We must have the following to complete the employee enrollment:

- 1. Temporary Employment Contract
- 2. 1-9
- 3. Federal W-4

We hope you will consider adding additional staff at the normal fee structure. Hopefully, this will demonstrate how easy it is to do things the right way and only pay wages on the approved payroll platform.

For help completing these forms or to add staff, please contact the payroll manager, Jean Burger at:

Direct: 980-395-3900

jburger@paygoplus.com

# HOW EMPLOYERS CAN AVOID TROUBLE

by Syndicated Insurance Resources | Oct 10, 2018

Let us help you avoid threats to the long term survival of your business.



We live in a world that has rules, regulations, and laws that are designed to help us work together symbiotically in all aspects of life — from business to our personal lives.

Like most of us, you've heard the sayings: "rules were made to be broken" or "coloring outside the lines." In theory, these types of approaches may sound great.

These concepts may evoke mental pictures of doing whatever it takes to "get the job done," regardless of set parameters and guidelines.
Unfortunately, the practice of rule breaking can only lead to problems.
Why? Well, on the other side of "rules were made to be broken" there's this saying: "don't let your sins find you out."

## Rules in Business Are Important to Success

In business, compliance helps organizations and their employees grow. They are designed to help with accountability, safety, job security, and protection of rights.

Imagine if you will, an employer who doesn't follow the rules and regulations surrounding workers compensation. When you think about that scenario—which you may have already experienced first- hand—you can quickly see how havoc, chaos, and turmoil can evolve.

Now apply that same logic to how employers pay their employees.

## Standards for Paying Employers and Contractors

Most businesses have paperwork and procedures in place to ensure their employees and contractors receive the correct benefits and payments. The onboarding process is systematic and brings many benefits from engaging team members to building trust and boosting business growth. It makes sense to have a straightforward process in place for paying the people hired to do a job. When you do, people are eager to help you achieve the project or goal you've enlisted their support to accomplish. So why would any employer want to pay someone "under the table?" It may have never occurred to you, but some employers pay the people that work for them in this discrete and non-visible way.

# Results from Paying Workers "Under the Table"

There are several reasons that employers are tempted to pay employees in "under the table" or with cash-only. They could want to avoid:

- Withholding payroll taxes
- · Workers' comp insurance
- Employee documentation (e.g., immigrants without proper work visas)
- · Administrative record-keeping
- Paying for benefits

"Under the table" or "off the record"—no matter what name you use, it is against the law. If you are caught doing this, the consequences are severe. As an employer, you are responsible for knowing how the practice of under the table payments could impact your company.

Employers could be impacted by potential:

- · Criminal prosecution
- IRS audits and penalties
- State audits and penalties
- Injuries to "under the table" employees, which may not be covered
- Employment practices claims from employees

- Problems gathering records in the event the employer faces litigation or criminal investigation
- and much more...

## How You Can Get Compliant

We want to go the extra mile and do everything possible to keep our employers from getting into trouble. A few things to consider;

- Did you know that signing up and getting a Certificate Of Insurance is only the first step in addressing your obligation as an employer?
- Since you've signed up, you haven't reported any payroll. Are you just not working?
- Do your workers meet the <u>definition of a 1099 contractor?</u>
- Did you know that not filing payroll for your workers can result in your business being shut down?

We can work with your broker to address any questions or concerns. We have a team of professionals that provide consultation and resources dedicated to ensuring compliance. Depending on the circumstances, we have multiple products and services directed to employers.

Don't fall into the non-compliance trap.

We want to help guide our employer clients about the various possibilities and offering solutions that can save them from a hornet's nest of problems.

For small contractors, Staff Pro Plus helps you manage a fluid workforce. (But remember that subscribing to the service is just the beginning of the process.)

For larger clients with permanent staff, we can offer multiple tailored PEO solutions or traditional workers' compensation. We can also offer Human Resource products and services to address employer needs comprehensively.

