

## NEW EMPLOYEE ORIENTATION

## **CERTIFICATED STAFF**

# PAYROLL DEPARTMENT

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All forms must be submitted with wet ink signature

**Business Services /FiscalServices** 

## FORMS <u>Tax Forms- Due 15th of the month</u> W-4: Federal Employee's withholding certificate DE-4: State EDD Employee's withholding allowance

Department of the Treasu Internal Revenue Service	rv ► Give	Withholding Certificate         OMB No. 11           er can withhold the correct federal income tax from your pay.         20           m W-4 to your employer.         20				
Step 1: (a)	First name and middle initial	Last name	(b) Social security number			
Personal	dress y or town, state, and ZIP code	Poss your n     read of track     read     read of track     read				
(c)	Single or Married filing separately Married filing jointly or Qualitying widow(er Head of household (Check only if you're unm	n) Iarried and pay more than haif the costs of keeping up a home for you	urself and a qualifying individu			

Step 2: Multiple Jobs	Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.
or Spouse	Do only one of the following.
Works	(a) Use the estimator at www.irs.gov/W4App for most accurate withholding for this step (and Steps 3-4); or
	(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; or
	(c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld
	TIP: To be accurate, submit a 2022 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.



#### Clear Form

(Check box here)

#### EMPLOYEE'S WITHHOLDING ALLOWANCE CERTIFICATE

Complete this form so that your employer can withhold the correct California state income tax from your paycheck.

Enter Personal Information					
First, Middle, Last Name	Social Security Number				
Address	Filing Status				
City, State, and ZIP Code	<ul> <li>SINGLE or MARRIED (with two or more incomes)</li> <li>MARRIED (one income)</li> <li>HEAD OF HOUSEHOLD</li> </ul>				

1. Use Worksheet A for Regular Withholding allowances. Use other worksheets on the following pages as applicable.

- 1a. Number of Regular Withholding Allowances (Worksheet A)
- 1b. Number of allowances from the Estimated Deductions (Worksheet B, if applicable.)
- 1c. Total Number of Allowances you are claiming
- Additional amount, if any, you want withheld each pay period (if employer agrees), (Worksheet C) \_\_\_\_\_\_OR

#### **Exemption from Withholding**

3. I claim exemption from withholding for 2021, and I certify I meet both of the conditions for exemption.

#### OR

4. I certify under penalty of perjury that I am not subject to California withholding. I meet the conditions set forth under the Service Member Civil Relief Act, as amended by the Military Spouses Residency Relief Act

# FORMS

## **DNP-** Deferred NetPay

- Irrevocable for the school year & due by August 15th
- Normal Salary is paid 10 months Sept-June
- 16.67 % of net pay (after taxes) is placed in a "savings bucket"
- Paid out in two equal installments on July 1st & August 1st
- Previously taxed and a way to get paid each month for 12 months



## FORMS DNP-Deferred Net Pay

	CERTIFICATED DEFERRED NET F Election/Cancellation	AY
Name (Please Print)	Social Security Number	Site
I wish to elect Deferred	Net Pay beginning with the	school year.
THIS ELECT	TION IS IRREVOCABLE WITHIN TH	IE SCHOOL YEAR
I wish to cancel Deferre	d Net Pay beginning with the	school year.

# FORMS

### **Voluntary Deductions**

Summer Savers-Schools First

Various Insurance carriers i.e. NTA, American Fidelity, The Standard Retirement accounts- Schools First Retirement 800-462-8328 Ext. 4116

Public-sector and nonprofit organizations don't offer 401(k) plans that employees can contribute to. However, they can and do offer other <u>employer-sponsored plans</u>: the 403(b) and the 457.A <u>403(b) plan</u> (also called a tax-sheltered annuity or TSA plan) is a retirement plan offered by public schools and certain 501(c)(3) tax-exempt organizations. There are significant tax advantages for participants in a 403(b), including pre-tax contributions to a 403(b) plan and earnings on these amounts are not taxed until they are distributed from the plan. (https://www.irs.gov/retirement-plans)

# FORMS

### EFT Authorization Form & EFT Stop Notice

- Must be submitted in person with valid ID & voided check or bank form attached
- 1st check sent to site
- Prenote Cycle each time you change your banking account

RIALTO UNIFIED SCHOOL DISTRICT Fiscal Services 182 E: Walnut Avenue Rialto, CA 92376 (909) 820-7700		RIALTO
Electronic Fund Trans	fer (EFT) Authoriza	ation Form
Last:	First:	M.I.
Job Title:	Site:	
Social Security No.:	Classification:	
I HEREBY REQUEST MY PAY WARRANT TO BE ELECTI (ATTACH VOIDED CHECK).		NK/CREDIT UNION
Financial Institution:	Branch:	
Financial Institution 9 Digit Transit/ABA No.:		
Account Number:	Checking Sa	avings

shall hold harmless and indemnity the Rialto Unified School District

RIALTO UNIFIED SCHOOL DISTRICT
Fiscal Services
182 E. Walnut Avenue
Rialto, CA 92376
(909) 820-7700



#### Electronic Fund Transfer (EFT) Stop Notice

Last:	First:	M.I.
Job Title:	Site:	
Social Security No.:	Classification:	Ψ.

I hereby authorize Rialto Unified School District Payroll Department to stop the electronic deposit of my pay warrant effective the next available payroll cycle.

# TIME CARDS

- Due Date: 10th of the month
- Employee's responsibility to submit on time
- Extra Duty blue Period coverage - salmon
- Rate: \$50.40/hr.

School

RHS

EMPLOYEE NAME (PLEASE PRINTLAST, FIRST)

Check(-/)

Indicate # of Hours

1

Total Days

DATE

12/10/2020

• PSR must be in Processed status

Total H

Miss Honey - conf PSR#

						HOURLY/ EXTRA DUTY TIME CARD CERTIFICATED CONTRACT															
RDS						EMPLOYEE NAME (PLEASE PRINTLAST, FIRST) SOCIAL SECURITY NUMBER IT IS ULTIMATELY THE EMPLOYEE'S RESPONSIBILITY TO SEE THAT HIS/HER TIME CARD IS FILLED OUT COMPLETELY AND TURNED IN ON TIME! SEE REVERSE SIDE FOR INSTRUCTIONS									NU MBER						
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# PAYROLL DUE DATES

### 15th of the month for next payroll date

Tax Forms

Voluntary deductions changes (including TSA, 457)

EFT forms- If form is late and funds are returned from old account to the County Schools, it may take up to 10 business days for Payroll to receive paper check (slightly flexible date)

**10th of the month for next payroll date** Extra Duty Time Cards Period Substitue TimeCards

### **Adjusted Due Dates**

December and fiscal year end - memos will be sent as needed

Due date falls on weekend or holiday - due last business day prior

## SICK LEAVE & ABSENCE AFFIDAVITS

#### SICK LEAVEACCRUALS

• 10-month Employees = 70 hours accrual

LEAVE TYPES - yearly maximums (Deducted from sick leave accrual)

- Personal Necessity 7 days
- Family Illness 6 days
- General Leave 3 days

# LEAVE TYPES NOT DEDUCTED FROM SICK LEAVEACCRUAL

- Jury Duty slip required
- Bereavement 3 days
  - Out of State-5 days

### **ABSENCE AFFIDAVITS**

• Site secretaries print on weekly basis and request your signature

## RETIREMENT

### CALSTRS

Fiscal Year	DB Member	DB Member
Creditable Service	Contributiojn Rate	<b>Contribution Rate</b>
Performed In	CalSTRS 2% at 60	CalSTRS 2% at 62
Prior to 07/01/2014	8.00%	8.00%
2014-15	8.15%	8.15%
2015-16	9.20%	8.56%
2016-17	10.25%	9.205%
2017-18	10.25%	9.205%
2018-19	10.25%	10.205%
2019-20	10.25%	10.205%
2020-21	10.25%	10.205%
2021-22	10.25%	10.205%
2022-23	10.25%	10.205%



## CALPERS

Contribution Rates	2022 - 2023
Classic Members	7%
Pepra Members	8%

**CLICK HERE TO CREATE A MYCALSTRS ACCOUNT** 

#### OVERVIEW

The Employee Self Service gives you direct access to your payroll data via the web. You can review, print, or save your latest pay stub or annual W-2 tax form at your convenience from work or at home. Pay information is available for the current calendar year plus two historical years. W2 information is available for five calendar years. For districts currently using the Employee Leave Tracking System, real-time Leave Activity is also available in detail or summary.

The Employee Self Service is a secure web site which requires authentication during the initial registration process as well as a user name and password every time the site is accessed.

Future enhancements will include integrating benefit information.





Each paystub is listed by the issue date; the W2 information is listed by the "year". Click one of the records to open either a paystub or W2.

For assistance with your account or registration, contact your Payroll administrator.

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#### CLICK HERE TO LOGIN TO BEST NET

#### **REGISTRATION PROCESS**

"First time" users must go through the registration process. Start by selecting the "District" you work in and click on [Register].

Complete the Registration form and select [Continue].

Note: All fields must pass the authentication process to continue. "Net Pay" was selected as the optimum security question for your protection against identity theft.

If you don't have a password, enter your District, then click Register to begin the registration process. District: San Bernardino County Superintendent of Schools



**BEST NET** 

**Employee Self** 

Service

Registration

https://employeeselfservice.sbcss.k12.ca.us

Business Personnel Educational Software Jechnology and Network Resortions

For assistance with your account or registration, contact your payroll administrator.

#### Register (Step 1 of 6)

To verify your identity, please enter the following information about yourself, then click Continue.

First Name:	John	(Must match what is currently displayed on Warrant or EFT Stub)				
Last Name:	Smith	(Must match what is displayed on Warrant or EFT Stub)				
Social Security Number:	111223333	(Example: 123456789 (no hyphens))				
Net Pay:	3,500.00	(From your most recent earnings statement)				



## Conclusion

## **QUESTIONS?**

