

GOVERNMENT OF THE DISTRICT OF COLUMBIA

Department of Employment Services



MURIEL BOWSER
MAYOR

DR. UNIQUE MORRIS-HUGHES
DIRECTOR

PFL30H

NOTE: You must complete the UC30H before completing this form.

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| FORM ID: DOES-PFL30H-2019 | EMPLOYER ANNUAL CONTRIBUTION AND WAGE REPORT | POSTMARK DATE (DO NOT USE THIS SPACE) |
| EMPLOYER ACCOUNT #: | EMPLOYER NAME AND ADDRESS: | FEDERAL EIN: |
| TAX RATE: 0.62% | | YEAR ENDING: |
| SEE INSTRUCTIONS ON PAGE 2 | | |
| 1. TOTAL WAGES PAID (See Instructions) | | \$ _____ |
| 2. CONTRIBUTION DUE (Multiply line 1 by the tax rate of 0.62% (0.0062) | \$ _____ | |
| 3. APPROVED CREDIT | \$ _____ | |
| 4. SUBTOTAL (Subtract line 3 from line 2) | \$ _____ | |
| 5. PLUS INTEREST DUE | \$ _____ | |
| 6. PLUS PENALTY DUE | \$ _____ | |
| 7. EQUALS TOTAL REMITTANCE AMOUNT (Add line 4, 5 and 6) | | \$ _____ |
| (Make check or money order payable to "DC Treasurer") | | |
| STATUS CHANGES | | |
| 8. ENTER THE APPROPRIATE INFORMATION BELOW IF ANY CHANGE HAS OCCURED: | | |
| CERTIFICATION | | |
| I CERTIFY THAT THE INFORMATION CONTAINED IN THIS REPORT AND ANY WAGE REPORTS ATTACHED HERETO ARE TRUE AND CORRECT AND THAT NO PART OF THE TAX WAS OR WILL BE DEDUCTED FROM EMPLOYEES' WAGES. | | |
| PRINT NAME: | TITLE: | |
| SIGNATURE: | TELEPHONE: | DATE: |

Instructions

- All household employers using the PFL30H must also submit the UC30H.
- **Filing the PFL30H does not exempt employers from the requirement to file wages using the UC30H.** The UC30H is used to file wages for both the UI and the PFL programs annually. Failure to file wages on time using the UC30H could result in PFL penalties and interest.
- **Please note that because 2019 was the first year for the District of Columbia’s Paid Family Leave tax there were only three reportable tax quarters (Q2, Q3 and Q4).** As a result, you must exclude the wages paid in Q1/2019 from PFL30H, Line 1.

Line 1: TOTAL WAGES. Enter the total gross wages paid (before deductions) including the cash value of all remuneration paid in any medium other than cash to all covered employees in the year. For most employers, the amount reported on the PFL30H, Line 1, will not equal the amount reported on the UC30H, ITEM 13, TOTAL WAGES, due to the exclusion of Q1/2019 wages. The amount reported on the PFL30H, Line 1, must never exceed the amount reported on the UC30H, ITEM 13, TOTAL WAGES. If the amount reported on the PFL30H, Line 1, is less than the amount reported on the UC30H, ITEM 13, TOTAL WAGES, due to an employee exception, then you must submit documents in compliance with DOES’ employer guidance for excepted employees. See “Process for Determining Employee Exceptions from PFL Coverage” available at <https://does.dc.gov/page/dc-paid-family-leave>.

Line 2: CONTRIBUTION DUE. Amount of PFL taxes owed to DOES. Multiply the amount in Line 1 by 0.0062. Example: \$100,000 (Line 1) * 0.0062 = \$620 (Line 2).

Line 3: APPROVED CREDIT. The amount of your approved credit that will be applied toward your PFL contribution due. Credit applies automatically and should be considered prior to penalty and interest calculation. (Please contact PFL Tax Division to confirm the amount of any credit balance on the account).

Line 4: SUBTOTAL. Subtract line 3 from line 2

Example: An employer has a credit balance of \$100.00. Total wages submitted is \$100,000.00. Upon submission, the total PFL Tax debt = \$620.00 but the amount owed = \$520.00.

Line 5: INTEREST DUE. Interest will be assessed at a rate of 1.5% if the contribution due on the report is not paid by the end of the month following the close of the period to which it pertains. (Please contact PFL Tax Division to confirm the amount of any interest due on the account).

Line 6: PENALTY DUE. In addition to interest, a penalty of 10% of the contribution, but not less than \$100.00, will be assessed if either the PFL30H or the UC30H is not filed, or if the contribution due is not paid by the end of the month following the close of the tax period to which it pertains. **Separate payments must be made for the PFL tax and for UI tax.** (Please contact PFL Tax Division to confirm the amount of any penalty due on the account).

Line 7: TOTAL REMITTANCE AMOUNT. Add Lines 4, 5, and 6. Make check or money order payable to “DC Treasurer”. You must include your employer account number and the year on your check or money order. **DO NOT** send cash.

Mail PFL30H and PFL payment to:
Office of Paid Family Leave Tax Division
4058 Minnesota Avenue, N.E.
Washington D.C. 20019

Line 8: STATUS CHANGES. If any information pertaining to your employer account has changed since the last reporting period, please enter the changed information and provide supporting documentation where relevant.