

Separate here and give Form W-4 to your employer. Keep the top part for your records.

Form **W-4**  
Department of the Treasury  
Internal Revenue Service

## Employee's Withholding Allowance Certificate

OMB No. 1545-0074

**2024**

▶ Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.

<b>1</b> Your first name and middle initial <b>John D.</b>		Last name <b>Doe</b>		<b>2</b> Your social security number <b>123-45-6789</b>	
Home address (number and street or rural route) <b>123 Main St. #456</b>				<b>3</b> <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold 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 <b>Collegetown, MA 54321</b>				<b>4</b> If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. ▶ <input type="checkbox"/>	
<b>5</b> Total number of allowances you are claiming (from line <b>H</b> above or from the applicable worksheet on page 2)				<b>5</b> <b>1</b>	
<b>6</b> Additional amount, if any, you want withheld from each paycheck				<b>6</b> \$ <b>NRA</b>	
<b>7</b> I claim exemption from withholding for 2012, and I certify that I meet <b>both</b> of the following conditions for exemption. • Last year I had a right to a refund of <b>all</b> federal income tax withheld because I had <b>no</b> tax liability, <b>and</b> • This year I expect a refund of <b>all</b> federal income tax withheld because I expect to have <b>no</b> tax liability. If you meet both conditions, write "Exempt" here . . . . . ▶ <b>7</b>					
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.					
Employee's signature (This form is not valid unless you sign it.) ▶ <b>John Doe</b>				Date ▶ <b>06/10/2024</b>	
<b>8</b> Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)				<b>9</b> Office code (optional)	
				<b>10</b> Employer identification number (EIN)	

For Privacy Act and Paperwork Reduction Act Notice, see page 2.

Cat. No. 10220Q

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