## **Temporary Employment Contract**

This Temporary Employment Contract is between DB Staff Pro Inc., 150 Georgia Avenue E, Suite B, Fayetteville, Georgia 30214 (hereinafter referred to as "the Company") and

Employee Name:			

(hereinafter referred to as "the Temporary Employee").

The terms of this Temporary At-Will Employment Contract are as set forth below:

#### 1. GENERAL TERMS

- a. This is not a permanent employment contract and under no circumstances may it be construed as such.
- b. As per the previous point, the Company is not liable to register the Temporary Employee for any statutory deductions normally related to permanent staff.
- c. The Temporary Employee will be informed in advance should the Temporary Employees services be required.
- d. The Temporary Employee is hereby notified that should any payments under this contract be considered taxable income, such payments will be reported to the Internal Revenue Service (IRS).

#### 2. TERMS OF WORK

- a. The Temporary Employee shall perform work as required by the Company either on odd days, weekends or full time and may be required to work overtime. This shall not be construed as a permanent relationship.
- b. The Temporary Employee may be required to perform work in place of another employee on a casual or temporary basis, as a relief for the duration of the job or during the absence of another employee. This temporary Contract shall automatically terminate upon the return of the permanent employee, when the job is done or should the requirements of the Company change.
- c. The Temporary Employee shall at all times abide by the safety rules, regulations and working conditions of the Company and maintain the highest standard of professionalism and workmanship in accordance with Company Policy.
- d. Should the labor requirement be reduced for any reason whatsoever, it will be at the employer's discretion as to how the work will be allocated and to whom. These decisions will be based on performance and not necessarily the length of service.
- e. The Temporary Employee will be informed in advance should the Temporary Employees services be required.
- f. A daily time sheet will be kept and the Temporary Employee will only be compensated for time worked.

#### 3. TERMINATION OF CONTRACT

a. Either the Temporary Employee or the Employer may end the contract for any reason by giving appropriate written notice of termination.

b. Should the Temporary Employee wish to terminate this contract, The Temporary Employee will only be entitled to receive pay for the hours that Temporary Employee worked.

c. Should the Temporary Employee be found guilty of violating the Company's Policies and Procedures, then the Temporary Employee will be disciplined accordingly and the Contract could be terminated immediately.

d. Any and all disputes or claims between the Company and the Temporary Employee arising out of this contract shall be resolved by submission of the same to a private mediation council of the Company's choice for resolution.

#### 4. PAYMENT

- a. The Company shall compensate the Temporary Employee for the services at \$10.00 per hour.
- b. Temporary Employee will be paid for only the services Temporary Employee provides to Company. If Temporary Employee withdraws the Temporary Employees services for whatever reason, Temporary Employee is not due any payment from Company for work not performed.
- c. The Temporary Employee will receive payment for services within two weeks of completing the required services. Should the Temporary Employees assistance be required for a period of more than two weeks, the Company will remit payment for services completed at least every two weeks as necessary to deliver full compensation.

#### 6. GOVERNING LAW

This Contract shall be construed under and in accordance with the laws of the Georgia.

#### 7. VERIFICATION

By signing below, the Temporary Employee certifies under the penalty of perjury that the name and address given is the Temporary Employees legal name, address and identification number. The Temporary Employee further indicates this Contract has been read in its entirety and the Temporary Employee clearly understands the expectations and responsibilities of the temporary position.

#### 8. TEMPORARY EMPLOYEE HAS NO HIRING AUTHORITY.

Warning - If an employee is added after a workers' compensation injury, the claim will be denied.

It is imperative that you add employees, prior to allowing them to work.

The system generates a time stamp which will be compared to the time of the claim. You must pay the new hire fee and complete the new hire kit to complete the process. If you don't have a current new hire kit, please contact your payroll manager.

Workers' Compensation will not be effective until you complete the process and we notify you that all information is received and the employee is active.

Coverage will not extend to uninsured subcontractors and only applies to employees processed through our payroll platform.

#### 9. SIGNATORIES.

This Contract shall be signed on behalf of DB Staff Pro Inc. by Jean Burger, Payroll Administrator - DB Staff Pro and by

(INSERT EMPLOYEE PRINTED NAME ABOVE)

This Contract shall be effective immediately upon the signature of both parties.

