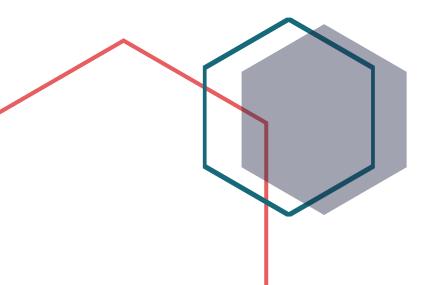
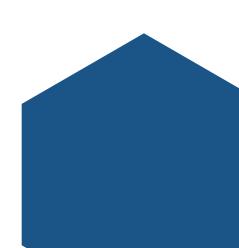




Earnings Verification E-Response Users Guide





What is SIDES?

SIDES stands for the State Information Data Exchange System. It's a software tool that empowers states, employers, Third Party Administrators (TPAs) and Professional Employer Organizations (PEOs) to quickly, accurately, and securely respond to unemployment insurance requests.

How it Works

SIDES E-Response is a free website where employers and their representatives submit UI responses directly to state unemployment agencies.

When you receive a request, use the provided PIN to access and complete responses. Once completed, a confirmation number and downloadable PDF will immediately be available for your records.

Benefits

- Lost responses are a thing of the past. With direct online communication, feel confident knowing information was transmitted correctly and securely.
- Nationally consistent format for any size business. Eliminate submission errors with SIDES' consistent and intuitive format.
- Handles details so employers can focus on business. The innovative digital process reduces personnel time and effort.
- Enhances the integrity of the UI system. SIDES reduces UI tax rates and waste in the system.

How to Register

Contact your State Workforce Agency.

SIDES E-Response

SIDES E-Response is an online tool for employers to quickly, accurately, and securely respond to state unemployment insurance requests. Built specifically for ease of use, employers can log into the website and submit responses easily anytime, anywhere.

Requirements

SIDES E-Response only requires an internet connection. There is no cost to use SIDES E-Response.



Earnings Verification Exchange

The Earnings Verification Exchange automates audits sent to employers/TPAs. Responses are returned electronically from employers in Sunday – Saturday format to state UI agencies regardless of the pay period. Earnings Verification also electronically notifies employers/TPAs of outstanding audits, reducing response times, stopping improper payments early, and combating benefit year earnings improper payments.

Preparing to Respond to an Earnings Verification Request

Gather detailed, pertinent information about the claimant's separation and payments made after the separation.

- Employer contact information
- Dates of employment
- Details of separation
- Payroll information
- Supporting documentation

Supported Browsers

IE 11 and above Chrome V44 and higher Firefox V37 and higher

Access the SIDES Earnings Verification Exchange

Log into <u>uisides.org</u> using the credentials provided by the state workforce agency. Some states provide a direct link in their employer portal.

SIDES E-Response		
State:	Select One	
Exchange:	*	
Federal Employer Identification Number:		
State Employer Identification Number:		
Pin/Access Code:		
Lo	g In	
	ssistance d Browsers	



Select a Claim

The list of requests for information will be displayed. This list can be sorted by any column by selecting the up or down arrow next to the column header.

Select the claim you want.

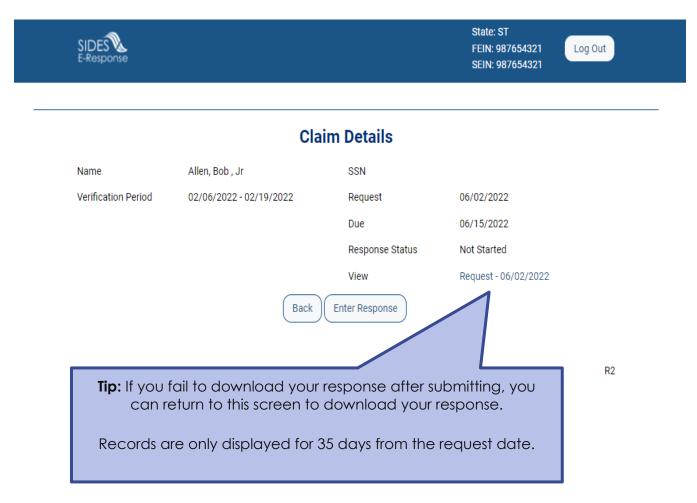
SIDES E-Response			State: ST FEIN: 987654321 Log Out SEIN: 987654321	
	Earnings Ver	ification Reques	sts	
Hide submitted records				_
SSN 💠	Name 💠	Due Date 🔺	Response Status 👙	
	Allen, Bob	05/30/2022	Submitted	
	Johnson, Alice	05/30/2022	Submitted	
	Smith, John	05/30/2022	In Progress	
	Allen, Bob , Jr	06/15/2022	Not Started	
			ł	21

INTEGRITY TIP: Respond timely to every request for earnings information!



