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Certification Workload and Characteristics of Certified Individuals

Work Opportunity Tax Credit - Report No. 1

State: Quarter

Ending:

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, D.C. 20210 (Paperwork Reduction Act – OMB Control No. 1205-0371).

PART I. CERTIFICATION WORKLOAD **CERTIFICATION REQUESTS (System Outputs)** CERTIFICATION REQUESTS (System Inputs) A) Incomplete B) Requests Needing Action C) New Requests D) Total Requests E) Certified Requests F) Denied Requests G) Incomplete H) Requests Needing Action Requests Requests to be Processed F1. F2. C2) Out of State Requests F3.

			PART II. CHARACTERIST	TICS OF CERTIFIED	INDIVIDUALS			
By WOTC Targeted Group IV-A (TANF) Recipient	(a) No. of CCs Resulting In Certifications	(b) No. of Certified Individuals	J) By Occupation Name – Code No.	(a) No. of Certified Individuals	J) By Occupation (Cont.) Name – Code No.	(a) No. of Certified Individuals	K) By Starting Hourly Wage 1. Under Federal	(a) No. of Certified Individuals
2Ba. Veteran Receiving SNAP Benefits (V)	Germidulons	marriduais	1. Management Occupations – 11		12. Protective Services – 33		Minimum Wage* 2. At Federal	marviduais
2Bb. Disabled Veteran (DV)			2. Business & Financial Operations – 13		13. Food Preparation & Serving – 3514. Building & Grounds Cleaning &		Z. At rederal Minimum Wage	
2Bc. DV Unemployed for 6 mos 2Bd. V Unemployed for 4 weeks			3. Computer & Mathematical – 15		Maintenance – 37 15. Personal Care & Service - 39		3. \$7.25 - \$9.99	
2Be. V Unemployed for 6 mos			4. Architecture & Engineering – 17		16. Sales & Related Occupations – 41		4. \$10.00 - \$14.99	
Ex-Felon SummerYouth Employee			5. Life, Physical & Social Sciences – 19		17. Office/Administrative Support – 43		5. \$15.00 - \$19.99	
Designated CommunityResident			6. Community & Social Services – 21		18. Farming, Fishing & Forestry – 4519. Construction & Extraction – 47		6. \$20.00 - more	
6a. Voc.Rehab (VR) Referral			7. Legal Occupations – 23		20. Installation/Maintenance /		7. TOTAL (For Qtr)	
6b. Ticket Holder (Ticket to Work) 7. SNAP Recipient			8. Education, Training, & Library – 25		Repair – 49 21. Production Occupations – 51			
8. SSI Recipient			9. Arts, Design, Entertainment, Sports / Media Occupations – 27		22. Transportation & Material Moving Production Occupations – 53			
9. Long-Term TANF Recipient 10. LTUR			10. Healthcare Practitioner & Technical – 2	9	23. Military Specific Occupations – 55			
11. TOTAL(ForQtr)			11. Healthcare Support Occupations – 3	1	24. TOTAL (For Qtr)			
12. TOTAL (YTD)								
25. Name and Title of Certifying Offi	icial:			26. Signature:		27. Date:		



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

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. SWAs will report on two new metrics in the EBSS tax credit reporting system:

- 1) Out-of-state certification requests received during the reporting period (fiscal quarter); and
- 2) Reason for issuing Denial notifications. See Part I. Certification Workload, Item C, and Item F. This form also contains updated wage bracket information for reporting on new hire hourly wages. See Part II., Section K) By Starting Hourly Wage.

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 certification request (IRS Form 8850) received and its subsequent outcome (issuance of a 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 thatall SWAs report in a standardized manner using the web-based Enterprise Business Service System (EBSS) Tax Credit Reporting System (TCRS).



INSTRUCTIONS FOR COMPLETING THIS FORM:

State. Enter the name of the state of the state workforce agency (SWA) submitting WOTC Report – 1, ETA Form 9058.

Quarter Ending. Enter ending date of the fiscal year reporting quarter for the applicable program data (i.e. QE 9/30/23).

