Idaho Department of Labor

Unemployment Insurance Compliance Bureau

Tax Support | Phone: (208) 332-3576

Web: labor.idaho.gov



CORPORATE OFFICER EXEMPTION FORM

This form must be completed, signed, and returned to the Idaho Department of Labor before the corporate officer listed below is exempt from reporting his/her wages for state unemployment insurance tax purposes.

Exemption is not valid unless the corporate officer requesting to be exempt signs the form. The form must be received or post-marked on or before March 31st to be effective in the current year.

You may return the form via Employer Portal secure messaging, fax to 208-334-6301, or mail to Idaho Department of Labor, ATTN Tax Support, 317 W. Main St., Boise, Idaho 83735-0760.

The following must be true for the corporate officer:

Private Corporation

Public Corporation

•	Voluntarily agrees to be exempted from coverage	•	Is voluntarily elected or voluntarily appointed in accordance with the articles of incorporation or the bylaws of the corporation
•	Is a shareholder	•	Is a shareholder
•	Exercises substantial control in the daily management of the corporation	•	Exercises substantial control in the daily management of the corporation
		•	Whose primary responsibilities do not include the performance of manual labor

Refer to Idaho Code §72-1352A(1).

Employer Information

Unemployment Insurance Tax Account Nur	mber (EAN):
Federal Employer Identification Number (Fi	EIN):
DBA:	
<u>Corp</u>	porate Officer Information
Officer's Name:	Officer's SSN:
Officer's Title:	Off. 1 DI
Date Exemption to be Effective:	Officer's % of Ownership:
	nent insurance tax purposes and does not exempt the individual from erage. Exempting a corporate officer may result in an increase in the
Corporate Officer's Signature	Date
Print Name of Preparer	Preparer's Phone