

| State:   | Quarter Ending | reporting requir<br>reviewing instru<br>comments rega               | Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. Respondents' obligation to reply to these reporting requirements is mandatory (P.L. 104-188). Public reporting burden for this collection is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of Information. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the U.S. Department of Labor, Employment and Training Administration, Division of National Programs, Tools, &Technical Assistance, 200 Constitution Ave., NW, Room C-4510, Washington, |  |   |  |   |                                     | Expiration<br>Date: August          | OMB No. 1205-0371<br>Expiration<br>Date: August 31, 2018 |                                     |
|--|----------------|---|--|--|---|--|---|-------------------------------------|-------------------------------------|--|-------------------------------------|
|  |                |   |  | - D · · · 4005 0074)   | PART I. CERTIFICAT                          | ION WORKLO                               | \D  |                                     |                                     |  |                                     |
|  | ſ              | CERTIFICATION REC   | UIESTS (System   | Innuts)  |   |  | CE  | RTIFICATION REQUEST                 | 'S (System Qutry                    | uts)   |                                     |
| A) Incomplete B) Requests Needing Action C<br>Requests |                |   | C) New Requests D) Total Requests to Be Processed  |  |   | E) Certified Requests F) Denied Requests |   | G) Incomplet<br>Requests            | te H) Reques                        | H) Requests Needing<br>Action                            |                                     |
|  | -1             |   | •  | PART II.   | CHARACTERISTICS (                           | OF CERTIFIED I                           | NDIVIDUALS  | 1                                   |                                     |  |                                     |
| I) By WOTC Target<br>Group                             |                | (a) No. of CCs(b) No.Resulting inCertifiedCertificationsIndividuals |  | J) By Occ  | J) By Occupation (a) N<br>Certii<br>Individ |  | J) By Occupation (Cont.)  |                                     | (a) No.<br>Certified<br>Individuals | K) By Starting<br>Hourly Wage                            | (a) No.<br>Certified<br>Individuals |
| 1.IV-A TANF Recipient                                  |                |   |  | Name   | e-Code                                      |  | Name-Code   |                                     |                                     | 1. Under<br>Federal                                      |                                     |
| 2Ba. Veteran Receiving<br>SNAP benefits (V)            |                |   |  | 1. Management Occupations – 11                                   |   |  | 12. Protective Services – 33  |                                     |                                     | 2. \$7.25 - \$8.25                                       |                                     |
| 2Bb. Disabled Veteran (DV)                             |                |   |  | 2. Business & Financial Operations – 13                          |   |  | 13. Food Preparation & Serving – 35<br>14. Bldg. & Grounds Cleaning<br>& Maintenance – 37 |                                     |                                     |  |                                     |
| 2Bc. DV Unemployed for 6 months                        |                |   |  |  |   |  |   |                                     |                                     | 3. \$8.26 – \$8.99                                       |                                     |
| 2Bd. V Unemployed for 4 weeks                          |                |   |  | 3. Computer & Mather   | matical – 15                                | 15. Personal Care & Service - 39         |   |                                     | 4. \$9.00 -\$9.99                   |  |                                     |
| 2Be. V Unemployed for 6 months                         |                |   |  | 4. Architecture & Engineering – 17                               |   |  | 16. Sales & Related Occupations – 41  |                                     |                                     | 5. \$10.00 – Higher                                      |                                     |
| 3. Ex-Felon  |                |   |  | 5. Life, Physical & Social Sciences – 19                         |   |  | 17. Office/Administrative Support – 43  |                                     |                                     | 6. TOTAL (For Qtr.)                                      |                                     |
| 4. Summer Youth  |                |   |  | 6. Community & Social Services – 21                              |   |  | 18. Farming, Fishing & Forestry – 45  |                                     |                                     |  |                                     |
| 5. Designated<br>Community                             |                |   |  | 7. Legal Occupations – 23  |   |  | 19. Construction  | n & Extraction – 47                 |                                     |  |                                     |
| 6a. Voc. Rehab Referral                                |                |   |  | 8. Education, Training, & Library – 25                           |   |  | 20. Installation/Maintenance/Repair- 49   |                                     |                                     |  |                                     |
| 6b. Ticket Holder                                      |                |   |  | 9. Arts, Design, Entertainment,<br>Sports/Media Occupations – 27 |   |  |   | Occupations – 51                    |                                     |  |                                     |
| 7. SNAP Recipient                                      |                |   |  | 10. Healthcare Practitioner & Technical – 29                     |   |  | 22. Transportat<br>Moving Product   | ion & Material<br>ion Occupations – |                                     |  |                                     |
| 8. SSI Recipient                                       |                |   |  | 11. Healthcare Support Occupations – 31                          |   |  | 23. Military Spe  | cific Occupations – 55              |                                     |  |                                     |
| 9. Long-term TAN                                       | IF             |   |  |  |   |  |   |                                     |                                     |  |                                     |
| 10. LTUR   |                |   |  |  |   |  |   |                                     |                                     |  |                                     |
| 11. TOTAL (For Q                                       | Qtr.)          |   |  |  |   |  |   |                                     |                                     |  |                                     |
| 12. TOTAL (YTD)  | ·              |   |  |  |   |  |   |                                     |                                     |  |                                     |
| 24. Name and Title of Responsible Official: 25. Sig    |                |   | Signature Title:   | 26. Dat  | e Signed:                                   | 27. Total (For Q                         | ptr.)   |                                     |                                     |  |                                     |

