State of California Government Compensation in California Program

2015 Reporting Instructions



BETTY T. YEE

California State Controller's Office

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Introduction - Report Preparation Information

The State Controller's Office (SCO) is pleased to present the Government Compensation in California (GCC) reporting instructions for calendar year 2015. The reporting instructions provide guidance on completing and submitting the GCC report to the SCO.

Intent of the Report

The intent of the GCC report is to capture the salary, compensation, and benefit information for every compensated employee and board members (compensated or uncompensated) who received a W-2 for calendar year 2015.

- Report compensation information for:
 - Governing officers paid or unpaid
 - Full-time employees
 - Part-time employees
 - Temporary employees
 - Seasonal employees
- If you did not employ any paid employees who received W-2's for the calendar year, submit a GCC report that contains the Department and Classification of the governing officers.
- Do not report information on positions filled by independent contractors.
 - For clarification of employee vs. contractor, refer to Internal Revenue Service Publication
 15-A Employer's Supplemental Tax Guide at:

https://www.irs.gov/pub/irs-prior/p15a--2015.pdf

• Do not include any pay reported on IRS Form 1099.

II. General Reporting Requirements

1. Report - Due Date

The reporting due date is provided on the GCC alert letter regarding the 2015 Government Compensation in California Report.

2. Report - Format Requirements

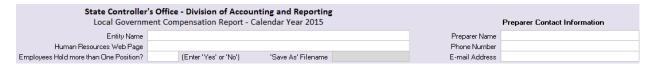
Click on the appropriate URL list below to download the GCC report template from the State Controller's Office website. This is the only report format that can be used.

- Cities, Counties, Special Districts: http://www.sco.ca.gov/ard_locinstr_lgcomp_forms.html
- K-12, UC, Community College: http://sco.ca.gov/ard_locinstr_govcomp_edu.html
- Fairs & Expositions, First 5, Superior Courts: http://sco.ca.gov/ard_locinstr_govcomp.html

III. Detailed Reporting Requirements

Section A. Report Identification and Contact Information

This is the header portion of the GCC report.



Step A1: Entity Name

For "Entity Name" field, select your entity name from the drop-down list. Ensure that you have selected the correct entity, as there are entity names that are very similar to one another.

Step A2: Save As Filename

Save the GCC report file to your computer. The filename should be the reporting year and your 11 digit unique identification number 2015-xxxxxxxxxxx. Your unique identification number is located on your reporting template embedded in the 'Save As' Filename box in **red font**.

For example, the filename for entity ABC will be **2015-12345678910.xlsx** and the unique identification number is "12345678910," the last 11 digits, as shown below:

	State Controller's Office - Division of Accounting and Reporting Local Government Compensation Report - Calendar Year 2015											
Entity Name												
Human Resources Web Page												
Employees Hold more than One Position?	(Enter 'Yes' or 'No') 'Save As' Filename											

Step A3: Human Resources Web Page

Enter the Uniform Resource Locator (URL) for your entity's human resources (HR) web page in to the "Human Resources Web Page" field.

If your agency does not have a Human Resources web page, you can enter "None" or leave the field blank.

Step A4: Employees Hold More Than One Position?

- Select "Yes" or "No" from the drop-down list.
 - Yes indicates that your agency had employees who held more than one position concurrently during the course of the calendar year.
 - No indicates that your agency did not have any employees who held more than one position concurrently during the course of the calendar year.
- Refer to Section B, Step B3 for details on the Multiple Positions Footnote column.

Step A5: Preparer Contact Information

- In the "Preparer Name" field, enter the name of the individual who prepared this report and will be able to answer questions regarding the data reported.
- In the "Phone Number" field, enter the phone number including the area code of the report preparer.
- In the "Email Address" field, enter the e-mail address of the report preparer.

	Preparer Contact Information
Preparer Name	John Doe
Phone Number	(123) 456-7890
E-mail Address	john.doe@entityABC.org

Section B. Salary and Compensation Data for Each Employee

This is the compensation detail portion of the GCC report.