TEMPORARY EMPLOYEE:

TEMPORARY EMPLOYEE SIGNATURE

DB Staff Pro Inc. Date

By Jean Burger, its Payroll Administrator - DB Staff Pro



## Employment Eligibility Verification

Department of Homeland Security U.S. Citizenship and Immigration Services

USCIS Form I-9 OMB No. 1615-0047 Expires 08/31/2019

▶ START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

**ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Last Name (Family Name)	t before accepting a job offer.)  First Name (Given Name)			Middle Initial	Other	Other Last Names Used (if any)		
Address (Street Number and	Name)	Apt. N	lumber	City or Town	or Town			ZIP Code
Date of Birth (mm/dd/yyyy)	curity Number Employee's E-mail Ac			ldress		Employee's Telephone Number		
am aware that federal la connection with the com attest, under penalty of	pletion of this	form.				or use o	of false do	ocuments in
1. A citizen of the United		am (oncon onc	1					
2. A noncitizen national of	of the United State	s (See instruction	ns)					
3. A lawful permanent re	sident (Alien Re	gistration Number	er/USCIS	Number):				
4. An alien authorized to								
Some aliens may write								
Alien Registration Numb     OR     Form I-94 Admission Nu					_			
OR 3. Foreign Passport Numb	er:							
	er:							
Foreign Passport Numb     Country of Issuance:	er:				Today's Da	te (mm/a	ld/yyyy)	
3. Foreign Passport Numb Country of Issuance: Signature of Employee  Preparer and/or Tra I did not use a preparer of (Fields below must be contacted attest, under penalty of	nslator Certi r translator.  npleted and sign	A preparer(s) and when prepared when prepared have assisted	and/or tran	slator(s) assiste d/or translators	d the employee in	oyee in	ting Section	g Section 1.)
3. Foreign Passport Numb Country of Issuance:  Signature of Employee  Preparer and/or Tra  I did not use a preparer of (Fields below must be cord attest, under penalty of knowledge the informatic	nslator Certi r translator.  npleted and sigr perjury, that I on is true and	A preparer(s) and when prepared when prepared have assisted	and/or tran	slator(s) assiste d/or translators	d the employee in	ocomplei loyee in	ting Section	g Section 1.) to the best of m
3. Foreign Passport Numb Country of Issuance: Signature of Employee  Preparer and/or Tra  I did not use a preparer of (Fields below must be continued)	nslator Certi r translator.  npleted and sigr perjury, that I on is true and	A preparer(s) and when prepared when prepared have assisted	and/or tran	slator(s) assiste d/or translators ompletion of	d the employee in	completed oyee in the state of	ting Section completin	g Section 1.) to the best of m



Employer Completes Next Page





#### Employment Eligibility Verification

Department of Homeland Security U.S. Citizenship and Immigration Services

USCIS Form I-9 OMB No. 1615-0047 Expires 08/31/2019

#### Section 2. Employer or Authorized Representative Review and Verification (Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents.") Citizenship/Immigration Status Last Name (Family Name) First Name (Given Name) Employee Info from Section 1 OR List B AND List C I ist A **Identity and Employment Authorization** Identity **Employment Authorization** Document Title Document Title Document Title Issuing Authority Issuing Authority Issuing Authority Document Number Document Number Document Number Expiration Date (if any)(mm/dd/yyyy) Expiration Date (if any)(mm/dd/yyyy) Expiration Date (if any)(mm/dd/yyyy) Document Title QR Code - Sections 2 & 3 Additional Information Issuing Authority Do Not Write In This Space Document Number Expiration Date (if any)(mm/dd/yyyy) Document Title Issuing Authority Document Number Expiration Date (if any)(mm/dd/yyyy) Certification: I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States. The employee's first day of employment (mm/dd/yyyy): (See instructions for exemptions) Title of Employer or Authorized Representative Signature of Employer or Authorized Representative Today's Date (mm/dd/yyyy) First Name of Employer or Authorized Representative Employer's Business or Organization Name Last Name of Employer or Authorized Representative State Employer's Business or Organization Address (Street Number and Name) ZIP Code City or Town Section 3. Reverification and Rehires (To be completed and signed by employer or authorized representative.) B. Date of Rehire (if applicable) A. New Name (if applicable) Middle Initial Date (mm/dd/yyyy) Last Name (Family Name) First Name (Given Name)

