orm **W-4** 

## Employee's Withholding Certificate

OMB No. 1545-0074

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Give Form W-4 to your employer.

Department of the Treasury Internal Revenue Service Your withholding is subject to review by the IRS.

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Step 1:	<b>(a)</b> Fi	irst name and middle initial	Last name	(b) Social security number
Enter Personal Information	Addre City of	ss r town, state, and ZIP code		Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov.
	(c) [			

Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, and when to use the estimator at *www.irs.gov/W4App*.

Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)

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 <b>only one</b> of the following.
Works	(a) Use the estimator at <i>www.irs.gov/W4App</i> for most accurate withholding for this step (and Steps 3–4). If you or your spouse have self-employment income, use this option; or
	(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below; 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 generally more accurate than (b) if pay at the lower paying job is more than half of the pay at the

**Complete Steps 3–4(b) on Form W-4 for only ONE of these jobs.** Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3–4(b) on the Form W-4 for the highest paying job.)

Step 3: Claim Dependent and Other Credits	If your total income will be \$200,000 or less (\$400,000 or less if married filing jointly): Multiply the number of qualifying children under age 17 by \$2,000 \$ Multiply the number of other dependents by \$500 \$ Add the amounts above for qualifying children and other dependents. You may add to this the amount of any other credits. Enter the total here	3	\$
Step 4 (optional): Other Adjustments	<ul> <li>(a) Other income (not from jobs). If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income</li> <li>(b) Deductions. If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter</li> </ul>	4(a)	\$
	<ul> <li>(c) Extra withholding. Enter any additional tax you want withheld each pay period</li> </ul>	4(b) 4(c)	

Step 5: Sign Here	Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.					
	Employee's signature (This form is not valid unless you sign it.)	[	Date			
Employers Only	Employer's name and address	First date of employment	Employer identification number (EIN)			

For Privacy Act and Paperwork Reduction Act Notice, see page 3.

### **General Instructions**

Section references are to the Internal Revenue Code.

### **Future Developments**

For the latest information about developments related to Form W-4, such as legislation enacted after it was published, go to *www.irs.gov/FormW4*.

### **Purpose of Form**

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. If too little is withheld, you will generally owe tax when you file your tax return and may owe a penalty. If too much is withheld, you will generally be due a refund. Complete a new Form W-4 when changes to your personal or financial situation would change the entries on the form. For more information on withholding and when you must furnish a new Form W-4, see Pub. 505, Tax Withholding and Estimated Tax.

Exemption from withholding. You may claim exemption from withholding for 2024 if you meet both of the following conditions: you had no federal income tax liability in 2023 and you expect to have no federal income tax liability in 2024. You had no federal income tax liability in 2023 if (1) your total tax on line 24 on your 2023 Form 1040 or 1040-SR is zero (or less than the sum of lines 27, 28, and 29), or (2) you were not required to file a return because your income was below the filing threshold for your correct filing status. If you claim exemption, you will have no income tax withheld from your paycheck and may owe taxes and penalties when you file your 2024 tax return. To claim exemption from withholding, certify that you meet both of the conditions above by writing "Exempt" on Form W-4 in the space below Step 4(c). Then, complete Steps 1(a), 1(b), and 5. Do not complete any other steps. You will need to submit a new Form W-4 by February 15, 2025.

**Your privacy.** Steps 2(c) and 4(a) ask for information regarding income you received from sources other than the job associated with this Form W-4. If you have concerns with providing the information asked for in Step 2(c), you may choose Step 2(b) as an alternative; if you have concerns with providing the information asked for in Step 4(a), you may enter an additional amount you want withheld per pay period in Step 4(c) as an alternative.

When to use the estimator. Consider using the estimator at *www.irs.gov/W4App* if you:

1. Expect to work only part of the year;

2. Receive dividends, capital gains, social security, bonuses, or business income, or are subject to the Additional Medicare Tax or Net Investment Income Tax; or

3. Prefer the most accurate withholding for multiple job situations.

**Self-employment.** Generally, you will owe both income and self-employment taxes on any self-employment income you receive separate from the wages you receive as an employee. If you want to pay these taxes through withholding from your wages, use the estimator at *www.irs.gov/W4App* to figure the amount to have withheld.

**Nonresident alien.** If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

### **Specific Instructions**

**Step 1(c).** Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

**Step 2.** Use this step if you (1) have more than one job at the same time, or (2) are married filing jointly and you and your spouse both work.

Option (a) most accurately calculates the additional tax you need to have withheld, while option (b) does so with a little less accuracy.

Instead, if you (and your spouse) have a total of only two jobs, you may check the box in option **(c)**. The box must also be checked on the Form W-4 for the other job. If the box is checked, the standard deduction and tax brackets will be cut in half for each job to calculate withholding. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld, and this extra amount will be larger the greater the difference in pay is between the two jobs.



