Form **W-4**

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.

2021

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Step 1:	(a) First name and middle initial	Last name		(b) So	cial security number
Enter Personal Information	Address			name o	your name match the on your social security f not, to ensure you get
					or your earnings, contact 800-772-1213 or go to
	(c) Single or Married filing separately Married filing jointly or Qualifying widow(er Head of household (Check only if you're unmarried)		of keeping up a home for yo		
	ps 2–4 ONLY if they apply to you; otherw on from withholding, when to use the estima			n on e	ach step, who can
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 Works	Do only one of the following.				
	(a) Use the estimator at www.irs.gov/W4App for most accurate withholding for this step (and Steps 3–4); or				
	(b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; 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 accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld ▶ □				
	TIP: To be accurate, submit a 2021 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.				
	ps 3–4(b) on Form W-4 for only ONE of the ate if you complete Steps 3–4(b) on the Form			bs. (Yo	ur withholding will
Step 3:	If your total income will be \$200,000	or less (\$400,000 or less if ma	arried filing jointly):		
Claim Dependents	Multiply the number of qualifying o	children under age 17 by \$2,000)▶ \$		
	Multiply the number of other dep	endents by \$500	\$		
	Add the amounts above and enter the	e total here		3	\$
Step 4 (optional): Other Adjustments	(a) Other income (not from jobs). If this year that won't have withhold include interest, dividends, and ref	ing, enter the amount of other	income here. This may		\$
	(b) Deductions. If you expect to cland want to reduce your withhole enter the result here			4(b)	\$
	(c) Extra withholding. Enter any additional tax you want withheld each pay period .			4(c)	\$
Step 5: Sign	Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.				
Here	Employee's signature (This form is not valid unless you sign it.)			ite	
Employers Only	Employer's name and address		1	Employenumber	er identification (EIN)