



INDUSTRIAL COMMISSION OF ARIZONA
800 W WASHINGTON STREET
PHOENIX, ARIZONA 85007
(602) 542-4661
ADMINISTRATIVE AND SPECIAL FUND TAX FORM 101 FOR 2018

FROM:	<input type="text"/>	March 31, 2019	DUE	April 30, 2019
	Self-Insured Name			
	<input type="text"/>	June 30, 2019	DUE	July 31, 2019
	Street Address			
	<input type="text"/>	September 30, 2019	DUE	October 31, 2019
	City	<input type="text"/>		
		State	<input type="text"/>	
		Zip code	<input type="text"/>	
		December 31, 2019	DUE	January 31, 2020

COMPUTATION OF QUARTERLY TAXES

Any insurer which paid or is required to pay a tax of two thousand dollars or more for the preceding calendar year shall file a quarterly report, in a form prescribed by the commission, accompanied by a payment in an amount equal to the tax due at the rates prescribed.
A.R.S. § 23-961 (L)

A. METHOD I

1 2018 Net Taxable Premium (Reference Form 100)	\$	<input type="text"/>
2 Administrative Fund Assessment, A.R.S. § 23-961 (G) (Multiply line 1 by 1.75%)	\$	<input type="text"/>
3 Multiply Line 2 by 25.0% or 0.25	\$	<input type="text"/>
4 General Special Fund Assessment, A.R.S. § 23-1065 (A) (Multiply line 1 by 0.00%)	\$	<input type="text"/>
5 Multiply Line 4 by 25.0% or 0.25	\$	<input type="text"/>
6 Assessment for Apportionment, A.R.S. § 23-1065 (F) (Multiply line 1 by 0.00%)	\$	<input type="text"/>
7 Multiply Line 6 by 25.0% or 0.25	\$	<input type="text"/>
8 Amount Due (Add lines A3, A5, & A7 together and pay this amount)	\$	<input type="text"/>

B. METHOD II

This method will be based on actual payroll by Workers' Compensation Code and losses for the applicable quarter. If this method is selected, please contact us to obtain the necessary forms.

Failure to pay taxes on time will result in penalty and interest being assessed pursuant to A.R.S. § 23-961 (K), "the greater of twenty-five dollars, or five percent of the tax or amount due, plus interest at the rate of one per cent per month from the date the tax was due."

Please **electronically sign and submit** this form below and mail your check payable to Industrial Commission of Arizona for the total amount due 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 602-542-4654 or e-mail at taxes@azica.gov

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

Officer Signature: _____	Submitter Email Address:	<input type="text"/>
Name: <input type="text"/>	Primary Phone Number:	<input type="text"/>
Title: <input type="text"/>	Alternative Email Address:	<input type="text"/>
Date of Officer Signature: _____	Alternative Phone Number:	<input type="text"/>
Name & Title of Person completing form if different than above:	FAX Number:	<input type="text"/>
<input type="text"/>		
Date Form Submitted: _____		