Review Claim Details

This screen provides information related to the claim.



Verify Employer Information Make any necessary corrections to the employer information.

SIDES E-Response			F	State: ST EIN: 987654321 SEIN: 987654321	Log Out Requests
					Help
Name: Allen, Bob , Jr	s	SN:		Due Date: 06/15/20:	22
Employer	t Work/Earnings Salary/P	ay Period Earr	nings Addition	al Information	reparer
	E	mployer			
				Corrected	
Employer Name X	YZ Holdings				
FEIN 98	37654321				
SEIN 98	37654321				
Check if applicable.					
TPA/Employer Repres	entative receiving this request that	DOES NOT represe	ent this employer		
	Save	Close	d		
					3
	Tip: No		or response ottom of the		uttons on the
		Close will se	end you ba	ck to the clo	aim list.

Verify Claimant Information

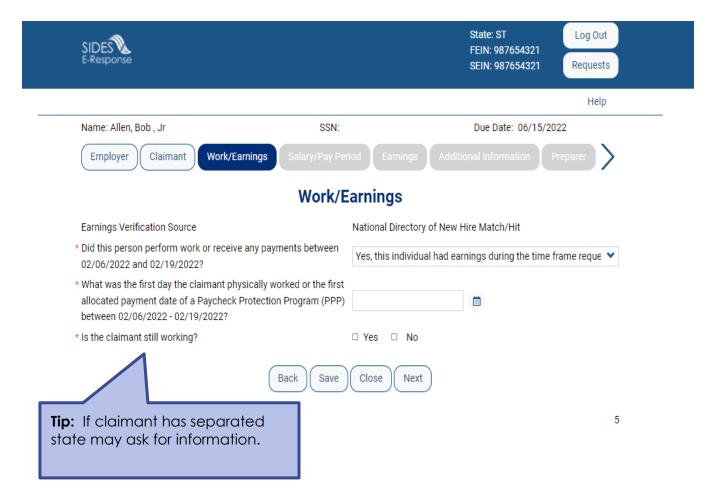
Make any necessary corrections to the claimant information.

SIDES E-Response	Tip: Need to return to a screa Any white tab is a click awa	State'SI Log Out	
		Help	
Name: Allen, Bob ,	Jr SSN:	Due Date: 06/15/2022	
Employer	Claimant Work/Earnings Salary/Pay Period E	arnings Additional Information Preparer	
	Claimant		
		Corrected	
Claimant Name:	Allen, Bob , Jr		
Check if applicable	e.		
Claimant did NO	OT work for this employer		
	Back Save Close	Next	
		4	



Work and Earnings

Indicate whether the claimant worked during the period indicated.



Salary/Pay Period Enter the claimant's salary and pay period information.

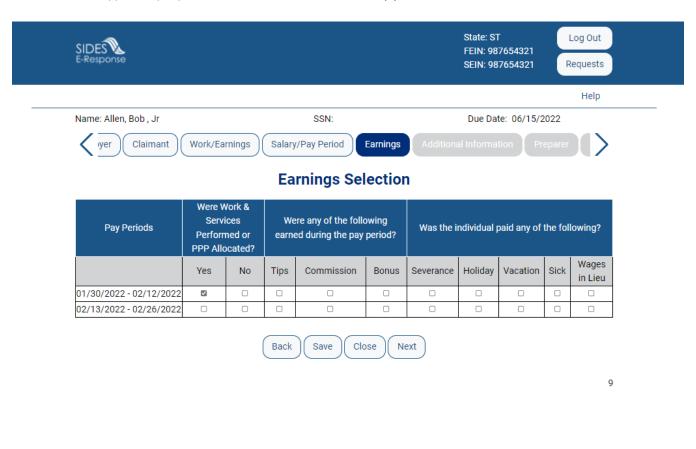
SIDES E-Response		State: ST Log 0 FEIN: 987654321 SEIN: 987654321 Reques	
		Не	lp
Name: Allen, Bob , Jr	SSN:	Due Date: 06/15/2022	
Employer Claimant Work/Earnings	Salary/Pay Period Earnings	Additional Information Preparer	\rangle
* Did the claimant work under contract for a spec * Was the claimant paid by the mile or Trip/Load		TIP: If the claimant worker contract for a specific amour by trip/load/mile, a differ questions will displa	nt or was paid rent set of
* Regular Rate of Pay	\$	per Hour	~
Overtime Rate of Pay		per Select One	~
Training Rate of Pay		per Select One	~
* How often is/was the claimant paid?	Bi-Weekly		*
* Pay period start date			
(Back Save Close Next		



