

**INDUSTRIAL COMMISSION OF ARIZONA
SELF-INSURER'S
SPECIAL FUND QUARTERLY TAX PAYMENT FORM 101 A FOR 2010**

FROM:

Self-Insured Name

Street Address

City **State** **Zip code**

March 31, 2010 DUE April 30, 2010

June 30, 2010 DUE July 31, 2010

September 30, 2010 DUE October 31, 2010

December 31, 2010 DUE January 31, 2011

COMPUTATION OF QUARTERLY SPECIAL FUND TAXES

A. Method I

1 2009 Net Taxable Premium (Line A Form 100)	Line A1	\$	<input style="width: 95%; height: 18px;" type="text"/>
2 Multiply line 1 by 1.5% or .015 A. R. S. § 23-1065 (A)	Line A2	\$	<input style="width: 95%; height: 18px;" type="text"/>
3 Multiply Line 2 by 25.0 % or .25	Line A3	\$	<input style="width: 95%; height: 18px;" type="text"/>
4 Multiply Line 1 by 0.5% or .005 A. R. S. § 23-966 (D)	Line A4	\$	<input style="width: 95%; height: 18px;" type="text"/>
5 Multiply Line 4 by 25.0% or .25	Line A5	\$	<input style="width: 95%; height: 18px;" type="text"/>
6 Multiply Line 1 by 0.5% or .005 A. R. S. § 23-1065 (F)	Line A6	\$	<input style="width: 95%; height: 18px;" type="text"/>
7 Multiply Line 6 by 25.0% or .25	Line A7	\$	<input style="width: 95%; height: 18px;" type="text"/>
8 Amount Paid (Add lines 3, 5 & 7 together and pay this amount)	Line A8	\$	<input style="width: 95%; height: 18px;" type="text"/>

B. Method II

This method will be based on actual payroll and injuries, for the applicable quarter.
If this method is selected, please contact us and we will mail the necessary payroll and injury report forms.

Penalty and interest will be assessed for failing to pay the tax on time: The greater of twenty-five dollars or five percent of the tax due plus interest at the rate of one percent per month from the date the tax was due, which is 30 days after close of the quarter. A.R.S. § 23-961 (N)

Please return the COMPLETED FORM with your check payable to Industrial Commission of Arizona for the total payment due and mail to:

**Industrial Commission of Arizona
Attention: Tax Accountant
800 West Washington Street, Suite 301
Phoenix, Arizona 85007**

If there are any questions, please contact the Tax Accountant at 602-542-1836 or e-mail at taxes@ica.state.az.us

I certify that the foregoing is correct to the best of my knowledge and belief: (please complete all of the information)

Signature:

Name:

E-mail:

Telephone:

Title:

Fax: