



Corporate Officer Exemption Form Public Corporation

(Use only for public companies registered with SEC)

Public corporations may exempt from unemployment insurance coverage any number of bona fide corporate officers who:

- are voluntarily elected or voluntarily appointed under the articles of incorporation or bylaws of the corporation;
- are shareholders;
- exercise substantial control in the daily management of the corporation; and
- have primary responsibilities that do not include manual labor.

Business name: _____

Business phone: _____

ES Reference number: _____

UBI number: _____

Name of preparer/contact person: _____

Title: _____

Business phone: _____

Email: _____

Corporate officer being exempted (Use separate form for each officer):

First name: _____

Last name: _____

Social Security number: _____

Title: _____

I certify that I have read and understand the terms of exemption and that I meet the exemption criteria as an officer of a public corporation.

Signature of officer being exempted

Date

Corporate officer verifying exemption decision (Must be a different officer unless no others exist):

First name: _____

Last name: _____

Title: _____

Signature of verifying officer

Date

Date exemption to be effective ___ / ___ / ___ (Must be on Jan. 1 except for newly registered corporations; cannot be retroactive if submitted after Jan. 15.)

Fax this form to 360-902-9264 or mail to: Employment Security Department, UI Tax and Wage Administration/Status, P.O. Box 9046, Olympia, WA 98507-9046

Exemption is not valid until the exemption forms are signed by the corporate officers and received by the Employment Security Department. Forms must be sent by January 15 to be effective for that year. Forms lacking complete information cannot be processed. We will notify you after we act on the completed exemption forms.