

# Employee File Adjustment Form

## Year-End Adjustments Only

Company # \_\_\_\_\_ State Code \_\_\_\_\_ Local Code \_\_\_\_\_

Employee Name \_\_\_\_\_ Employee # \_\_\_\_\_

### TAXABLE ADJUSTMENTS

GROSS	FIT NTXBL	FIT TXBL	FIT TAX	EIC PAID
_____ . ____	_____ . ____	_____ . ____	_____ . ____	_____ . ____
SIT TXBL	SIT TAX	LOC TXBL	LOC TAX	
_____ . ____	_____ . ____	_____ . ____	_____ . ____	

### FICA ADJUSTMENTS

OASDI TXBL	OASDI TAX	HI TXBL	HI TAX	MED TXBL	MED TAX
_____ . ____	_____ . ____	_____ . ____	_____ . ____	_____ . ____	_____ . ____
COMPANY OASDI TXBL	COMPANY OASDI TAX	COMPANY HI TXBL	COMPANY HI TAX	COMPANY MED TXBL	COMPANY MED TAX
_____ . ____	_____ . ____	_____ . ____	_____ . ____	_____ . ____	_____ . ____

### UNCOLLECTIBLE ADJUSTMENTS

UNCOLL OASDI	UNCOLL HI
_____ . ____	_____ . ____

### DEDUCTION ADJUSTMENTS

DEP CARE	MED REIM	OPT LIFE	DEF COMP	PRE TAX	IMP LIFE
_____ . ____	_____ . ____	_____ . ____	_____ . ____	_____ . ____	_____ . ____

### NON-RESIDENT ALIENS

\_\_\_\_\_ Employee is a non-resident alien employee and should be deleted from the year-end audit reports.

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**FAX TO Year-End Coordinator @ (804) 225-3499**