Part I. "Certification Workload." SWAs must identify the reporting status for each certification request (IRS Form 8850) included in the SWA's total workload. This includes any requests (IRS Form 8850s) that the SWA interacted with during the applicable quarter ending. Use the reporting status options for requests, 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 initial review) was taken. Note: This value is auto-populated with the value entered for Part I, Item (G) of the previous quarter ending's report on ETA Form 9058.
- (B) Number of Requests Needing Action. Enter the total number of requests (IRS Form 8850s) received bythe SWA prior to the beginning of the current report period, but for which no review nor eligibility determination was rendered. Note: This total is auto-populated with the value entered for Part IJtem (B) of the previous quarter ending's report on ETA Form 9058.
- (C) **Number of New Requests**. Enter the total number of new requests (IRS Form 8850s) received by the SWA during the *current* reporting quarter. **Note:** Some SWAs may receive targeted group eligibility verification requests from other SWAs for individuals who reside (and possibly receive public welfare benefits) in their state, although the employer's business is located in another state (per information provided on IRS Form 8850). These requests are referred to as "Out of State" (OOS) certification requests. SWAs should record the number of "out-of-state" certification requests **received** in Part I, Item (C2). This number should be included in the value entered for Item C) New Requests. It is Important for SWAs to report all certification requests (IRS Form 8850s) received. Therefore, any requests that were received outside of the current reporting quarter, which have not been previously recorded/ reported on a prior ETA Form 9058, should be included in the count for 'Number of New Requests' for the applicable quarter ending report for when the certification request is initially reviewed by the SWA. This total (new requests and previously uncounted requests) should 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) which are available to be processed as of the quarter ending date. **Note:** This total is auto-tabulated based on the completion formula: Item (A +B + C) = Item D. This value is to be entered under Part I, Item (D) of ETA Form 9058.
- (E) Number of Requests Certified. Enter the total number of Employer Certifications (ETA Form 9063) issued by the SWA during the current report period. Note: This value must match the value entered for Part II, Items I)11, J)24, and K)7.
- (F) Number of Requests Denied. Enter the total number of requests (IRS Form 8850s) Denied by the SWA during thecurrent report period. Provide the number of Denials for the F1 thru F3 categories defined below. Note: A Denial is a request (IRS Form 8850) determined to be ineligible for the WOTC by the SWA.
 - **F1.** Enter the total number of Denials issued due to "failure to meet IRS Form 8850 timely-submission requirement." This number should be reflected in the total value entered for Item F) Denied Requests.
 - **F2.** Enter the total number of Denials issued due to "applicant does not meet targeted group(s) eligibility requirements." This number should be reflected in the total value entered for Item F) Denied Requests.
 - **F3.** Enter the total number of Denials issued due to "ineligible rehires" (applicant previously worked for the employer seeking WOTC certification). This number should be reflected in the total value entered for Item F) Denied Requests.
- (G) Number of Requests Incomplete. Enter the total number of requests (IRS Form 8850s) received and reviewed by the SWA during the current report period, but for which the SWA could neither certify nor deny by the end of the report period, due to such things as, but not limited to: missing supporting documentation (for which the SWA has made a formal request to the employer to obtain); missing or incomplete ETA Form 9061/9062; SWA processing delays due to automated system malfunctions, etc. Note: This value will auto-populate as the value entered in Part I, Item (A) of the subsequent quarter ending report, ETA Form 9058.
- (H) Number of Requests Needing Action. Enter the number of requests (IRS Form 8850s) received by the SWA during the current report period, but for which no review and/or processing action has yet been taken to determine applicant eligibility. This total represents the SWA's existing "backlog" of pending requests and is auto-tabulated based on the following completion formula: Item H = Item D (Item E + F + G). Note: This value will auto-populate as the value entered in Part I, Item (B) of the subsequent quarter ending report, ETA Form 9058.



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Part I. Completion Formulas:

Item (A+B+C) = Item D; same as: Items (A+B+C) = Item D

Item D - (E + F + G) = Item H; same as: Items (D-E-F-G) = Item H

Part II. "Characteristics of Certified Individuals." SWAs must identify the individual characteristics (of the new hire/ applicant) for each Certification issued by the SWA during the current report period. Note: Part II is divided into three subsections: 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 targeted group. Section (J) reflects the number of requests (IRS Form 8850s) certified by the SWA during the current report period by (applicant) occupation. Section (K) reflects the number of requests (IRS Form 8850s) certified by the SWA during the current report period by (applicant) starting hourly wage.

Section (1).

Section I, Column (a). Enter the total number of Certifications issued by the SWA, by targeted 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 Certifications issued by the SWA, by targetægroup, during the current report period.

Section I, Line #1. Enter the total number of Certifications issued by the SWA during the currentreport period, for the Qualified IV-A (TANF) Recipients.

