Form W-4 (2015)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2015 expires February 16, 2016. See Pub. 505, Tax Withholding and Estimated Tax.

Note. If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$1,050 and includes more than \$350 of unearned income (for example, interest and dividends).

Exceptions. An employee may be able to claim exemption from withholding even if the employee is a dependent, if the employee:

- Is age 65 or older,
- Is blind, or

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• Will claim adjustments to income; tax credits; or itemized deductions, on his or her tax return.

The exceptions do not apply to supplemental wages greater than \$1,000,000.

Basic instructions. If you are not exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the Personal Allowances Worksheet below. See Pub. 505 for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

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

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2015. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Future developments. Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at www.irs.gov/w4.

| | | Persoi | nal Allowances Works | heet (Keep for your records. |) | | | | | |
|----------------|--|---|--|--|------------------------|------------------------|--|--|--|--|
| A | Enter "1" for yo | ourself if no one else ca | n claim you as a dependent | · | | A | | | | |
| | ſ | You are single and h | nave only one job; or | |) | | | | | |
| В | Enter "1" if: | You are married, har | ve only one job, and your sp | oouse does not work; or | } . | В | | | | |
| | (| Your wages from a s | econd job or your spouse's v | wages (or the total of both) are \$1,5 | i00 or less. | | | | | |
| С | Enter "1" for your spouse. But, you may choose to enter "-0-" if you are married and have either a working spouse or more | | | | | | | | | |
| | than one job. (I | Entering "-0-" may help | you avoid having too little ta | ax withheld.) | | C | | | | |
| D | Enter number of | of dependents (other that | an your spouse or yourself) | you will claim on your tax return . | | D | | | | |
| E | Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above) . | | | | | | | | | |
| F | Enter "1" if you | u have at least \$2,000 of | child or dependent care e | expenses for which you plan to cl | aim a credit . | F | | | | |
| | (Note. Do not include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.) | | | | | | | | | |
| G | Child Tax Credit (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information. | | | | | | | | | |
| | • If your total income will be less than \$65,000 (\$100,000 if married), enter "2" for each eligible child; then less "1" if you | | | | | | | | | |
| | have two to four eligible children or less "2" if you have five or more eligible children. | | | | | | | | | |
| | • If your total inc | G | | | | | | | | |
| Н | Add lines A thro | Add lines A through G and enter total here. (Note. This may be different from the number of exemptions you claim on your tax return.) H | | | | | | | | |
| | _ | • If you plan to itemi | ze or claim adjustments to i | ncome and want to reduce your wi | thholding, see the | e Deductions | | | | |
| | For accuracy, | | Worksheet on page 2. | | | | | | | |
| | complete all worksheets | • If you are single a | and have more than one job or are married and you and your spouse both work and the combined obs exceed \$50,000 (\$20,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to | | | | | | | |
| | that apply. | avoid having too little tax withheld. | | | | | | | | |
| | | • If neither of the abo | ove situations applies, stop h | ere and enter the number from line | H on line 5 of Fo | rm W-4 below. | | | | |
| | | Separate here an | d give Form W-4 to your en | nployer. Keep the top part for you | r records | | | | | |
| | | • | | | | | | | | |
| Ганта | W-4 | Employ | ee's Withholding | g Allowance Certifica | ate | OMB No. 1545-0074 | | | | |
| Form Depart | tment of the Treasury | | | er of allowances or exemption from w | | 1 2015 | | | | |
| | al Revenue Service | • | <u> </u> | e required to send a copy of this form | | | | | | |
| 1 | Your first name | and middle initial | Last name | | 2 Your social | security number | | | | |
| | | | | | | | | | | |
| | Home address | (number and street or rural ro | ute) | | | at higher Single rate. | | | | |
| | | | | Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box. | | | | | | |
| | City or town, state, and ZIP code | | 4 If your last name differs from that | • | · . | | | | | |
| | | | | check here. You must call 1-800-772-1213 for a replacement card. ▶ | | | | | | |
| 5 | Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2) | | | | | | | | | |
| 6 | Additional amount, if any, you want withheld from each paycheck | | | | | | | | | |
| 7 | I claim exemption from withholding for 2015, and I certify that I meet both of the following conditions for exemption. | | | | | | | | | |
| | • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and | | | | | | | | | |
| | This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. | | | | | | | | | |
| | | | | <u> </u> | | | | | | |
| Unde | er penalties of pe | rjury, I declare that I have | examined this certificate and | , to the best of my knowledge and b | pelief, it is true, co | orrect, and complete. | | | | |
| Emp | loyee's signatur | 'e | | | | | | | | |
| (This | form is not valid | unless you sign it.) ▶ | | | Date ► | | | | | |

Employer identification number (EIN)

Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)

9 Office code (optional)

Form W-4 (2015) Page **2**

| Deductions and Adjustments Worksheet | | | | | | | | | | | | |
|--|--|-----------------------|---|-----------------------|--|-----------------------|-----------------------------|-----------------------|-----------------------|--|--|--|
| Note. Use this worksheet only if you plan to itemize deductions or claim certain credits or adjustments to income. | | | | | | | | | | | | |
| 1 | Enter an estimate of your 2015 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes, medical expenses in excess of 10% (7.5% if either you or your spouse was born before January 2, 1951) of your income, and miscellaneous deductions. For 2015, you may have to reduce your itemized deductions if your income is over \$309,900 and you are married filing jointly or are a qualifying widow(er); \$284,050 if you are head of household; \$258,250 if you are single and not | | | | | | | | | | | |
| | head of household or a qualifying widow(er); or \$154,950 if you are married filing separately. See Pub. 505 for details | | | | | | | | | | | |
| • | | 9,250 if head | | alliying widow | v(er) | | | 2 \$ | | | | |
| 2 | | | or married filing sepa | rotoly | | | | 2 \$ | | | | |
| 2 | | 3 \$ | | | | | | | | | | |
| 3 4 | Subtract line 2 from line 1. If zero or less, enter "-0-" | | | | | | | | | | | |
| 4 5 | | 4 \$ | | | | | | | | | | |
| 5 | Add lines 3 and 4 and enter the total. (Include any amount for credits from the Converting Credits to Withholding Allowances for 2015 Form W-4 worksheet in Pub. 505.) | | | | | | | | | | | |
| 6 | Withholding Allowances for 2015 Form W-4 worksneet in Pub. 505.) | | | | | | | | | | | |
| 7 | | | | | | | | 6 \$ 7 \$ | | | | |
| 8 | Subtract line 6 from line 5. If zero or less, enter "-0-" | | | | | | | | | | | |
| 9 | | | | | t, line H, page 1 | | | 9 — | | | | |
| 10 | | | | | the Two-Earners/Mul | | | — | | | | |
| | | | | | d enter this total on Fo | | | 10 | | | | |
| | | | | | : (See Two earners o | | | | | | | |
| Note | | | the instructions under | | | or manapie j | 0.00 0.1 pa | 90 11/ | | | | |
| 1 | | - | | • | ed the Deductions and A | diustments Wo | orksheet) | 1 | | | | |
| 2 | | | . • . | - | ST paying job and en | = | • | _ | | | | |
| | you are marri | ed filing jointl | | highest pay | ing job are \$65,000 or | less, do not e | | 2 | | | | |
| 3 | | ore than or | equal to line 2. subti | | om line 1. Enter the re | | ero. enter | | | | | |
| • | | | | | of this worksheet | | | 3 | | | | |
| Note. | | | · - | | age 1. Complete lines | | | _ | | | | |
| | | | olding amount necess | | | J | | | | | | |
| 4 | Enter the nun | nber from line | 2 of this worksheet | | | 4 | | | | | | |
| 5 | | | | | | 5 | | | | | | |
| 6 | | | | | | | | 6 | | | | |
| 7 | Find the amo | unt in Table 2 | 2 below that applies to | the HIGHE | ST paying job and ente | r it here . | | 7 \$ | | | | |
| 8 | | | | | additional annual withh | | | 8 \$ | | | | |
| 9 | Divide line 8 b | y the number | of pay periods remainir | ng in 2015. Fo | r example, divide by 25 | if you are paid | every two | | | | | |
| | | | | | nere are 25 pay periods | | | | | | | |
| | the result here | | | is is the addit | ional amount to be withh | | | 9 \$ | | | | |
| | | Tab | le 1 | | | Tal | ble 2 | | | | | |
| ı | Married Filing | Jointly | All Others | | Married Filing Jointly | | All Other | | rs | | | |
| | s from LOWEST ob are— | Enter on line 2 above | If wages from LOWEST paying job are— | Enter on line 2 above | If wages from HIGHEST paying job are— | Enter on line 7 above | If wages from paying job ar | | Enter on line 7 above | | | |
| | \$0 - \$6,000 | 0 | \$0 - \$8,000 | 0 | \$0 - \$75,000 | \$600 | | - \$38,000 | \$600 | | | |
| | 01 - 13,000 01 - 24,000 | 1 2 | 8,001 - 17,000 17,001 - 26,000 | 1 2 | 75,001 - 135,000 135,001 - 205,000 | 1,000 1,120 | | - 83,000 - 180,000 | 1,000 1,120 | | | |
| 24,0 | 01 - 26,000 | 3 | 26,001 - 34,000 | 3 | 205,001 - 360,000 | 1,320 | 180,001 | - 395,000 | 1,320 | | | |
| | 26,001 - 34,000 4 34,001 - 44,000 5 | | 34,001 - 44,000 44,001 - 75,000 | 4 5 | 360,001 - 405,000 | 1,400 | 395,001 a | and over | 1,580 | | | |
| 44,0 | 44,001 - 50,000 6 | | 75,001 - 85,000 | 6 7 | 405,001 and over | 1,580 | | | | | | |
| | 01 - 65,000 01 - 75,000 | 7 8 | 85,001 - 110,000 110,001 - 125,000 | 7 8 | | | | | | | | |
| | 01 - 75,000 | 9 | 125,001 - 125,000 | 9 | | | | | | | | |
| | 01 - 100,000 | 10 | 140,001 and over | 10 | | | | | | | | |
| | 01 - 115,000 01 - 130,000 | 11 12 | | | | | | | | | | |
| 130,0 | 01 - 140,000 01 - 150,000 | 13 14 | | | | | | | | | | |

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person who claims no withholding allowances; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

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150,001 and over

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.