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2027-28 Oregon State Social Security Administration Fee Information

The purpose of this form is to gather information needed to calculate your organization’s Social Security Administration fee for state fiscal year 2027-28. Per [Oregon Revised Statute 237.470](#), your organization is required to pay this fee to help cover some of the cost of administering Social Security coverage for your Section 218 employees.

The fee is calculated based on the number of your employees who had Social Security withholding in calendar year 2025. If you do not provide this information by April 30, 2026, the state Social Security administrator will calculate your fee based on the latest information on file for your organization.

Please fill in all the information below and email this form to the state Social Security administrator email address below.

1. Number of employees in your organization who had Social Security withholding in calendar year 2025: _____
2. Employer number (this is the five-digit number assigned to you by PERS that starts with “0”; non-PERS-participating employers have an employer number that begins with “8”): _____
3. Federal EIN: _____
4. Employer legal name: _____
5. Employer common name, if different: _____
6. The person in your organization whom the Social Security administrator should contact for more information (fill in below).

Name	Job title	Email	Phone number

Contact information

State Social Security Administrator
oregon.socialsecurityprogram@pers.oregon.gov
 PERS
 Data Services
 Attention: State Social Security Program
 PO Box 23700
 Tigard, OR 97281-3700
 Phone: 503-431-8281
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