

ETA 204 EXPERIENCE RATING

STATE: OR	REGION: 06	REPORT FOR PERIOD ENDING: 12/31/2016			
RATE YEAR ENDING	COMPUTATION DATE	RATING SYSTEM			
12/31/2016	06/30/2015	BR			
SECTION A. All SUBJECT ACCOUNTS: NUMBER & AMOUNTS OF TOTAL & TAXABLE PAYROLL					
Number As Of		Payroll 12 Months Ending			
06/30/2015		06/30/2015			
		Line No.	Accounts (1)	Total (2)	Taxable (3)
1.	Taxable Accounts, Total	101	119,704	57,988,875,106	37,170,073,491
	a. Eligible	102	100,077	57,542,056,996	36,791,376,312
	b. Ineligible	103	19,627	446,818,110	378,697,179
2.	Reimbursable Accounts	104	2,343	5,892,934,071	
AMOUNT OF ACCOUNT BALANCES (RESERVE RATIO STATES ONLY)					
3.	Subject Accounts (Positive Or Zero Balance)	201			
	a. Eligible	202			
	b. Ineligible	203			
4.	Subject Accounts (Negative Balance)	204			
	a. Eligible	205			
	b. Ineligible	206			
SECTION B. SUMMARY OF BENEFITS PAID, CHARGED, AND NONCHARGED					
		Line No.	Amount		
5.	Total Benefits (Or Benefit Wages) Paid During 12 Months Ending: 06/30/2015	301	522,579,036.76		
6.	Taxable Employer Accounts	302	479,861,072.47		
	a. Charged	303	413,668,037.21		
	1. Active	304	391,419,619.33		
	2. Inactive	305	22,248,417.88		
	b. Noncharged	306	66,193,035.26		

7.	Reimbursable Employer Accounts	307	42,717,964.29
	a. Charged	308	42,710,804.97
	b. Noncharged	309	7,159.32
ESTIMATED CALENDAR YEAR (CY) AVERAGE TAX RATES			
8.	Average Tax Rate on Taxable Wages	401	2.52
9.	Average Tax Rate on Total Wages	402	1.49

OMB No.: 1205-0164 **OMB Expiration Date:** 08/31/2018 **OMB Burden Minutes:** 15

OMB Burden Statement: O M B Burden Statement: These reporting instructions have been approved under the Paperwork reduction Act of 1995. Persons are not required to respond to this collection of information unless it displays a valid OMB control number. Public reporting burden for this collection of information includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Submission is required to obtain or retain benefits under SSA 303(a)(6). Respondents have no expectation of confidentiality. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of Workforce Security, Room S-4524, 200 Constitution Ave., NW, Washington, DC, 20210.