

COMPUTATION OF FEDERAL DEPOSIT LIABILITY - 2017

CLIENT NAME _____ QUARTER ENDED _____

Month	Enter Exact Date Wages Paid		Total Gross Wages X	(1) Medicare Tax 2.9%	Gross Wages Up To \$127,200 Per Employee X	(2) Social Security Tax 12.4%	(3) Federal Tax Withheld	(1)+(2)+(3) Total	EFTPS Confirmation Number	Date Paid
	Week	Day								
_____	1	_____	_____	_____	_____	_____	_____	_____	_____	_____
	2	_____	_____	_____	_____	_____	_____	_____	_____	_____
	3	_____	_____	_____	_____	_____	_____	_____	_____	_____
	4	_____	_____	_____	_____	_____	_____	_____	_____	_____
	5	_____	_____	_____	_____	_____	_____	_____	_____	_____
TOTAL*			<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>		
_____	1	_____	_____	_____	_____	_____	_____	_____	_____	_____
	2	_____	_____	_____	_____	_____	_____	_____	_____	_____
	3	_____	_____	_____	_____	_____	_____	_____	_____	_____
	4	_____	_____	_____	_____	_____	_____	_____	_____	_____
	5	_____	_____	_____	_____	_____	_____	_____	_____	_____
TOTAL*			<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>		
_____	1	_____	_____	_____	_____	_____	_____	_____	_____	_____
	2	_____	_____	_____	_____	_____	_____	_____	_____	_____
	3	_____	_____	_____	_____	_____	_____	_____	_____	_____
	4	_____	_____	_____	_____	_____	_____	_____	_____	_____
	5	_____	_____	_____	_____	_____	_____	_____	_____	_____
TOTAL*			<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>		

*Monthly depositors complete TOTAL lines only.