Document Title

Document Number

Expiration Date (if any) (mm/dd/yyyy)

I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States. and if

C. If the employee's previous grant of employment authorization has expired, provide the information for the document or receipt that establishes

the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative

Today's Date (mm/dd/yyyy)

Name of Employer or Authorized Representative

continuing employment authorization in the space provided below.

# LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

	LIST A  Documents that Establish  Both Identity and  Employment Authorization	OR	LIST B  Documents that Establish Identity  AN	1D	LIST C Documents that Establish Employment Authorization
2.	U.S. Passport or U.S. Passport Card  Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye	1.	A Social Security Account Number card, unless the card includes one of the following restrictions:  (1) NOT VALID FOR EMPLOYMENT
	Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa  Employment Authorization Document		color, and address  ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address  School ID card with a photograph		(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION  (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION  Contification of report of birth issued.
	that contains a photograph (Form I-766)				Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)
5.	For a nonimmigrant alien authorized to work for a specific employer because of his or her status:  a. Foreign passport; and b. Form I-94 or Form I-94A that has		4. Voter's registration card	3.	Original or certified copy of birth certificate issued by a State,
		7	5. U.S. Military card or draft record		county, municipal authority, or territory of the United States bearing an official seal
			6. Military dependent's ID card	4	Native American tribal document
	the following: (1) The same name as the passport;		7. U.S. Coast Guard Merchant Mariner Card		U.S. Citizen ID Card (Form I-197)
	and  (2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		3. Native American tribal document		Identification Card for Use of
		- 100000	<ol> <li>Driver's license issued by a Canadian government authority</li> </ol>		Resident Citizen in the United States (Form I-179)
			For persons under age 18 who are unable to present a document listed above:	7.	Employment authorization document issued by the Department of Homeland Security
6.	Passport from the Federated States of Micronesia (FSM) or the Republic of		10. School record or report card		
	the Marshall Islands (RMI) with Form		11. Clinic, doctor, or hospital record		
	I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI		12. Day-care or nursery school record		

Examples of many of these documents appear in Part 13 of the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.

## Form W-4 (2018)

**Future developments.** For the latest information about any future developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

**Purpose.** Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

**Exemption from withholding.** You may claim exemption from withholding for 2018 if **both** of the following apply.

- For 2017 you had a right to a refund of **all** federal income tax withheld because you had **no** tax liability, **and**
- For 2018 you expect a refund of **all** federal income tax withheld because you expect to have **no** tax liability.

If you're exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2018 expires February 15, 2019. See Pub. 505, Tax Withholding and Estimated Tax, to learn more about whether you qualify for exemption from withholding.

#### **General Instructions**

If you aren't exempt, follow the rest of these instructions to determine the number of withholding allowances you should claim for withholding for 2018 and any additional amount of tax to have withheld. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

You can also use the calculator at www.irs.gov/W4App to determine your tax withholding more accurately. Consider using this calculator if you have a more complicated tax situation, such as if you have a working spouse, more than one job, or a large amount of nonwage income outside of your job. After your Form W-4 takes effect, you can also use this calculator to see how the amount of tax you're having withheld compares to your projected total tax for 2018. If you use the calculator, you don't need to complete any of the worksheets for Form W-4.

Note that if you have too much tax withheld, you will receive a refund when you file your tax return. If you have too little tax withheld, you will owe tax when you file your tax return, and you might owe a penalty.

Filers with multiple jobs or working spouses. If you have more than one job at a time, or if you're married and your spouse is also working, read all of the instructions including the instructions for the Two-Earners/Multiple Jobs Worksheet before beginning.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals.

Otherwise, you might owe additional tax.