- Each row represents an employee who received a W-2 for the calendar year, or
- Additional positions that were held <u>concurrently</u> during the calendar year. (Refer to Section B, Step B4 for details on the **Multiple Positions Footnote** column)
- The GCC report contains protected cells. Do not reformat the cells of the spreadsheet. This may cause your report to be rejected.
- Do not cut and paste salary and compensation information into the spreadsheet without ensuring that the data elements are consistent with the cell formats as shown below. The number of columns on the spreadsheet you are copying data from must match the number of columns on the GCC reporting template.

												Employer Contribution:		
Total Wages Subject to Medicare (Box 5 of W-2):									Applicable Defined	Defined Benefit Plan:	Defined	Deferred Compensation/		
Elected			Multiple	Annual	Annual					Benefit	Employees'	Benefit Plan:	Defined	Health,
Official			Positions	Salary	Salary	Total	Overtime	Lump Sum		Pension	Share Paid by	Employer's	Contribution	Dental,
Enter 'Y'	Department	Classification	Footnote	Minimum	Maximum	Regular Pay	Pay	Pay	Other Pay	Formula	Employer	Share	Plan	Vision
Alphanumeric	Alphanumeric	Alphanumeric	Numeric	Whole	Whole	Whole	Whole	Whole	Whole	Alphanumeric	Whole	Whole	Whole	Whole
1	100	100	5	Dollars Only	Dollars Only	50	Dollars Only	Dollars Only	Dollars Only	Dollars Only				
Character	Characters	Characters	Characters	Maximum =	Maximum =	Maximum =	Maximum =	Maximum =	Maximum =	Characters	Maximum =	Maximum =	Maximum =	Maximum =
Maximum	Maximum	Maximum	Maximum	99,999,999	99,999,999	99,999,999	99,999,999	99,999,999	99,999,999	Maximum	99,999,999	99,999,999	99,999,999	99,999,999

Step B1: Elected Officials

An elected official is publicly elected by the voters or appointed to a fixed term of office by either
the city council or board of supervisors. The individual must be elected by the voters or appointed
to a fixed term for the board they are serving on. For example, if a board member for a special
district is an elected official for their respective city, but was not elected by the voters for the
special district, they are considered an elected official on the city GCC report, but not on the
special district GCC report.

- In the Elected Official column, enter a "Y" if the row represents a position filled as a result of an election or interim appointment in place of an elected official. Note: (you do not need to enter an "N" for the non-elected officials).
- Elected officials *may* include, but are not limited to:

o Clerks Assessors

O Assessors
O Auditor-Controllers
O Board Members
O City Attorneys
O District Attorneys
O Assessors
O Controllers
O County Supervisors
O District Attorneys
O Treasurer-Tax
Collectors

Mayors

o Public Defenders

Step B2: Department

In the **Department** column, enter the department name if applicable.

- Use alphanumeric characters (100 characters maximum).
- Use proper case. (i.e. Administration, Finance, Public Works, etc.)
- Do not use abbreviations.

Step B3: Classification

In the **Classification** column, enter the job title or position name.

- Use alphanumeric characters (100 characters maximum).
- Use proper case. (i.e. Accountant, Clerk, Director, etc.)
- Use standard job title or position name for individuals who received a W-2 for calendar year 2015:
 - Governing officers paid or unpaid 0
 - Full-time employees
 - Part-time employees 0
 - Temporary employees
 - Seasonal employees
 - Volunteer employees
- For stepped classifications use roman numerals. (i.e. Accountant I, Clerk IV, etc.)
- Do not include employee names, employee numbers, or position numbers.

Step B4: Multiple Positions Footnote

In the **Multiple Positions Footnote** column, enter a unique number to identify employees who held multiple positions concurrently during the calendar year.