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

Section I, Line #2Bb. Enter the total number of Certifications issued by the SWA during the currentreport period, for Disabled Veterans receiving compensation for a service-connected disability.

Section I, Line #2Bc. Enter the total number of Certifications issued by the SWA during the currentreport period, for Disabled Veterans unemployed for 6 months.

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

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

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

Section I, Line #4. Enter the total number of Certifications issued by the SWA during the currentreport period for Summer Youth Employees.

Section I, Line #5. Enter the total number of Certifications issued by the SWA during the current reportperiod for Designated Community Residents (DCRs).

Section I, Line #6a. Enter the total number of Certifications issued by the SWA during the currentreport period for Vocational Rehabilitation (VR)Referrals.

Section I, Line #6b. Enter the total number of Certifications issued by the SWA during the currentreport period for "Ticket Holders" (authorized under the Social Security Administration's 'Ticket to Work' Program).

Section I, Line #7. Enter the total number of Certifications issued by the SWA during the currentreport period for SNAP (formerly knownas Food Stamps) recipients.

Section I, Line #8. Enter the total number of Certifications issued by the SWA during the current reportperiod, for SSI recipients.

Section I, Line #9. Enter the total number of Certifications issued by the SWA during the current reportperiod for Long-term Family Assistance (TANF) Recipients.

Section I, Line #10. Enter the total number of Certifications issued by the SWA during the current reportperiod, for Long-term Unemployment Recipients (LTURs).

Section I, Line #11. Enter the sums of columns (a) and (b) for the current reporting quarter as TOTAL (ForQtr.). Note: The quarterly totals for Column I. "By WOTC Targeted Group" (Line#11); Column J. "By Occupation" (Line#27); and Column K. "By Starting Hourly Wage" (Line#7), must all equal the same value. Note: For the first quarter ending report (ETA Form 9058) of the federal fiscal year (October 1 - December 31), the values for Section I, Line #11 (ForQtr) 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."

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Section I, Line #12. After Quarter 1, for all subsequent quarters, enter the cumulative fiscal Year-to-Date (YTD) totals of columns (a) and (b). Reminder: For the first quarterly report of the fiscal year (October 1- December 31), the totals of Section I, Line #11 and Line #12 should be the same value.

Section J.

Section J, Column (a). Enter the total number of WOTC Certifications issued by the SWA during the currentreport period, By Occupation. **Note:** The total for Section J, Column (a), Line #24 is the sum of the column and must equal the total for Section I, Columns (a) & (b), Line #11 TOTAL (For Qtr).

The occupational data reported in Section J, Boxes 1-23, derive from the job titles reported on ETA Forms 9061,0062. To prepare this report, SWAs must use the O*NET job families of occupations (standard occupation classifications) and their two-digit corresponding codes, as illustrated in the following table.

24. TOTAL (For Qtr). Enter the total number of certifications issued for the current reporting period (quarter).

O*NET SOC JOB FAMILIES

Occupation Name	Code
Management Occupations	11
Business & Financial Occupations	13
Computer & Mathematical Occupations	15
Architecture & Engineering	17
Life, Physical & Social Sciences	19
Community & Social Services	21
Legal Occupations	23
Education, Training, & Library	25
Arts, Design, Entertainment, Sports, and Media Occupations	27
Healthcare Practitioner & Technical	29
Healthcare Support Occupations	31
Protective Service Occupations	33
Food Preparation & Serving Related	35
Bldg. & Grounds Cleaning & Maintenance	37
Personal Care & Service	39
Sales & Related Occupations	41
Office & Administrative Support	43
Farming, Fishing, Forestry	45
Construction & Extraction	47
Installation, Maintenance & Repair	49
Production Occupations	51
Transportation & Material Moving	53
Military Specific Occupations	55

Section K.

Section K, Column (a). Enter the total number of Certifications issued by the SWA during the current report period, "By Starting Hourly Wage." **Note:** The TOTAL (For Qtr) for Section K, Column (a) Line #7, is the sum for that quarter, and must be equal to the total for Section I, Column (b), Line #11, "Number of Certified Individuals." *_Federal Minimum Wage information..

Convert annual earnings to hourly wages as follows:

Unit of Time	Calculated Hourly Wage
Day	Amount divided by 8
Week	Amount divided by 40
Month	Amount divided by 172

- 25. Name and Title of Certifying Official. Enter the name and title of the authorized signatory official.
- **26. Signature.** Enter the signature of the authorized signatory official.
- **27. Date.** Enter the date of signature.