

**Notice of Failure to File
Required Form NYS-45 and
Determination of Estimated
Amount Due**

VERATEX INC
PO BOX 682
NEW YORK NY 10108-0682

Date 03/10/25

ER No. 33-60096 2

EIN 13-2804148 9

Our records indicate we have not received a complete Quarterly Combined Withholding, Wage Reporting and Unemployment Insurance Return, Form NYS-45 and/or NYS-45-ATT for the quarter(s) indicated below. You must file form NYS-45 and/or NYS-45-ATT for the quarter(s) indicated, even if there are no UI contributions due for the quarter(s). If a return(s) is not received within 30 days of the date of this notice, the Estimated Unemployment Insurance (UI) Amount Due, shown below, will become final. You must file and pay your NYS-45 electronically. For more information, visit the Department of Taxation and Finance - Online Services at - www.tax.ny.gov. If you filed after the date shown above, please disregard this notice.

For additional information and assistance, please contact us at 888-899-8810 or reference the Important Notice on the back of this form.

Quarter	Total UI Rate	Estimated UI Wages	Estimated UI Amount Due
4Q 2024	7.1%	\$17,235	\$1,223.68

If you filed prior to the date on this notice, or believe you are not required to file, complete this form (using blue or black ink) by placing an "X" in the appropriate boxes (☐) and filling in all applicable blanks.

If you filed under a name and/or identification number other than the one shown above, indicate below which Unemployment Insurance Employer Registration number (ER No.) and/or employer identification number (EIN) you reported under and attach an explanation.

Name	UI ER No.	Withholding Tax EIN
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If the return(s) was filed with a payment(s).

Date Filed	Payment Amount	Quarter/Year covered by return/payment	Deposit serial number
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☐ The return(s) was filed without payment. Attach proof of filing.

☐ The business is seasonal. There were no remunerations paid for the quarter(s) indicated above.

If the business is not subject to Withholding, Wage Reporting, and/or Unemployment Insurance for the quarter(s) shown above, complete the appropriate information below or attach an explanation.

Note: Form NYS-45 and/or NYS-45-ATT must be filed for any quarter, or part of a quarter, in which you were active.

☐ The business has permanently ceased paying wages. Enter the last payroll date (mm/dd/yy): _____

☐ The business has been sold or transferred. Enter the date of sale (mm/dd/yy): _____

Name and address of new owner: _____

☐ Other reason for not filing the return: _____

If any of the above information is completed, please sign this notice and return it to the above address.

Date	Signature	Title	Phone Number
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IMPORTANT NOTICE

The Unemployment Insurance wages and amount(s) due, shown on the front, have been estimated. This determination of the wages and amount(s) due becomes final 30 days after the date shown unless you reply or request a hearing or have already filed the return(s) for the quarter(s) indicated. The estimated wages will be included in the calculation of future UI rates if a report is not received. This may have an adverse affect on your UI rate. Failure to file or late filing of all required parts of the NYS-45 and/or NYS-45ATT may subject you to a penalty which can increase the later the return is filed.

Prompt payment is required since PAYMENTS RECEIVED MORE THAN 60 DAYS AFTER THE QUARTERLY DUE DATE (April 30, July 31, October 31, January 31) CANNOT BE CREDITED TO YOUR ACCOUNT FOR FUTURE UI RATE PURPOSES. Late filing and payment may also affect credit allowed under FUTA. Interest as required by law must be assessed on late payment of the amounts due from the due date to the date paid.

IF YOU NEED ASSISTANCE, you may call the Unemployment Insurance Division at 1-888-899-8810.

IF YOU NEED FORMS, you may call the Business Tax Information Center at 1-800-972-1233. Completed returns must be mailed to the address shown on the return. Information received on a completed return may replace the estimated UI amount(s) due.