

### Employer Burden and Employment-Related Costs Template Form

*“Employer burden” is the required cost associated with hiring employees. These costs are included in the Self-Determination Program (SDP) participant’s spending plan and calculated as a percentage of wages paid to the SDP participant’s employees or actual cost of the employer burden item.*

Financial Management Service (FMS) Name:

Date of Submission:

FMS Vendor Number:

*Below values to be entered as percentages.*

FMS Model	Taxes					Other	
	FICA (Social Security)	FICA (Medicare)	FUTA (Federal Unemployment)	SUTA (State Unemployment)	ETT (Employment Training Tax)	Workers' Compensation Insurance*	Paid Sick Leave**
Sole Employer							
Co-Employer							

*\* For FMS providers offering a workers' compensation insurance option under sole employer, include percentage here. Otherwise, note "TBD" to indicate it is "To Be Determined" with the SDP participant.*

*\*\* Paid Sick Leave may vary based on local laws.*

Date of Regional Center Review:

Effective Date: