Iowa Department of Revenue
www.iowa.gov/tax

2014 Annual Verified Summary of Payments Report (VSP)

File this report electronically!

Good for the environment. Good for you.

Online at www.iowa.gov/tax or by telephone at 1-800-514-8296

Instructions

Original or Amended VSP: Check if you are submitting an original or amended report. If amending, please include an explanation of changes.

Employer ID Number: Enter the correct number. If a Temporary State Identification Number was assigned to you and since then you received a Federal Employer Identification Number (FEIN) from the Internal Revenue Service, enter your FEIN and contact Taxpayer Services at the email address or phone number below.

Name and Address: Enter your name and complete address.

Line 1. Enter the combined total of Iowa withholding on W-2s, 1099s, and K-1s.

Line 2. Enter the total for New Jobs Credit, Supplemental New Jobs Credit, Accelerated Career Education Credit, and Targeted Jobs Credit.

Line 3. Enter the amount of tax withheld and remitted for calendar year 2014. Do not include any penalty or interest.

Line 4. Total Amount Withheld: Add the amounts on lines 2 and 3. If lines 1 and 4 are not equal, include an explanation of the difference. To adjust for an underpayment or overpayment, you must file an Amended Withholding Quarterly Return. Access eFile & Pay at www.iowa.gov/tax

Do not mail any payment with the VSP.

Signature: The withholding agent who performs, delegates, or controls the payment of wages must sign and date the form.

Mailing Address:

Verified Summary of Payment Report
Iowa Department of Revenue
P.O. Box 10411
Des Moines, IA 50306-0411

Employers should not send copies of W-2s or 1099s with the VSP. Iowa receives this information from the Internal Revenue Service.

Employers are required to keep copies of the W-2s and 1099s for at least four years from the end of the year for which the forms apply.

Questions?

Contact Taxpayer Services

- idr@iowa.gov
- 515-281-3114 or 800-367-3388 (Iowa, Omaha, Rock Island, Moline) 8 a.m. – 4:15 p.m. CT

Iowa Withholding Annual VSP Report 2014

Original VSP ☐
Amended VSP ☐

▲Employer ID No. ▲Calendar Year 2014 Due Date 03/02/2015

Name and Address:

1. Total Iowa withholding on W-2s/1099s/K-1s		▲ 00
2. Credits		00
3. Withholding payments made for filing year above		00
4. Total of lines 2 and 3 (Should equal line 1)		00

Do not send a payment, 1099s, or W-2s with this form.

I declare that this report is correct and complete.
Signature of Withholding Agent: _____ Date: _____
Daytime Telephone Number: _____