- Use a numeric character (5 characters maximum).
- Enter a unique number for each employee who held multiple positions concurrently.
- The employee's total wage information and employer contribution information for all concurrently held positions are reported on one primary row using the most recently held position or the position with the highest maximum annual salary.
- Use subsequent rows for information related to other concurrently held positions. Enter the
 Department, Classification, Annual Salary Minimum/Maximum (in Steps B5 and B6), and Pension
 Formula (in Step B11) on the subsequent rows. Enter zeros for wage information and employer
 contribution information.
- The example in Figure 2 on Page 8 shows an employee who held two positions <u>concurrently</u> during the calendar year: one position was as an Accountant I, the other position was a Clerk II. "246" is an example of a unique number that identifies the multiple positions held by this employee.
- The **Multiple Positions Footnote** column should be left blank if the employee has only one position during the calendar year. The example in Figure 1 on Page 8 shows an employee with one position.
- The **Multiple Positions Footnote** column should be left blank if an employee transferred, promoted, or worked in multiple positions that did not have overlapping dates of service. For example, if an employee was an Accountant I for the first six months out of the year, then transferred/promoted to an Accountant II for the remaining six months out of the year, do not record the two positions as a multiple position. You will use the position the employee was in most recently in the reporting calendar year.

Figure 1

Scenario 1: Employee appointed one position as of the end of the calendar year

					Total Wag	es Subject to	Medicare (Bo	x 5 of W-2)	Applicable		Employer Contribution		
Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Defined Benefit Pension	Defined Benefit Plan: Employees' Share Paid by Employer	Defined Benefit Plan: Employer's Share	Deferred Comp/ Defined Contribution Plan	Health, Dental, Vision
Administration	Accountant I		24,000	36,000	31,250	1500	0	0	2% @ 55	0	2500	0	2000

Employee works in Administration

- Appointed as an Accountant I
- Worked 1/1/2012 to 12/31/2012
- Annual Total Wages Subject to Medicare (Box 5 of W-2) is \$32,750
 - \$31,250 in total regular pay
 - \$1,500 in overtime pay

Figure 2

Scenario 2: Employee appointed two positions at any time during the calendar year

				Salary	Annual Salary Maximum	Total Wag	es Subject to I	Medicare (Bo	x 5 of W-2)	Applicable		Employer Contribution			
	Department	Classification	Multiple Positions Footnote			Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Defined Benefit Pension Formula	Defined Benefit Plan: Employees' Share Paid by Employer	Defined Benefit Plan: Employer's Share	Deferred Comp/ Defined Contribution Plan	Health, Dental, Vision	
Primary Row	Finance	Accountant I	246	24,000	36,000	31,250	2250	0	3000	2% @ 55	0	2500	0	2000	
Secondary Row	Administration	Clerk II	246	18,000	24,000	0	0	0	0	Too Many Formulas To List	0	0	0	0	

Enter Total Wages Subject to Medicare and Employer Contribution information for all concurrently held positions on one primary row using the most recently appointed position or the position with the highest maximum annual salary.

Use subsequent rows for information related to other concurrently held positions. Enter only position-related information on this row (Department, Classification, Annual Salary Minimum/Maximum, Pension Formula). Enter zeros for wage information and employer contribution information.

Employee's An	Employee's Annual Total Wages Subject to Medicare (Box 5 of W-2) is \$36,500												
 Appointed Worked 1, \$20,250 in \$2,250 in c 	/1/2012 to regular pay	12/31/201			\$2	Calculations: 0,250 Accou 1,000 Clerk I							
Also appoi Administra Worked 1, \$11,000 in \$3,000 in in	tion /1/2012 to	5/31/2012			\$ + \$	1,250 Total I 2,250 overtii 3,000 incent 6,500 Total V	me pay ive pay						

Step B5: Annual Salary Minimum

In the **Annual Salary Minimum** column, enter the minimum annual base salary for the employee's position.

- Use whole dollars only.
- To calculate the annual minimum salary from hourly wages, convert hourly pay to equivalent fulltime pay, including part-time employees (i.e. take the minimum base hourly wage and multiply by full-time hours).
- Do not include additional compensation (i.e. overtime pay, incentive pay, etc.).
- Enter zero if there is no salary minimum associated with the employee's position.

