

Determination of Employment Work Status for Purposes of State of California Employment Taxes and Personal Income Tax Withholding

Purpose

This form is to be used by businesses who would like to get a determination as to whether a worker is an employee for purposes of California Unemployment Insurance, Employment Training Tax, State Disability Insurance*, and Personal Income Tax withholding.

Note

If you require any assistance in the completion of this form, contact the nearest Employment Tax Office of the Employment Development Department (EDD) or call (888) 745-3886. Upon completion, return to:

STATE OF CALIFORNIA EMPLOYMENT DEVELOPMENT DEPARTMENT FACD-Central Operations, MIC 94 P.O. Box 826880 Sacramento, CA 94280-0001

The EDD may need to contact you if additional information is required.

General Information

This form should be completed carefully, and it should be completed for one individual who is representative of the class of workers whose status is in question. If a written determination is desired for any other class of workers, complete a separate DE 1870. A written determination for any worker will apply to other workers of the same class if facts are not different from those of the worker whose status was ruled upon.

This form is designed to cover many work activities. Some of the questions may not apply to you. You must answer questions 1-39 or mark them "UNKNOWN" or "DOES NOT APPLY." Answer questions 40-79 only if applicable. If additional space is needed, please attach another sheet.

PLEASE TYPE OR PRINT ALL INFORMATION CLEARLY

* Includes Paid Family Leave (PFL).

NAME OF FIRM						
NAME OF OWN	ER					
ADDRESS OF F	TRM	(CITY)	(STATE)	(ZIP CODE)		
TELEPHONE NUMBER (INCLUDING AREA CODE)						
FIRM'S FEDERAL IDENTIFICATION NUMBER						
FIRM'S EDD EM	IPLOYER ACCOUNT N	NUMBER				
Check the type	of firm for which the v	work relationship is	in question:			
☐ Individual	☐ Partnership	☐ Corporation	Limited Lia	ability Company	y (LLC)	
Limited Liab	ility Partnership (LLP) 🗌 Oth	ner (specify):			
If the firm is a corporation, is the worker an officer of the corporation? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$						
If the firm is an LLC or LLP, is the worker a member of the LLC or partner in the LLP? Yes No						

Has this issue been the subject of a prior or current EDD audit and/or a benefit claim investigation or hearing? Yes No Unknown If "Yes," please explain and provide any applicable dates:
Has any other governmental agency ruled on the status of services performed by the worker or another perso performing the same or similar services?
Total number of workers in this class (Attach names, addresses, telephone numbers, and social security numbers. If more than 10 workers, attach the information for only 10).
This information is about services performed by the worker from to to (Date) State worker's occupation and title and give a complete description of the services provided:
What were the requirements for the worker's position (e.g., previous experience, and education):
Is the worker still performing services for the firm? Yes No If "No," explain why and how the worker was terminated:
Were the services performed under a written agreement or contract?
If the agreement was not in writing, or the terms of the written agreement were not complied with in practice, describe the actual terms and conditions of the arrangement:
Was it agreed or understood that the worker would perform the services personally? Yes No If "No," please explain:

13a.	Does the worker have helpers?	∐ Yes L] No	
	If "Yes," answer questions 13b. through the "No," go to question 14.	ugh 13g.		
b.	Were the helpers hired by:	☐ Worker	☐ The firm	Unknown
C.	Who could discharge the helpers:	Worker	☐ The firm	Unknown
d.	Who paid the helpers:	☐ Worker	☐ The firm	Unknown
e.	If the worker paid the helpers, did th	e firm reimburse	the worker?	☐ Yes ☐ No ☐ Unknown
f.	What services do the helpers perfor	m?		
g.	Are social security (FICA), state disa	ability insurance	(SDI), and income	taxes withheld from the helpers' wages?
	☐ Yes ☐ No ☐ Unknown			
	If "Yes," who reports and pays these			
14a.	Was the worker permitted to provide for the firm? Yes No		_	ne time periods services were performed
	If "Yes," answer questions 14b. thro	ugh 14f.		
	If "No" or "Unknown," go to question	15.		
b.	What percent of the worker's total w	orking time was	spent working for	others?
C.	What percent of the worker's total in	come was earne	ed from others?	
d.	Describe services the worker performance of the control of the con	med for others:		
e.	Did the firm have first call on the wo	rker's time and e	efforts?	es
f.	Who owned or rented the premises	where the servic	es were performe	d?
15.	List the kind and value of tools, equi	pment, and facil	ties furnished by th	ne firm:
16.	List the kind and value of tools, equi	pment, and facil	ties furnished by tl	ne worker?
17a.	List any expenses connected with the	e services of the	worker:	
b.	Who was responsible for paying the	expenses?		
C.	Was the worker reimbursed by the f	irm for any of the	ese expenses?	☐ Yes ☐ No
18.	Did the worker perform under:	☐ His/her bus	iness name] The firm's name
19.	Did the worker advertise or maintain ☐ Yes ☐ No ☐ Unknown	a business listir	ng in the telephone	directory, a trade journal, etc.?