**Multiple jobs.** Complete Steps 3 through 4(b) on only one Form W-4. Withholding will be most accurate if you do this on the Form W-4 for the highest paying job.

Step 3. This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 501, Dependents, Standard Deduction, and Filing Information. You can also include other tax credits for which you are eligible in this step, such as the foreign tax credit and the education tax credits. To do so, add an estimate of the amount for the year to your credits for dependents and enter the total amount in Step 3. Including these credits will increase your paycheck and reduce the amount of any refund you may receive when you file your tax return.

#### Step 4 (optional).

**Step 4(a).** Enter in this step the total of your other estimated income for the year, if any. You shouldn't include income from any jobs or self-employment. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your paycheck, see Form 1040-ES, Estimated Tax for Individuals.

**Step 4(b).** Enter in this step the amount from the Deductions Worksheet, line 5, if you expect to claim deductions other than the basic standard deduction on your 2024 tax return and want to reduce your withholding to account for these deductions. This includes both itemized deductions and other deductions such as for student loan interest and IRAs.

**Step 4(c).** Enter in this step any additional tax you want withheld from your pay **each pay period**, including any amounts from the Multiple Jobs Worksheet, line 4. Entering an amount here will reduce your paycheck and will either increase your refund or reduce any amount of tax that you owe.

# **FORM VA-4**

### COMMONWEALTH OF VIRGINIA DEPARTMENT OF TAXATION PERSONAL EXEMPTION WORKSHEET

(See back for instructions)

<ul> <li>If you wish to claim yourself, write "1"</li> <li>If you are married and your spouse is not claimed on his or her own certificate, write "1"</li> <li>Write the number of dependents you will be allowed to claim on your income tax return (do not include your spouse)</li> </ul>					
Subtotal Personal Exemptions (add lines 1 through 3)					
Exemptions for age					
<ul> <li>(a) If you will be 65 or older on January 1, write "1"</li> <li>(b) If you claimed an exemption on line 2 and your spouse will be 65 or older on January 1, write "1"</li> </ul>					
<ul> <li>(a) If you are legally blind, write "1"</li> <li>(b) If you claimed an exemption on line 2 and your spouse is legally blind, write "1"</li> </ul>					
Subtotal exemptions for age and blindness (add lines 5 through 6)					
Total of Exemptions - add line 4 and line 7					
	<ul> <li>on his or her own certificate, write "1"</li></ul>				

# Detach here and give the certificate to your employer. Keep the top portion for your records FORM VA-4 EMPLOYEE'S VIRGINIA INCOME TAX WITHHOLDING EXEMPTION CERTIFICATE

You	ur Social	Security Number	Name						
Str	Street Address								
Cit	City State Zip Code								
		E THE APPLICABL							
1.			nter the number of exemptions	claimed on:					
	(a)		nal Exemptions - line 4 of the on Worksheet						
	(b)		otions for Age and Blindness						
		line 7 of the Perso	nal Exemption Worksheet						
	(C)	Total Exemptions	- line 8 of the Personal Exempt	ion Worksheet					
	. ,								
2.	Enter th	ne amount of additi	onal withholding requested (se	e instructions)					
3.	I certify	that I am not subje	ect to Virginia withholding. I me	et the conditions					
	set forth in the instructions								
4.	. I certify that I am not subject to Virginia withholding. I meet the conditions set forth								
	Under the Service member Civil Relief Act, as amended by the Military Spouses								
			·	, , ,	ck here)				
		-,			,				

Signature

Date

EMPLOYER: Keep exemption certificates with your records. If you believe the employee has claimed too many exemptions, notify the Department of Taxation, P.O. Box 1115, Richmond, Virginia 23218-1115, telephone (804) 367-8037. <u>Note</u>: Employers may establish a system to electronically receive Forms VA-4 from employees, provided the system meets Internal Revenue Service requirements as specified in § 31.3402(f)(5)-1(c) of the Treasury Regulations (26 CFR).

### FORM VA-4 INSTRUCTIONS

Use this form to notify your employer whether you are subject to Virginia income tax withholding and how many exemptions you are allowed to claim. You must file this form with your employer when your employment begins. If you do not file this form, your employer must withhold Virginia income tax as if you had no exemptions.

### PERSONAL EXEMPTION WORKSHEET

# You may not claim more personal exemptions on form VA-4 than you are allowed to claim on your income tax return unless you have received written permission to do so from the Department of Taxation.