7

Earnings Selection

Select each type of payment received for the week(s) listed

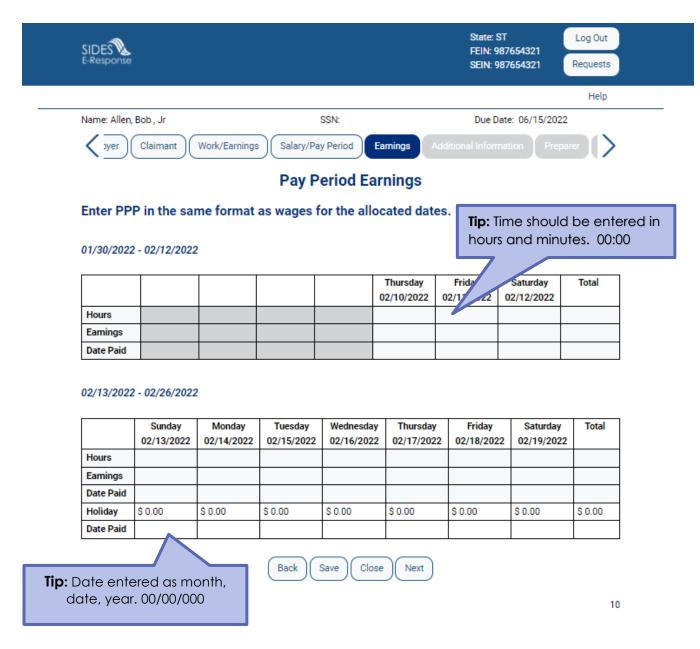


INTEGRITY TIP: Providing all payment information is vital to prevent improper payments! Multiple payment types may be selected if applicable each week.



Pay Period Earnings

Enter hours, and earnings. Date paid/or allocated may also be required by the state.





Summary

Review hours and earnings entered.

SIDES E-Response							State: ST FEIN: 987 SEIN: 987			g Out uests	
										Help	
Name: Allen, Bob , Jr				SSN:			Due Date	e: 06/15/20	022		
Claimant	Work/Ea	rnings	Salary/F	Pay Period	Earnings	Addition	al Informa	tion	eparer	$\left \right\rangle$	
				Summai	ry						
Period	Hours	Eamings	Tips	Commission	Bonus	Severance	Holiday	Vacation	Sick	Wages in Lieu of Work	Total Gross Earnings
01/30/2022 - 02/12/2022	16:00	\$ 400.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 400.00
02/13/2022 - 02/26/2022	32:00	\$ 800.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 200.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 1,000.00
 correct Earnings o return to Pay Pe Earnings			Bac	Close	Next)				11	



Additional Information

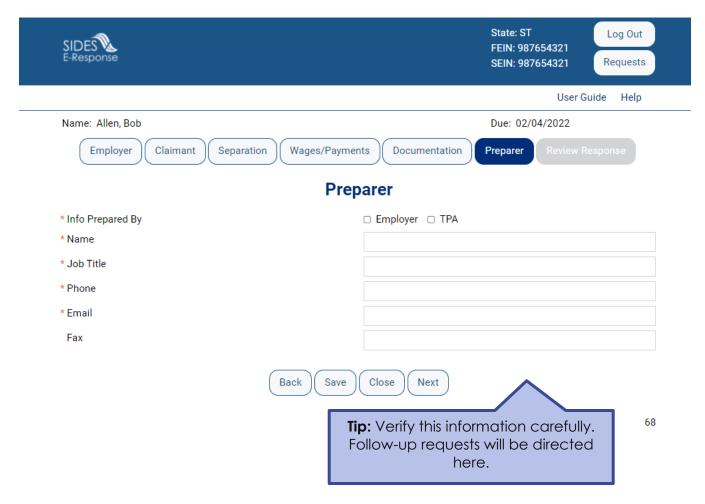
Enter any additional information about earnings.

