Instructions for employee withholding certificate

Dependents - To qualify as your dependent (line 7a) a person must qualify as your dependent as provided in the Federal Internal Revenue Code.

Changes in Exemptions - You should file a new certificate any time the number of your exemptions increases. You must file a new certificate within 10 days if the number of exemptions previously claimed by you DECREASES.

Other Decreases - in exemptions, such as the death of a spouse or dependent, do not affect your withholdings until the next year but require the filing of a new certificate by December 1 of the year in which they occur.

Change of Residence - You must file a new certificate within 10 days after you change your residence from or to a taxing city.

Additional withheld - You may designate additional withholding if you expect to owe more than the amount withheld.

CITY OF Springfield

EMPLOYEES WITHOLDING CERTIFICATE
FOR THE CITY OF SPRINGFIELD INCOME TAX

SF W-4

1. Print full name	2. Social Security Number	3. Springfield Resident? Yes ○ No ○

4. Address	City, Township or Village where you reside	State	Zip Code

Employee - File this form with your employer, otherwise your employer must withhold Springfield income tax from your earnings without exemptions.

Employer - Keep this certificate with your records. If the information submitted by the employee is not believed to be true, correct and complete, the Springfield Income Tax Department must be so advised.

Check boxes that apply

	Regular Exemption	Age 65 & older or Disabled	Blind	Deaf	Enter number of exemptions checked
5. Exemptions for yourself:	☐	☐	☐	☐	
6. Exemptions for your spouse:	☐	☐	☐	☐	Enter number of exemptions checked

7a. Exemptions for your children Number ☐   7b. Exemptions for your other dependents Number ☐   Enter total of line 7 (a plus b)

8. Add the number of exemptions which you have claimed on lines 5, 6, 7 a & b above and write the total.   **Total**

8. Additional amount you want deducted from each pay (if employer agrees)

I certify that the information submitted on this certificate is true, correct and complete to the best of my knowledge and belief.

Date   Signature