### Instructions for Preparing ETA Form 9058, Report 1 – "Certification Workload and Characteristics of Certified Individuals," Work Opportunity Tax Credit Report

**Introduction.** Part I. of this report clarifies and simplifies data reported on certifications issued and provides state workforce agencies' (SWAs) workload numbers during each reporting quarter. Part II., continues to collect data on selected characteristics of certified individuals.

Form Updates. The Protecting Americans from Tax Hikes Act of 2015 introduced a new WOTC target group, the Long-term Unemployment Recipient (LTUR), see Box 10.

**Background.** The purpose of ETA Form 9058 is to provide SWAs with a standardized ereporting format, which accurately reflects program activity levels and outcomes under the Work Opportunity Tax Credit (WOTC). It is important for SWAs to maintain programmatic reporting procedures that account for each tax request (IRS Form 8850) received and its subsequent outcome (issuance of a tax certification or denial). A properly completed ETA Form 9058 accurately reflects program use and the level of any programmatic backlog that may exist. To ensure that the WOTC Program can be evaluated accurately at the national level, it is critical that all SWAs report in a standardized manner using the web-based Enterprise Business Service System (EBSS) Tax Credit Reporting System (TCRS).

ETA Form 9058 (Rev. April 2016)

# INSTRUCTIONS FOR COMPLETING THIS FORM:

**State.** Enter the name of the state submitting ETA Form 9058.

**Quarter Ending Period**. Enter ending date of the quarter for the reported program data.

**Part I. "Certification Workload."** SWAs must identify from Part I, Item F on the previous reporting quarter's ETA Form 9058 the number of requests (IRS Form 8850s) determined to be incomplete or Needing Action, as defined below:

(A) **Number of Requests Incomplete.** Enter the total number of requests (IRS Form 8850s) received by the SWA prior to the beginning of the current report period, but for which no applicant eligibility determination action (excluding the 48-hour review) was taken. This total is to be entered into Part I, Item (A) of ETA Form 9058.

(B) **Number of Requests Needing Action.** Enter the total number of requests (IRS Form 8850s) received by the SWA prior to the beginning of the current report, but for which no review and total is to be entered into Part I, Item (B) of recently revised ETA Form 9058.

(C) **New Requests**. Enter the total number of requests (IRS Form 8850s) received by the SWA during the current reporting quarter. Some states may have received requests (IRS Form 8850s) that were not previously recorded and/or reported on any prior quarterly report ETA 9058 for various reasons. It is Important for the SWA to report all requests (IRS Form 8850s) received. Therefore, any request received outside of the current reporting quarter, which has not previously been reported, should be included with the number of requests received during the current reporting period. That total should be entered as the number of "New Requests". This total is to be entered into Part I, Item (C) of ETA Form 9058.

(D) **Total Requests to Be Processed.** Enter the sum of Items A, B & C. This total represents the number of requests (IRS Form 8850s) received by the SWA, which are available to be processed. This total is to be entered under Part I, Item (D) of ETA Form 9058. <u>Note</u>. A denial is a certification request (IRS Form 8850) determined by the SWA to be ineligible for the WOTC.