SIDES E-Response		State: ST Log Out FEIN: 987654321 SEIN: 987654321 Requests	
		Help	
Name: Allen, Bob , Jr	SSN:	Due Date: 06/15/2022	
t Work/Earnings Salary/	Pay Period Earnings Additional Ir	nformation Preparer Review Respons	
	Additional Informat	ion	
Enter any additional information about	t this Earnings Verification, including detail	s of the PPP (if applicable).	
		li	
	Back Save Close N	lext	
		12	2



Tell Us About You

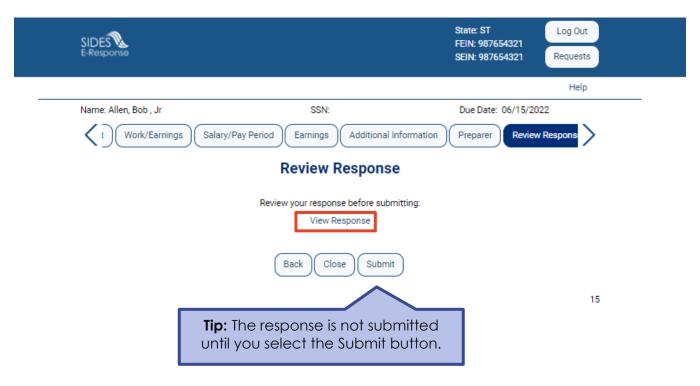
Provide the information for the person who completed the response.





Review the Response for Accuracy

Click 'View Response' to see a copy of the PDF before it is sent to the state workforce agency.





Save the Confirmation

Records are only saved on the website for 35 days after the request is sent. Save your confirmation number and download a copy of your response. **An emailed copy will NOT be sent.**

SIDES E-Response	State: ST Log Out FEIN: 987654321 SEIN: 987654321 Requests
	Help
Name: Allen, Bob , Jr SSN:	Due Date: 06/15/2022
Confirmation	
Your response has been accepted. Your confirmation number is c50a-1cb3	3-9631-4701-920b-42e8-782d-5a33.
Print or download a copy for your records	S.
Tip: Print or download a copy of your response for your records.	10

Save or Print your PDF

					0			
g/sew-ev-cas/viewer/requests/3417069/responses/2041423/f43c2b66934f4b19accc88fc9e29ff67.pdf					۵۵ 🖽	New tab	Ctrl+T	
					E	New window	Ctrl+N	
SSN Name Allen, Bob Due Date						New InPrivate window	Ctrl+Shift+N	
) Show sidebar	Ctrl+Shift+/	
Earnings V	erification					Zoom —	125% +	2
State Reques	st Information				¢	Favorites	Ctrl+Shift+O	
Agency	5503	Phon	e		G) Collections	Ctrl+Shift+Y	
		State		ок	5	History	Ctrl+H	
Email	LO@LO.com				\downarrow	Downloads	Ctrl+J	
Employer				E	Apps		>	
-	VV7 Heldinge				0	Extensions		
Employer Name	XYZ Holdings	OFIN		007054004	8	Microsoft Rewards		
FEIN	98-7654321	SEIN		987654321	~	Performance		
Work/Earnin	gs				Ģ	Alerts and tips		
Request Source		Natic	nal Direct	ory of New Hire Match/Hit	6) Print	Ctrl+P	
Did this person per	form work or receive pay	ment from Yes,	this indivi	dual had earnings during the ti	me 🖸	Web capture	Ctrl+Shift+S	
02/06/2022 to 02/1	9/2022	frame	e requeste	d	Ć	Web select	Ctrl+Shift+X	
What was the first of	day the claimant physica	lly worked or 02/11	/2022		K	Share		
the first allocated payment date of a Paycheck Protection				\$	Discover			
	ween 02/06/2022 to 02/2				ବି	Find on page	Ctrl+F	
Is the individual stil	working?	Yes			A	Read aloud	Ctrl+Shift+U	
Salary and P	ay Period					More tools		>
	Rate of Pay \$5	50.00 per		Hourly	63	Settings		

V