Step B6: Annual Salary Maximum

In the **Annual Salary Maximum** column, enter the maximum annual base salary for the employee's position.

- Use whole dollars only.
- To calculate the annual maximum salary from hourly wages, convert hourly pay to equivalent fulltime pay, including part-time employees (i.e. take the maximum base hourly wage and multiply by full-time hours).
- Do not include additional compensation (i.e. overtime pay, incentive pay, etc.).
- If there is no maximum salary for the position, enter zero in both the minimum and maximum salary columns.

Total Wages Subject to Medicare (Box 5 of W-2)

- Total Wages Subject to Medicare (Box 5 of W-2) excludes wages that are not subject to medicare taxes. It will be reported in steps B7 through B10 in four fields. Deductions subtracted from gross pay to calculate Total Wages Subject to Medicare (Box 5 of W-2) are not captured by the GCC report.
- For instructions regarding cafeteria allowances, see Step B15 on Page 13.
- If an employee held a position that did not have wages subject to medicare taxes, use the amount reported in Box 1 of that employee's W-2 and add back any deferrals and deductions that would have been medicare taxable.
 - For information on positions that are not subject to medicare taxes, refer to Internal Revenue Service Publication 15-A Employer's Supplemental Tax Guide at:

https://www.irs.gov/pub/irs-prior/p15a--2015.pdf

 For information on wages not subject to medicare taxes, refer to Internal Revenue Service Publication 15-B Employer's Tax Guide to Fringe Benefits at:

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https://www.irs.gov/pub/irs-prior/p15b--2015.pdf

Step B7: Total Wages Subject to Medicare (Box 5 of W-2): Total Regular Pay

In the Total Regular Pay column, enter the dollar amount paid to an employee for regular or base pay.

- Use whole dollars only.
- Enter zero if the employee did not earn regular pay.

Step B8: Total Wages Subject to Medicare (Box 5 of W-2): Overtime Pay

In the Overtime Pay column, enter the dollar amount paid to an employee for overtime.

- Use whole dollars only.
- Enter zero if the employee did not earn overtime pay.

Step B9: Total Wages Subject to Medicare (Box 5 of W-2): Lump Sum Pay

In the Lump Sum Pay column, enter the dollar amount paid to an employee for lump sum pay.

- Use whole dollars only.
- Enter zero if the employee was not given lump sum pay.
- Lump sum pay includes one-time cash outs such as paid excess vacation/sick leave.

Step B10: Total Wages Subject to Medicare (Box 5 of W-2): Other Pay

In the **Other Pay** column, enter the dollar amount paid to an employee for any other pay not reported as regular pay, overtime pay, or lump sum pay. Other pay includes but is not limited to the following: car allowances, meeting stipends, incentive pay, bonus pay, retention pay, hazard pay, bilingual pay.

- Use whole dollars only.
- Enter zero if the employee was not given other pay.

Step B11: Applicable Defined Benefit Pension Formula

In the **Applicable Defined Benefit Pension Formula** column, enter the defined benefit pension formula for employees under a defined benefit plan.

- Use alphanumeric characters (50 characters maximum).
- If providing a formula entry, include a percentage representation and an age. (i.e. 2% @ 55)
- For defined benefit formulas that contain more than 50 characters, enter "Too Many Formulas to List" in the column.
- Enter "N/A" if the position does not have a defined benefit pension formula.

Employer Contributions: Pension Systems

There are two types of pension systems:

- Defined benefit system benefits are predetermined by a formula, based in part on an employee's age at retirement, final average salary and length of service. The employer's contributions are determined on the basis of benefits to be paid.
- Defined contribution system the rate of contribution by the employer, and sometimes by the
 employee, is fixed. Therefore, the employee's pension benefit will be whatever amount the
 accumulated contributions plus investment earnings will provide at retirement.

The diagram in Figure 3 on Page 13 shows the two types of pension systems and illustrates which employer contribution amounts are to be reported in Steps B12 through B14 for each plan.

An employee's pension plan may be funded by separate monetary contributions from two sources - the employer and the employee. Occasionally, the employer will make a monetary contribution to the employee's share.

