Form W-4 Department of the Treasury Internal Revenue Service		Employee's Withholding Certificate 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. Your withholding is subject to review by the IRS.		OMB No. 1545-0074		
Step 1: Enter Personal	(a) F	Trst name and middle initial	Last name	Does	your name match the on your social security of not, to ensure you get	
Information		City or town, state, and ZIP code			edit for your earnings, ontact SSA at 800-772-1213 go to www.ssa.gov.	
	(c)	Single or Married filing separately Married filing jointly or Qualifying Head of household (Check only if y			•	

TIP: Consider using the estimator at www.irs.gov/W4App to determine the most accurate withholding for the rest of the year if: you are completing this form after the beginning of the year; expect to work only part of the year; or have changes during the year in your marital status, number of jobs for you (and/or your spouse if married filling jointly), dependents, other income (not from jobs), deductions, or credits. Have your most recent pay stub(s) from this year available when using the estimator. At the beginning of next year, use the estimator again to recheck your withholding.

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.

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 only one of the following.		
Works	(a) Use the estimator at www.irs.gov/W4App for the 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.)

higher paying job. Otherwise, (b) is more accurate

Step 3:	If your total income will be \$200,000 or less (\$400,000 or less if married filing jointly):		
Claim	Multiply the number of qualifying children under age 17 by \$2,000 \$	i	
Dependent and Other	Multiply the number of other dependents by \$500		
Credits	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):	(a) Other income (not from jobs). If you want tax withheld for other income you expect this year that won't have withhelding, enter the amount of other income here.		· ·
Other	This may include interest, dividends, and retirement income	4(a)	\$
Adjustments	(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 the result here	4(b)	æ
			Ψ
	(c) Extra withholding. Enter any additional tax you want withheld each pay period	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.)	<u> </u>	Date		
Employers Only	Employer's name and address	First date of employment	Employer identification number (EIN)		

CLGS-32-6 (05/17)



RESIDENCY CERTIFICATION FORM Local Earned Income Tax Withholding

TO EMPLOYERS/TAXPAYERS:

This form is to be used by employers and taxpayers to report essential information for the collection and distribution of Local Earned Income Taxes to the local EIT collector. This form must be used by employers when a new employee is hired or when a current employee notifies employer of a name or address change. Use the Address Search Application at dced.pa.gov/Act32 to determine PSD codes, EIT rates, and tax collector contact information.

EMI	PLOYEE INFORMATI	ON - RES	IDENCE LOCATION	N. And State of State
NAME (Last Name, First Name, Middle Initial)				SOCIAL SECURITY NUMBER
			de la companya de la	
STREET ADDRESS (No PO Box, RD or RR)				
	the contract of	1.4	1.61.27.2	the second section of the second
ADDRESS LINE 2				
The second se	ed in a real sector i			
CITY		STATE	ZIP CODE	DAYTIME PHONE NUMBER
Children Children St. C. Baller	and the second	10 - N	And a second second second	
MUNICIPALITY (City, Borough or Township)				an a
COUNTY		RESIDENT	PSD CODE	TOTAL RESIDENT EIT RATE
and an any second se		CALIFORNIA SANDERSON DE LA CALIFORNIA DE LA	Contraction of the Contraction o	And a second statement of the second statement of the second second second second second second second second s

ALL DE LEVEL DE LEVEL	EMPLOYER IN	ORMATION - EMPL	OYMENT LOCAT	ION	11
EMPLOYER BUSINESS NAME (Use Federal ID Name)			EMPLOYER FEIN		
STREET ADDRESS WHERE	ABOVE EMPLOYEE REPORTS TO	WORK (No PO Box, RD or R	R)	du j	
ADDRESS LINE 2					_
CITY	States and the second	STATE	ZIP CODE	PHONE NUMBER	
MUNICIPALITY (City, Boroug	h or Township)				
COUNTY	1.000 (1.000 (1.000 (1.000))) 1	WORK LOCA	ATION PSD CODE	WORK LOCATION NON-RESIDENT EIT R	ATE

	CERTIFICATION	
	of perjury, I (we) declare that I (we) have examined this info es and statements and to the best of my (our) belief, they ar	
SIGNATURE OF EMPLOYEE		DATE (MM/DD/YYYY)
PHONE NUMBER	EMAIL ADDRESS	

For information on obtaining the appropriate MUNICIPALITY (City, Borough, Township), PSD CODES, and EIT (Earned Income Tax) RATES, please refer to the Pennsylvania Department of Community & Economic Development website:

dced.pa.gov/Act32