPORT (AR)**
NSND/CENTRALIZED SERVICES
UNEMPLOYMENT INSURANCE
SF # 52307 (R. 6-02)

CBS BUSINESS SERVICES
PO BOX 5507 BISMARCK, ND 58506-5507
701-328-2814 OR 800-4722952
TTY: Relay ND 800-3666888 FAX: 701-328-1882

Taxable wages are the total wages paid each employee in the calendar year. If no wages were paid, write none in item 1, sign and return.

DEMONSTRATION DATA
5341 MAYWOOD ROAD
Your City ND, 55364

| | |
|---|-------------|
| 1. Total Wages Paid This Quarter | \$10,935.01 |
| 2. Excess Wages | \$0.00 |
| 3. Taxable Wages (line 1 minus line 2) | \$10,935.01 |
| 4. Contribution Due 0.00% x line 3 | \$0.00 |
| 5. Adjustments for Prior Balances | \$0.00 |
| 6. Penalty | \$0.00 |
| 7. Interest | \$0.00 |
| 8. Total Amount Payable to Job Service North Dakota | \$0.00 |

CHECK HERE IF ADDRESS HAS CHANGED - CHANGE ADDRESS ABOVE

| | | | |
|------------------------|------------------------------|----------|-------------------|
| Account Number 2344 | Quarter Ending March 31st | Due Date | Tax Rate 0.00% |
|------------------------|------------------------------|----------|-------------------|

9. Indicate if:

- Business has been sold: Date Sold _____ New Owner's Name _____
- Business has been discontinued: Date Discontinued _____ Address _____
- FEIN has been changed: New FEIN _____ City, State, ZIP _____

| | | | |
|--|--|---|--|
| 10. Employer's Social Security Number 123-45-6789 | 11. Name of Employer Johnson, William | 12. GROSS WAGES PAID THIS QUARTER \$0.00 | 13. NUMBER OF EMPLOYEES LISTED (ALL PAGES) |
|--|--|---|--|

14. For each month, report the number of covered workers who worked during or received payroll for the payroll period which includes the 15th of the month.

| | |
|-----------|---|
| 1st Month | 4 |
| 2nd Month | 2 |
| 3rd Month | 0 |

| |
|-------------|
| \$0.00 |
| \$10,935.01 |

15. TOTAL WAGE THIS PAGE

| | | |
|-------------|------------------|------------|
| 123-45-6789 | Johnson, William | \$6,875.01 |
|-------------|------------------|------------|

16. Name and telephone number of person completing report.

NAME: TELEPHONE NUMBER:

I certify that this report is correct and no part of the contribution was or will be paid by any employee

Signature: Title: Telephone: Date:

North Dakota Retirement Reporting

North Dakota Retirement - March Contributions

Plan Number Report Date [Click to Reload March Contributions](#)

| Employee Name | Provider | Gross | Employee Contribution | Employer Contribution | Employer Tax Def. | Deferred Companion |
|--|----------|-------|-----------------------|-----------------------|-------------------|--------------------|
| <input checked="" type="checkbox"/> Johnson, William | | 0 | \$5,000.00 | \$3,000.00 | | |
| <input checked="" type="checkbox"/> KELLY, CHAD | | | \$4,000.00 | \$1,500.00 | | |
| <input checked="" type="checkbox"/> WILSON, NICOLE | | | | | | |
| <i>3 Employees Selected</i> | | | | | | |
| | | | \$9,000.00 | \$4,500.00 | | |

Senders Name Phone Plan Transmittal Adjustments
 Plan Transmittal Other Amounts

Deduction Transmittal Report

**ND PUBLIC EMPLOYEE RETIREMENT SYSTEM
 TRANSMITTAL OF DEDUCTION
 SFN 52424**

RETURN WITH REMITTANCE TO:
 ND PERS
 PO BOX 1657
 BISMARCK, ND 58502-1657

3/14/2007
 Page 1

DEMONSTRATION DATA

| NAME | SOCIAL SECURITY | CURRENT MONTH GROSS SALARY | MISCELLANEOUS PAY |
|------------------|-----------------|----------------------------|-------------------|
| Johnson, William | 123-45-6789 | \$0.00 | |
| KELLY, CHAD | 456-12-3789 | \$0.00 | |
| WILSON, NICOLE | 147-25-8369 | \$0.00 | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| TOTALS | | \$0.00 | |

| | |
|---|--------------------|
| (1) TOTAL EMPLOYEE PORTION PAID BY EMPLOYEE (AFTER TAXES) | \$9,000.00 |
| (2) TOTAL EMPLOYEE PORTION PAID BY EMPLOYER (TAX DEFERRE | \$0.00 |
| (3) TOTAL EMPLOYER PORTION PAID BY EMPLOYER | \$4,500.00 |
| TOTAL REMITTANCE | \$13,500.00 |

North Dakota Administration Transmittal: Software prints form & data

North Dakota Public Employees Retirement System Companion Plan Plan Administration Transmittal Form

Plan Number 34556 Date: 3/14/2007
 Sender's Name: None Sender's Phone: None
 Payroll Period Ending _____ Location: DEMONSTRATION DATA

| Type of Transaction | Number |
|-------------------------------|--------|
| Number of Contribution Files: | |
| Employee Deferral: | |
| Total Number of Files | |

| Medium | Number |
|---------------------------------------|--------|
| Diskette File Name(s): | |
| Tape: | |
| Enclosed | |
| Sent Separately | |
| Hard Copy: (Use Payroll Roster Sheet) | |
| Total Number of Participants: | 0 |

| Source Identifier | Deduction Type (Source) Name | Amount |
|---------------------|--------------------------------------|--------|
| ED | Employee Pre-Tax Contribution | |
| TT | Negative Contributions / Adjustments | |
| Other | | |
| TOTAL AMOUNT | | |

Funding Via:

ACH Wire Check (Attached)

Mailing Instructions for Data (not money)

| | |
|--|---|
| <p><u>Payroll Roster & Diskettes</u> American General Retirement Services Brian Hyatt - L14-30 2929 Allen Parkway Houston, Texas 77019 713-831-2681 (phone) 713-831-4111(fax)</p> | <p><u>Payroll Roster & Diskettes</u> Send the preferred way Electronically to: AGRS_mail_DB@valic.com</p> |
|--|---|

Mailing Instructions for Money/Checks

| | |
|--|--|
| <p><u>Overnight Mail:</u> American General Retirement Services Attn: Julie Donahue Defined Contribution Services 66 Brooks Dr. Braintree, MA 02184</p> | <p><u>Regular Mail:</u> American General Retirement Services Attn: Julie Donahue P. O. Box 8254 Boston, MA 02266-8254 617.483.4735 (phone) 781.796.2864 (fax)</p> |
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Refer to Wiring and ACH Credit Instructions see page 8 for more details.