The GCC report captures <u>only the amounts paid by the employer</u> and does not include employee contributions.

Step B12: Employer Contribution: Defined Benefit Plan – Employees' Share Paid by Employer

In the **Defined Benefit Plan – Employees' Share Paid by Employer** column, enter the contribution (dollar amount) <u>paid by the employer</u>, on behalf of the employee, towards the employee's share of <u>pension benefits</u>.

- Use whole dollars only.
- Enter zero if there is no employer contribution.
- For example: Employee's share is 7% and employer paid 2% of that 7%. Enter the dollar amount (the dollar value of the 2%) for the employer's share of the contribution.
- Include amounts the employer paid on behalf of the employee; do not include any amounts that the employee paid.

Step B13: Employer Contribution: Defined Benefit Plan – Employer's Share

In the **Defined Benefit Plan – Employer's Share** column, enter the required employer contribution (dollar amount) paid by the employer towards the employee's defined benefit plan. This corresponds to the dollar amount of the Applicable Defined Benefit Pension Formula column that is paid by the employer to the retirement system.

- Use whole dollars only.
- Enter zero if there is no employer contribution.

Step B14: Employer Contribution: Deferred Compensation/Defined Contribution Plan

In the **Defined Contribution/Deferred Compensation Plan** column, enter the employer contribution (dollar amount) paid by the employer towards the employee's defined contribution/deferred compensation plan.

This includes defined contribution/deferred compensation plans such as 401(a), (b), (k), 403(b), and 457 plans.

- Use whole dollars only.
- Enter zero if there is no employer contribution.
- Deferred compensation: Employer may contribute a matching amount of money based on the employee's contribution to an investment fund.

For example: Employee annually contributes \$2,000 to a 401(k) and the employer matches that contribution in the same amount. Enter \$2,000 in the column for the employer's share of the contribution.

 Defined contribution: Employer contributes a percentage of the employee's salary into an investment fund, regardless of whether employee contributes. Convert that percentage to an annual dollar amount and enter.

For example: Employer pays 7% of employee's \$50,000 annual salary. Enter \$3,500 (7% x \$50,000) in the column for the employer's share of the contribution.

Figure 3

Current GCC Report Fields – as of May 25, 2012

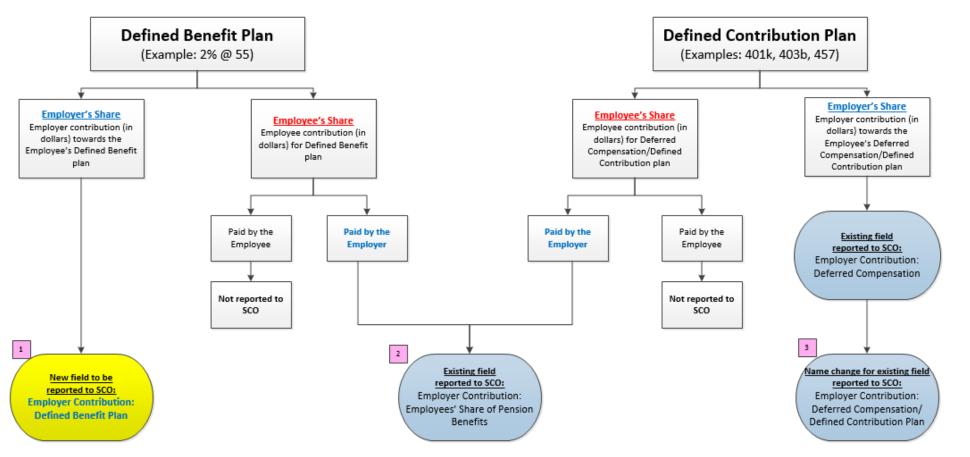
					Total Wag	es Subject to	Medicare (Box 5 of W-2)			Employer Contribution			
Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Regular Pay	Overtime Pay	Lump Sum Pay	Other Pay	Applicable Defined Benefit Pension Formula	Defined Benefit Plan: Employees' Share Paid by Employer	Defined Benefit Plan: Employer's Share	Deferred Comp/ Defined Contribution Plan	Health, Dental, Vision