Or, you can use the Deductions,
Adjustments, and Other Income Worksheet on page 3 or the calculator at www.irs.gov/W4App to make sure you have enough tax withheld from your paycheck. If you have pension or annuity income, see Pub. 505 or use the calculator at www.irs.gov/W4App to find out if you should adjust your withholding on Form W-4 or W-4P.

Nonresident alien. If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

#### Specific Instructions

#### Personal Allowances Worksheet

Complete this worksheet on page 3 first to determine the number of withholding allowances to claim.

Line C. Head of household please note: Generally, you can claim head of household filing status on your tax return only if you're unmarried and pay more than 50% of the costs of keeping up a home for yourself and a qualifying individual. See Pub. 501 for more information about filing status.

Line E. Child tax credit. When you file your tax return, you might be eligible to claim a credit for each of your qualifying children. To qualify, the child must be under age 17 as of December 31 and must be your dependent who lives with you for more than half the year. To learn more about this credit, see Pub. 972, Child Tax Credit. To reduce the tax withheld from your pay by taking this credit into account, follow the instructions on line E of the worksheet. On the worksheet you will be asked about your total income. For this purpose, total income includes all of your wages and other income, including income earned by a spouse, during the year.

Line F. Credit for other dependents. When you file your tax return, you might be eligible to claim a credit for each of your dependents that don't qualify for the child tax credit, such as any dependent children age 17 and older. To learn more about this credit, see Pub. 505. To reduce the tax withheld from your pay by taking this credit into account, follow the instructions on line F of the worksheet. On the worksheet, you will be asked about your total income. For this purpose, total income includes all of

Separate here and give Form W-4 to your employer. Keep the worksheet(s) for your records. **Employee's Withholding Allowance Certificate** OMB No. 1545-0074 Form ▶ Whether you're entitled to claim a certain number of allowances or exemption from withholding is Department of the Treasury subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS. Internal Revenue Service Your social security number Your first name and middle initial Last name 3 Single Married Home address (number and street or rural route) Married, but withhold at higher Single rate. Note: If married filing separately, check "Married, but withhold at higher Single rate." City or town, state, and ZIP code 4 If your last name differs from that shown on your social security card, check here. You must call 800-772-1213 for a replacement card. Total number of allowances you're claiming (from the applicable worksheet on the following pages) 5 6 \$ Additional amount, if any, you want withheld from each paycheck . . . . . . . . . . . . . . . I claim exemption from withholding for 2018, and I certify that I meet both of the following conditions for exemption. · Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. 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.) ▶ Date > 8 Employer's name and address (Employer: Complete boxes 8 and 10 if sending to IRS and complete boxes 8, 9, and 10 if sending to State Directory of New Hires.) 9 First date of 10 Employer identification number (EIN) employment

Form W-4 (2018) Page **2** 

your wages and other income, including income earned by a spouse, during the year.

Line G. Other credits. You might be able to reduce the tax withheld from your paycheck if you expect to claim other tax credits, such as the earned income tax credit and tax credits for education and child care expenses. If you do so, your paycheck will be larger but the amount of any refund that you receive when you file your tax return will be smaller. Follow the instructions for Worksheet 1-6 in Pub. 505 if you want to reduce your withholding to take these credits into account.

## Deductions, Adjustments, and Additional Income Worksheet

Complete this worksheet to determine if you're able to reduce the tax withheld from your paycheck to account for your itemized deductions and other adjustments to income such as IRA contributions. If you do so, your refund at the end of the year will be smaller, but your paycheck will be larger. You're not required to complete this worksheet or reduce your withholding if you don't wish to do so.

You can also use this worksheet to figure out how much to increase the tax withheld from your paycheck if you have a large amount of nonwage income, such as interest or dividends.

Another option is to take these items into account and make your withholding more accurate by using the calculator at www.irs.gov/W4App. If you use the calculator, you don't need to complete any of the worksheets for Form W-4.