- Line 1. You may claim an exemption for yourself.
- Line 2. You may claim an exemption for your spouse if he or she is not already claimed on his or her own certificate.
- Line 3. Enter the number of dependents you are allowed to claim on your income tax return. **NOTE:** A spouse is not a dependent.
- Line 5. If you will be age 65 or over by January 1, you may claim one exemption on Line 5(a). If you claim an exemption for your spouse on Line 2, and your spouse will also be age 65 or over by January 1, you may claim an additional exemption on Line 5(b).
- Line 6. If you are legally blind, you may claim an exemption on Line 6(a). If you claimed an exemption for your spouse on Line 2, and your spouse is legally blind, you may claim an exemption on Line 6(b).

### FORM VA-4

Be sure to enter your social security number, name and address in the spaces provided.

- Line 1. If you are subject to withholding, enter the number of exemptions from:
  - (a) Subtotal of Personal Exemptions line 4 of the Personal Exemption Worksheet
  - (b) Subtotal of Exemptions for Age and Blindness line 7 of the Personal Exemption Worksheet
  - (c) Total Exemptions line 8 of the Personal Exemption Worksheet
- Line 2. If you wish to have additional tax withheld, and your employer has agreed to do so, enter the amount of additional tax on this line.
- Line 3. If you are not subject to Virginia withholding, check the box on this line. You are not subject to withholding if you meet any one of the conditions listed below. Form VA-4 must be filed with your employer for each calendar year for which you claim exemption from Virginia withholding.
  - (a) You had no liability for Virginia income tax last year and you do not expect to have any liability for this year.
  - (b) You expect your Virginia adjusted gross income to be less than the amount shown below for your filing status:

	Taxable Years 2005, 2006 and 2007	Taxable Years 2008 and 2009	Taxable Years 2010 and 2011	Taxable Years 2012 and Beyond
Single	\$7,000	\$11,250	\$11,650	\$11,950
Married	\$14,000	\$22,500	\$23,300	\$23,900
Married, filing a separate return	\$7,000	\$11,250	\$11,650	\$11,950

- (c) You live in Kentucky or the District of Columbia and commute on a daily basis to your place of employment in Virginia.
- (d) You are a domiciliary or legal resident of Maryland, Pennsylvania or West Virginia whose only Virginia source income is from salaries and wages and such salaries and wages are subject to income taxation by your state of domicile.
- Line 4. Under the Servicemember Civil Relief Act, as amended by the Military Spouses Residency Relief Act, you may be exempt from Virginia income tax on your wages if (i) your spouse is a member of the armed forces present in Virginia in compliance with military orders; (ii) you are present in Virginia solely to be with your spouse; and (iii) you maintain your domicile in another state. If you claim exemption under the SCRA check the box on Line 4 and attach a copy of your spousal military identification card to Form VA-4.



### **Employment Eligibility Verification**

**Department of Homeland Security** U.S. Citizenship and Immigration Services

START HERE: Employers must ensure the form instructions are available to employees when completing this form. Employers are liable for failing to comply with the requirements for completing this form. See below and the <u>Instructions</u>.

**ANTI-DISCRIMINATION NOTICE:** All employees can choose which acceptable documentation to present for Form I-9. Employers cannot ask employees for documentation to verify information in **Section 1**, or specify which acceptable documentation employees must present for **Section 2** or Supplement B, Reverification and Rehire. Treating employees differently based on their citizenship, immigration status, or national origin may be illegal.

Section 1. Employee Information and Attestation: Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.											
Last Name (Family Name) First Name (Gi			ne (Giver	n Name	)	Middle I	Initial (if any	) Other Las	st Names Used (if any)		
Address (Street Number and Name) A			Apt. Nu	umber (if any) City or Town			1	State	ZIP	Code	
Date of Birth (mm/dd/yyyy)	U.S. Soc	cial Security Numb	er	Employee's Email Address				Employee's Telephone Number			
I am aware that federal law provides for imprisonment and/or fines for false statements, or the use of false documents, in connection with the completion of this form. I attest, under penalty of perjury, that this information, including my selection of the box attesting to my citizenship or immigration status, is true and correct. Signature of Employee		1. A citizer         2. A nonci         3. A lawfu	n of the l tizen nat I perman tizen (oth <b>Numbe</b>	Jnited S ional of ent resi ner thar e <b>r 4.</b> , en	the United States ( dent (Enter USCIS I <b>Item Numbers 2.</b>	See Instru or A-Num and <b>3.</b> abo	ictions.) ber.) bove) authoriz	zed to work ur	ntil (exp. dat	e, if any)	structions.):
If a preparer and/or tr	anslator assist	ed you in comple	ting Sec	ction 1,	that person MUST	complet	e the Prepa	rer and/or Tr	anslator Ce	ertification	on Page 3.
Section 2. Employer business days after the e authorized by the Secreta documentation in the Add	mployee's firs arv of DHS, do	t day of employr ocumentation fro	nent, ar m List /	nd mus A OR a	st physically exam	nine, or e	examine co	nsistent with	n an altern	ative proc	edure
		List A		OR	Li	st B		AND		List C	
Document Title 1											
Issuing Authority											
Document Number (if any)											
Expiration Date (if any)											
Document Title 2 (if any)				Add	litional Informat	ion		•			
Issuing Authority											
Document Number (if any)											
Expiration Date (if any)											
Document Title 3 (if any)											
Issuing Authority											
Document Number (if any)											
Expiration Date (if any)				(	Check here if you us	sed an alte	ernative proc	cedure author	ized by DHS	S to examin	e documents.
employee, (2) the above-lis	Certification: I attest, under penalty of perjury, that (1) I have examined the documentation presented by the above-named employee, (2) the above-listed documentation appears to be genuine and to relate to the employee named, and (3) to the best of my knowledge, the employee is authorized to work in the United States.						rment				
Last Name, First Name and Title of Employer or Authorized Represe				ative	Signature of Employer or Authorized Representative Today's Date			ate (mm/dd/yyyy)			
Employer's Business or Orga	anization Name		Emp	oloyer's	Business or Organi	ization Ad	dress, City o	or Town, State	e, ZIP Code		

## LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired.

\* Documents extended by the issuing authority are considered unexpired.

Employees may present one selection from List A or a

combination of one selection from List B and one selection from List C.

Examples of many of these documents appear in the Handbook for Employers (M-274).

LIST A Documents that Establish Both Identity		LIST B	LIST C				
and Employment Authorization	OR	Documents that Establish Identity Al	ND Authorization				
1. U.S. Passport or U.S. Passport Card	-	<ol> <li>Driver's license or ID card issued by a State or outlying possession of the United States</li> </ol>	<ol> <li>A Social Security Account Number card, unless the card includes one of the following restrictions:</li> </ol>				
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	(1) NOT VALID FOR EMPLOYMENT				
<ol> <li>Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa</li> </ol>		<ol> <li>ID card issued by federal, state or local government agencies or entities, provided it</li> </ol>	<ul><li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li><li>(3) VALID FOR WORK ONLY WITH</li></ul>				
<ol> <li>Employment Authorization Document that contains a photograph (Form I-766)</li> </ol>	-	contains a photograph or information such as name, date of birth, gender, height, eye color, and address					
<b>5.</b> For an individual temporarily authorized		3. School ID card with a photograph	<ol> <li>DHS AUTHORIZATION</li> <li>Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)</li> <li>Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</li> <li>Native American tribal document</li> <li>U.S. Citizen ID Card (Form I-197)</li> <li>Identification Card for Use of Resident</li> </ol>				
to work for a specific employer because of his or her status or parole:		4. Voter's registration card	<b>3.</b> Original or certified copy of birth certificate				
<b>a.</b> Foreign passport; and		5. U.S. Military card or draft record	authority, or territory of the United States				
b. Form I-94 or Form I-94A that has the following:		6. Military dependent's ID card					
(1) The same name as the		7. U.S. Coast Guard Merchant Mariner Card					
passport; and (2) An endorsement of the		8. Native American tribal document					
individual's status or parole as long as that period of		<ol> <li>Driver's license issued by a Canadian government authority</li> </ol>	Citizen in the United States (Form I-179)				
endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or		For persons under age 18 who are unable to present a document listed above:	7. Employment authorization document issued by the Department of Homeland Security				
limitations identified on the form.		<b>10.</b> School record or report card	For examples, see <u>Section 7</u> and <u>Section 13</u> of the M-274 on				
<ol> <li>Passport from the Federated States of Micronesia (FSM) or the Republic of the</li> </ol>		<b>11.</b> Clinic, doctor, or hospital record	<u>uscis.gov/i-9-central</u> . The Form I-766, Employment				
Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI		<b>12.</b> Day-care or nursery school record	Authorization Document, is a List A, <b>Item</b> <b>Number 4.</b> document, not a List C document.				
	1	Acceptable Receipts	- L				
May be prese		t in lieu of a document listed above for a For receipt validity dates, see the M-274.					
<ul> <li>Receipt for a replacement of a lost, stolen, or damaged List A document.</li> </ul>	OR	Receipt for a replacement of a lost, stolen, or damaged List B document.	Receipt for a replacement of a lost, stolen, or damaged List C document.				
<ul> <li>Form I-94 issued to a lawful permanent resident that contains an I-551 stamp and a photograph of the individual.</li> </ul>		-					
<ul> <li>Form I-94 with "RE" notation or refugee stamp issued to a refugee.</li> </ul>							

\*Refer to the Employment Authorization Extensions page on <u>I-9 Central</u> for more information.