



# Employer's Correction Report for the Quarter Ending:



Fax: 217-557-1948  
Phone: 800-247-4984

Revenue Division - 307 E. Jackson Street, 3rd Floor  
Springfield, Illinois 62701

ACCOUNT NUMBER:    Enter complete account number, name and address in the space above.	<b>SPECIAL INSTRUCTIONS</b> 1. Prepare a separate correction report for each quarter. Retain a copy for your files. 2. Give complete explanation. 3. Always complete Schedule A. 4. Be sure to complete Schedule B if you are correcting wages reported for individual workers.
--	---

### SCHEDULE A - QUARTERLY WAGE INFORMATION

	As Reported on UI-3/40	Should Be
Line 2. Total Wages Paid		
Line 3. Less: Excess Wages		
Line 4. Taxable Wages		
Line 5. Contribution Due		

### EXPLANATION

---

**NOTE:** For calendar years 2014, 2015, 2016 and 2017, the taxable wages of \$12,960 of wages paid to each worker for the calendar year. For the calendar year 2013, taxable wages are the first \$12,900 of wages paid to each worker for the calendar year.

### SCHEDULE B - INDIVIDUAL WAGE CORRECTIONS LIST ONLY THOSE WORKERS WHOSE WAGES ARE TO BE CORRECTED

Worker's Social Security Account Number	Worker's Name (Type or Print)	UI-3/40 Page #	W A G E S	
			As Reported	Should Be
TOTAL				

I certify that the information in the foregoing report is true and correct to the best of my knowledge and belief.

Date \_\_\_\_\_

Signed \_\_\_\_\_

This report MUST be signed by owner, partner, officer, or authorized agent within the employing enterprise. If signed by any other person, a Power of Attorney must be on file.

Title \_\_\_\_\_