

**Disability Employment Tax Credit
for Monthly Business Gross Revenue Tax Return**

Complete and attach to Form OS-3105
Monthly Gross Revenue Tax Return

Schedule **DETC-BGR**

Taxpayer's name as shown on return		Taxpayer identification number □□ - □□□□□□□□		Tax Year
A. Name of employee		B. SOL Certificate Number	C. Employee Social Security No.	D. Total wages paid this year
1. _____				

2. Amount from continuation sheet				2
3. Total wages paid. Enter the sum of amounts in Column D				3
4. Multiply the amount on line 3 by 40%				4
5. Enter the annual credit limit amount that corresponds to the tax year you are filing from the table below				5
6. Disability employment tax credit. Enter the smaller of line 4 or line 5. Also enter this amount on Form OS-3105, Part II, December and Annual BGRT Summary, line 3				6

General instructions

Important: You must attach the Secretary of Labor (SOL) certification in order to claim the credit. Otherwise, the credit will be disallowed.

- Column A. Enter the name(s) of the eligible employee(s).
Column B. Enter the SOL Certification Number of the employee.
Column C. Enter the employee's social security number.
Column D. Enter the wages indicated in the SOL certification.
- Enter the sum of the amounts in Column D from the continuation schedule if you are reporting more than five employees and attach it to this document. Use a separate Schedule DETC to enter information required for line 1.
- Add all amounts on line 1 and line 2, column D.
- Multiply the amount on line 3 by 40%.
- Enter the amount applicable to the tax year from the table below. Example: 2024 = \$4,000.
- Disability employment tax credit allowed this tax year. Enter the smaller of line 4 or line 5. Also enter this amount on Form OS-3105, Part II, December and Annual BGR Summary, line 3.

Annual Credit Limit Table

Tax Year	Amount
2024	4,000
2025	5,000
2026	6,000
2027	7,000
2028	8,000
2029	9,000
2030	10,000