

Year-End Check List

CLIENT NAME: _____ Date _____

Please fax acknowledgement to us by December 4, 2020

Fax: 970-257-1872

Email: info@autopaychecks.com

Have you informed us of the following?

- Do you want the cost of employer provided health care in Box 12 of Forms W-2 Yes No
Most health insurance codes default to printing on the Forms W-2. You can verify the codes by reviewing the *Employee W2 Preview Report*. The amount would show in Box 12 with code DD.
- Additional income checks issued but not reported with payroll
- Medical insurance or HSA paid on behalf of a 2% Shareholder of an S-Corporation
- Payroll checks issued in-house, not yet reported/recorded to Autopaychecks
- Voided checks not yet reported/recorded to Autopaychecks
- Group Term Life in excess of \$50,000 adjustments
- Other compensation adjustments to be included on Form W-2
- Taxable fringe benefits
 - a. Personal use of business vehicle
 - b. Taxable moving expenses
 - c. Awards, Prizes, Gifts
- Third-party sick pay benefits
- Educational reimbursements
- Deferred Compensation
- Employer HSA, HRA or Medical savings contributions
- Reimbursements not made under an "accountable" plan
- Tax ID Verification
- Notifications from IRS, State Dept of Revenue and State SUI on changes in deposit frequency, EFT requirements, and rate updates sent to Autopaychecks, HCM

Double Check:

- Are employees' names and addresses correct?
- Do all employees have valid and accurate Social Security numbers?
- Do names match exactly to how they are on the Social Security card
- Do all 1099 payees have valid Social Security numbers or Tax ID numbers?
- Have you verified your 2021 payroll processing schedule?
- We do not expect to receive Third-Party Sick Pay information by our last payroll in 2020. Check here to hold our 2020 W-2 processing until reported. Expected date of receipt ___/___/_____

Blackout Date: Autopaychecks HCM will be in a Blackout Period starting January 6, 2021 at 5:00 pm MST until January 31, 2021 and will not allow adjustments during this time.

Form 1099 Request: If you would like Autopaychecks HCM to print and file Forms 1099, please initial below:

_____ Yes, I would like Autopaychecks HCM to print and file Forms 1099 for tax year 2020

SIGNATURE _____

I HAVE VERIFIED THE ABOVE INFORMATION, AND HAVE UPDATED AUTOPAYCHECKS HCM, WITH CHANGES AND OR ADJUSTMENTS.