FORM VA-4

COMMONWEALTH OF VIRGINIA DEPARTMENT OF TAXATION PERSONAL EXEMPTION WORKSHEET

(See back for instructions)

2.	If you wish to claim yourself, write "1"						
			(add lines 1 through 3)				
5.	Exemptions for age						
	(a) If you will be 65 or older on January 1, write "1"						
	will be 65 or older on January 1, write "1"						
6.	Exemptions for blindness						
	(a) If you are legally blind, write "1"						
	spouse is legally blind, write "1"						
7.	7. Subtotal exemptions for age and blindness (add lines 5 through 6)						
8.	Total of Exemptions - add line 4 and line 7						
		OYEE'S VII	RGINIA INCOME TAX WIT	mployer. Keep the top portion f			
Str	reet Address	1					
Cit	tv			State	Zip Code		
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	(a) Subtotal o	olding, enter of Personal E	the number of exemptions exemptions - line 4 of the	claimed on:			
		Subtotal of Exemptions for Age and Blindness line 7 of the Personal Exemption Worksheet					
	(c) Total Exemptions - line 8 of the Personal Exemption Worksheet						
2.	Enter the amount of additional withholding requested (see instructions)						
	I certify that I am not subject to Virginia withholding. I meet the conditions set forth in the instructions(check here)						
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						
				(che	ck here)		
Sign	nature				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. Note: 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).