20a.	Did the worker hold himself/herself out to the public as available to provide services of this nature?
	Yes No Unknown
	If "Yes," please explain:
b.	Or any other nature?
21.	Did the worker have an office or shop of his/her own?
22a. b.	Was a license or certificate required to perform the services?
C.	Who paid the worker's license or certificate fee?
23.	Did the firm engage the worker?
	☐ Other, please explain:
24.	Did the firm require the worker to perform during a scheduled time?
	If "Yes," please explain:
25a.	Was the worker given training by the firm?
b.	Who paid for the worker's training expenses?
26.	Was the worker required to follow daily, weekly, etc., routines or schedules established by the firm?
	☐ Yes ☐ No
	If "Yes," give examples:
27.	Was the worker given instructions about the way the service was to be performed?
28.	Could the firm change the methods used by the worker in performing the services or otherwise direct him/her as to how to perform the work? Yes No
	Explain your answer:

29a.	Does the worker report to the firm or its representatives?
b.	For what purpose?
C.	In what manner (in person, in writing, by telephone, time record, etc.)?
30.	Was the worker required to produce a certain amount of work regularly if services were to continue? ☐ Yes ☐ No
31.	Check the type of pay the applicant received? Salary Commission Hourly Other, please explain:
32. 33.	Was the worker guaranteed a minimum pay? Yes No Was the worker eligible for a pension, bonuses, paid vacations, sick pay, etc.? Yes No If "Yes," explain:
34. 35. 36. 37.	Did the firm carry workers' compensation insurance on the worker?
38.	Please explain why you think the worker is/was an employee of the firm or an independent contractor:
39.	How did the worker report earnings for income tax purposes? Wages Self-employment Income Unknown
	NSWER QUESTIONS 40 THROUGH 45 ONLY IF THE WORKER IS AN AGENT DRIVER OR OMMISSION DRIVER (AN AGENT-DRIVER OR COMMISSION DRIVER IS A PERSON WHO OPERATES HIS/HER OWN TRUCK OR THE TRUCK OF THE FIRM AND SERVES THE CUSTOMERS OF THE FIRM AS WELL AS SOLICITING HIS/HER OWN CUSTOMERS)
40.	State the products and/or services the driver distributes (for example: bakery products and laundry services):
41.	If the driver distributes more than one product or service, which is considered the principal or main product? Explain:
42.	Does the driver serve? ☐ Customers or routes designated by the firm ☐ His/her own customers ☐ Both
43.	Was the driver required to perform the services personally?
44.	Were the driver's services part of a continuing relationship with the firm and not in the nature of a single transaction? Yes No
45.	What investment, other than for transportation, does the driver have in the business?

ANSWER QUESTIONS 46 THROUGH 58 ONLY IF THE WORKER WAS A TRAVELING OR CITY SALESPERSON

	What type of product is sold?
	To whom are sales made?
	What typical type of business is the buyer in?
	Does the buyer resell the product or use it in its business?
	Did the worker have an exclusive territory? ☐ Yes ☐ No
	Did the firm specify when and how often to work the territory?
	What percent of total sales that the worker made for the firm were made to wholesalers, retailers, contractors, or operators of hotels, restaurants, or other similar establishments?
	What was the percent of working time that the worker spent in selling to organizations other than those specified
	in #52, such as manufacturers, schools, churches, and homeowners?
	What was the approximate number of hours worked per day for the firm?
	Was the worker required to perform the services personally? ☐ Yes ☐ No
	Was the worker required to forward the orders to the firm?
	Were the worker's services part of a continuing relationship with the firm?
	What investment, other than transportation, does the worker have in the business? ANSWER QUESTIONS 59 THROUGH 67 ONLY IF THE INDIVIDUAL WORKED AT HOME
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ANSWER QUESTIONS 68 THROUGH 72 ONLY IF THE INDIVIDUAL IS A REAL ESTATE SALESPERSON OR BROKER

68.	Does the firm provide advances against unearned commissions, expense accounts, or reimbursements of expenses incurred by the worker? Yes No Please explain:
	- Trease explain.
	-
69.	Does the firm approve the sales before they are placed in escrow?
70.	Does the worker have any other duties with the firm besides selling real estate? Yes No If "Yes," please explain the nature of such duties and the method of payment:
71.	Does the firm allow the worker to have exclusive listings?
72.	Does the worker have a valid license to sell real properties? ☐ Yes ☐ No
	ANSWER QUESTIONS 73 THROUGH 79 ONLY IF THE FIRM IS A TEMPORARY SERVICES EMPLOYER OR LEASING EMPLOYER
73.	Does the firm negotiate with clients or customers for such matters as time, place, type of work, working conditions, quality, and price of the services?
74.	Does the firm determine the assignments or reassignments of the workers, even though workers retain the right to refuse specific assignments? Yes No
75.	Does the firm retain the authority to assign or reassign a worker to other clients or customers when a worker is determined unacceptable by a specific client or customer? Yes No
76.	Does the firm assign or reassign the worker to perform services for a client or customer? Yes No
77.	Does the firm set the rate of pay of the worker, whether or not through negotiation? Yes No
78.	Does the firm pay the worker from its own account(s)?
79.	Does the firm retain the right to hire and terminate workers? Yes No
my kr	are that all copies of contracts and all statements submitted are true, correct, and complete to the best of nowledge and belief. If any misrepresentation has been made or facts have been omitted, I understand the determination will not be valid and will not be binding upon the Department.
	(NAME PRINTED) (SIGNATURE)
	(TITLE) (DATE)
	(PHONE NUMBER)