(E) **Requests Certified.** Enter the total number of WOTC certifications issued during the current report period.

(F) **Requests Denied.** Enter the total number of requests (IRS Form 8850s) denied by the SWA during the current report period.

Note. A denial is a request (IRS Form 8850) determined by the SWA to be ineligible for the WOTC.

(G) **Number of Requests Incomplete.** Enter the total number of requests (IRS Form 8850s) received and reviewed by the SWA, but which the SWA could neither approve nor deny due to such things as, but not limited to, the need for additional eligibility documentation for which the SWA has made a formal request to the employer, authorized tax consultant, or other third party entity, ETA Form 9061 not submitted, etc.

<u>Note</u>. This number will also be entered in Part 1, Item A. of the subsequent quarterly report ETA Form 9058.

(H) **<u>Number of Requests Needing Action</u>**. Enter the number of requests (IRS Form 8850s) received by the SWA but for which no review and/or action has yet been taken to determine applicant eligibility.

<u>Note</u>. This value will also be entered in Part I, Item B. of the subsequent quarterly report ETA Form 9058. Part I, Item H is the sum of Item D, minus Item E, minus Item F, minus Item G.

### Part I. Completion Formula:

(A + B + C) = D and D - (E + F + G) = H Same as: Items (A+B+C) = D and (D-E-F-G) = H

# Part II. "Characteristics of Certified Individuals by Tax Credit." This part is divided into three sections (Section I, Section J, and Section K).

Section I reflects the number of requests (IRS Form 8850s) certified by the SWA during the current report period **by WOTC target groups.** Section J reflects the number of requests (IRS Form 8850s) certified by the SWA during the current report period **by occupation.** Section K reflects the number of requests (IRS Form 8850s) certified by the SWA during the swa during the current report period **by starting hourly wage.** 

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ETA Form 9058 (<mark>Rev. April 2016)</mark>

#### Section I.

**Section I, Column (a)**. Enter the total number of certifications, issued by the SWAs, by target group, during the current report period, which resulted from the issuance of a conditional certification i.e., ETA Form 9062.

Section I, Column (b). Enter the total number of WOTC certifications issued by the SWAs, by target group, during the current report period.

Section I, Line #1. Enter the total number of WOTC certifications issued by the SWA during the current report period, for the IV-A TANF group.

**Section I, Line #2Ba.** Enter the total number of WOTC certifications issued by the SWA during the current report period, for Veterans receiving SNAP benefits.

**Section I, Line #2Bb.** Enter the total number of WOTC certifications issued by the SWA during the current report period, for "Disabled Veterans" receiving compensation for a service-connected disability.

**Section I, Line #2Bc.** Enter the total number of WOTC certifications issued by the SWA during the current report period, for Disabled Veterans unemployed for 6 months.

**Section I. Line #2Bd.** Enter the total number of WOTC certifications issued by the SWA during the current report period, for Veterans unemployed for at least 4 weeks but less than 6 months.

**Section I. Line #2Be.** Enter the total number of WOTC certifications issued by the SWA during the current report period, for Veterans unemployed for at least 6 months.

Section I. Line #3. Enter the total number of WOTC certifications issued by the SWA during the current report period, for Ex-felons.

**Section I. Line #4.** Enter the total number of WOTC certifications issued by the SWA during the current report period for the Summer Youth group

**Section I, Line #5.** P.L. 110-28 changed the name of the High-Risk Youth to "Designated Community Residents (DCRs)." Enter the total number of WOTC certifications issued by the SWA during the current report period, for DCRs.

**Section I, Line #6a.** Enter the total number of WOTC certifications issued by the SWA during the current report period, for Vocational Rehabilitation Referrals.

Section I, Line #6b. Enter the total number of WOTC certifications issued by the SWA during the current report period, for "ticket holders." (e.g., SSDI, or Voc. Rehab -- formerly called People with Disabilities).

**Section I, Line #7.** Enter the total number of WOTC certifications issued by the SWA during the current report period, for SNAP (formerly Food Stamps) recipients.

Section I, Line #8. Enter the total number of WOTC certifications issued by the SWA during the current report period, for SSI recipients.

Section I, Line #9. Enter the total number of WOTC certifications issued by the SWA during the current report period, for "Long-term TANF" Recipients.