Previous GCC Report Fields

							Em	nployer Contribution	ı
Department	Classification	Multiple Positions Footnote	Annual Salary Minimum	Annual Salary Maximum	Total Wages Subject to Medicare (Box 5 of W-2)	Applicable Defined Benefit Pension Formula	Employees' Share of Pension Benefits	Deferred Compensation	Health, Dental, Vision



Pension Systems



Step B15: Employer Contribution: Health, Dental, Vision

In the **Health, Dental, Vision** column, enter the contribution (dollar amount) paid by the employer towards the employee's Health, Dental, and/or Vision care plan.

- Use whole dollars only.
- If the employer provides a cafeteria allowance, enter the total amount the employer paid for the Health, Dental, and/or Vision care plan. Please include any unused allowance received by the employee in the **Other Pay** column.

For example: Employee receives a \$1,000 cafeteria allowance. Employer pays \$800 of the allowance and includes it in the employee's Health, Dental, and Vision column. \$200 of the allowance is unused but the employee receives this amount as pay. Include the \$200 in the Other Pay column (see Step B10 on Page 10).

• Enter zero if there is no employer contribution.

This is an example of a completed GCC report:

	State Controlle Local Governr				•						Preparer Conta	act Information		
	Entity Name	City of A	BC						Preparer Name	John Doe				
	Human Resources Web Page	http://w	ww.cityofAE	3C.org/hr						Phone Number (123) 456-7890				
Er	mployees Hold more than One Position?	Yes (Enter 'Yes' or 'No') 'Save As' Filename 2015-12345678910.xlsx								E-mail Address	john.doe@cit	tyofABC.org		
Please	Please identify the employees holding more t				han one position by using the 'Multiple Positions Footnote' column. Total Wages Subject to Medicare (Box 5 of W-2):							ontribution: Deletieu (
		Multiple	Annual	Annual					Benefit	Employees'	Defined	Defined	Health,	
		Positions	Salary	Salary	Total	Overtime	Lump Sum		Pension	Share Paid by	Benefit Plan:	Contribution	Dental,	
Line # Department	Classification	Footnote	Minimum	Maximum	Regular Pay	Pay	Pay	Other Pay	Formula	Employer	Employer's	Plan	Vision	
Governing Body Governing Body	Council Member Council Member		0	0	0	0	0	0		0	0	0	0	
Governing Body Governing Body	Council Member		0	0	0	0	0	0		0	0	0	0	
Governing Body Governing Body	Council Member		0	0	0	0	0	0		0	0	0	0	
5. Governing Body	Council Member		0	0	0	0	0	0		0	0	0	0	
6. Administration	City Manager		200,000	300,000	300,000	0	0	5.000	2% @ 55	5,000	10,000	0	0	
7. Administration	Accountant I	246	24,000	36,000	31,250	2,250	0	3,000	2% @ 55	0	2,500	0	2,000	
8. Payroll	Clerk II	246	18,000	24,000	0	0	0	0	2% @ 55	0	0	0	0	
9. Planning	Senior Planner		50,000	80,000	60,000	0	0	2,000	2% @ 55	1,500	3,500	0	0	
10. Engineering	City Engineer		100,000	200,000	150,000	0	15,000	0	2% @ 55	2,000	7,000	0	0	
11. Community Services	Director		50,000	150,000	80,000	0	0	0	Too Many Formulas	3,000	5,000	0	0	
12.									to List					
13.														

Government	Compensation in Ca	lifornia Program	- Reporting	Instructions
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These reporting instructions are located on the State Controller's Office website at: http://www.sco.ca.gov/Files-ARD-Local/LocRep/2015_Reporting_Instructions.pdf

State Controller's Office
Division of Accounting and Reporting
Government Compensation Unit
Post Office Box 942850
Sacramento, California 94250-5875
(916) 445-5153 - GCCSupport@sco.ca.gov