Section I. Line #10. Enter the total number of WOTC certifications issued by the SWA during the current report period, for "Long-term Unemployment Recipients" (LTURs).

**Section I, Line #11.** Enter the sums of columns (a) and (b) and also the federal program current Quarter (For Qtr.) Totals of columns (a) and (b) for Column I. "By WOTC Target Group;" and for Column J. "By Occupation," Line # 27. Total (For Qtr.) and for Column K. By Starting Hourly Wage" Line # 6 (For Qtr.). <u>Note</u>. The first quarterly report of the federal program year (October 1-December 31), the totals of Section I, Line #11 (For Qtr.) and Line #12 (YTD) should be the same. Also, the total (For Qtr.) of Part II, Section I, Line #12, columns (a) & (b) should equal the total entered in Part I. Item E. Certified Requests.

Section I, Line #12. After Quarter 1, for all subsequent quarters enter the cumulative federal program Year-to-Date (YTD) totals of columns (a) and (b). (including totals for Column I, Column J, and Column K (right hand side of this form). <u>Reminder</u>. The first quarterly report of the federal program year (October 1-December 31), the totals of Section I, Line #11 and Line #12 should be the same.

### Section J.

**Section J, Column (a).** Enter the total number of WOTC Certifications issued by the SWA during the current report period, By Occupation. <u>Note</u>: The total for Section J, Column (a), Line #27 is the sum of the column and must equal the total for Section I, Column (a) & (b) Line # 10.

The occupational data reported in Boxes 1-23 are derived from the job titles reported on ETA Forms 9061 or 9062. To prepare this report, SWAs must use the O\*NET job families of occupations and their two-digit corresponding codes as illustrated in the following table.

| O*NET SOC JOB FAMILIES                                    |             |  |            |  |  |  |  |  |
|---|-------------|--|------------|--|--|--|--|--|
| <u>Name</u>   | <u>Code</u> | <u>Name</u>  | <u>Coc</u> |  |  |  |  |  |
| Management Occupations<br>Business & Financial Operations | 11<br>13    | Food Preparation &<br>Serving Related<br>Bldg. & Grounds<br>Cleaning & | 3<br>3     |  |  |  |  |  |
| Computer& Mathematical Occupations                        | 15          | Personal Care &  | 3          |  |  |  |  |  |
| Architecture & Engineering                                | 17          | Sales & Related  | 4          |  |  |  |  |  |
| Life, Physical & Social Sciences                          | 19          | Office &<br>Administrative   | 4          |  |  |  |  |  |
| Community & Social Services                               | 21          | Farming, Fishing,  | 4          |  |  |  |  |  |
| Legal Occupations   | 23          | Construction &   | 4          |  |  |  |  |  |
| Education, Training, & Library                            | 25          | Installation,<br>Maintenance &<br>Poppir                               | 4          |  |  |  |  |  |
| Arts, Design, Entertainment, Sports and Media Occupations | 27          | Production   | 5          |  |  |  |  |  |
| Healthcare Practitioner & Technical                       | 29          | Transportation &<br>Material   | 5          |  |  |  |  |  |
| Healthcare Support Occupations                            | 31          | Military Specific  | 5          |  |  |  |  |  |
| Protective Service Occupations                            | 33          | Occupations  |            |  |  |  |  |  |

### Section K

**Section K, Column (a).** Enter the total number of WOTC certifications issued by the SWA during the current report period, "By Starting Hourly Wage." <u>Note</u>. The TOTAL (For Qtr.) for Section K, Column (a), Line #6 is the sum of the column for that quarter and must equal the total for Section I, column (b) "Number Certified Individuals," Line #11.

Convert as follows:

| <u>Unit of Time</u> | Calculated Hourly W   |
|---------------------|-----------------------|
| <u>age</u> Day      | Amount divided by 8   |
| Week                | Amount divided by 40  |
| Month               | Amount divided by 172 |
| Month               | Amount divided by 172 |

24. Name and Title of Responsible Official. Enter the name and title of the authorized signatory official.

**25. Signature.** Enter the signature of the authorized signatory official.

<sup>&</sup>lt;sup>1</sup> According to the Fair Labor Standards Act (FLSA), the federal minimum wage is \$7.25 per hour effective July 24, 2009. **Source:** Wage and Hour Division at the U.S. Department of Labor.

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