# Two-Earners/Multiple Jobs Worksheet

Complete this worksheet if you have more

than one job at a time or are married filing jointly and have a working spouse. If you don't complete this worksheet, you might have too little tax withheld. If so, you will owe tax when you file your tax return and might be subject to a penalty.

Figure the total number of allowances you're entitled to claim and any additional amount of tax to withhold on all jobs using worksheets from only one Form W-4. Claim all allowances on the W-4 that you or your spouse file for the highest paying job in your family and claim zero allowances on Forms W-4 filed for all other jobs. For example, if you earn \$60,000 per year and your spouse earns \$20,000, you should complete the worksheets to determine what to enter on lines 5 and 6 of your Form W-4, and your spouse should enter zero ("-0-") on lines 5 and 6 of his or her Form W-4. See Pub. 505 for details.

Another option is to use the calculator at www.irs.gov/W4App to make your withholding more accurate.

Tip: If you have a working spouse and your incomes are similar, you can check the "Married, but withhold at higher Single rate" box instead of using this worksheet. If you choose this option, then each spouse should fill out the Personal Allowances Worksheet and check the "Married, but withhold at higher Single rate" box on Form W-4, but only one spouse should claim any allowances for credits or fill out the Deductions, Adjustments, and Additional Income Worksheet.

#### Instructions for Employer

Employees, do not complete box 8, 9, or 10. Your employer will complete these boxes if necessary.

New hire reporting. Employers are

required by law to report new employees to a designated State Directory of New Hires. Employers may use Form W-4, boxes 8, 9, and 10 to comply with the new hire reporting requirement for a newly hired employee. A newly hired employee is an employee who hasn't previously been employed by the employer, or who was previously employed by the employer but has been separated from such prior employment for at least 60 consecutive days. Employers should contact the appropriate State Directory of New Hires to find out how to submit a copy of the completed Form W-4. For information and links to each designated State Directory of New Hires (including for U.S. territories), go to www.acf.hhs.gov/programs/css/ employers.

If an employer is sending a copy of Form W-4 to a designated State Directory of New Hires to comply with the new hire reporting requirement for a newly hired employee, complete boxes 8, 9, and 10 as follows.

Box 8. Enter the employer's name and address. If the employer is sending a copy of this form to a State Directory of New Hires, enter the address where child support agencies should send income withholding orders.

Box 9. If the employer is sending a copy of this form to a State Directory of New Hires, enter the employee's first date of employment, which is the date services for payment were first performed by the employee. If the employer rehired the employee after the employee had been separated from the employer's service for at least 60 days, enter the rehire date.

**Box 10.** Enter the employer's employer identification number (EIN).

Personal Allowances Worksheet (Keep for y	our records.)	
A Enter "1" for yourself		A
B Enter "1" if you will file as married filing jointly		В
C Enter "1" if you will file as head of household		c
• You're single, or married filing separately, and have only one job; of		
D Enter "1" if:   You're married filling jointly, have only one job, and your spouse do		D
Your wages from a second job or your spouse's wages (or the total and your spouse).		
E Child tax credit. See Pub. 972, Child Tax Credit, for more information.	al of both) are \$1,000 of less.	
If your total income will be less than \$69,801 (\$101,401 if married filing jointly), en	ter "4" for each eligible child	
<ul> <li>If your total income will be from \$69,801 to \$175,550 (\$101,401 to \$339,000 if ma</li> </ul>		
eligible child.	arried ming jointly), eritor 2 for each	
• If your total income will be from \$175,551 to \$200,000 (\$339,001 to \$400,000	if married filing jointly) enter "1" for	
each eligible child.	iii mamod iiiiig jointiy,, ontoi	
<ul> <li>If your total income will be higher than \$200,000 (\$400,000 if married filing jointly).</li> </ul>	enter "-0-"	F
F Credit for other dependents.	, cinci c	
<ul> <li>If your total income will be less than \$69,801 (\$101,401 if married filling jointly), en</li> </ul>	ter "1" for each eligible dependent	
<ul> <li>If your total income will be from \$69,801 to \$175,550 (\$101,401 to \$339,000 if ma</li> </ul>		
two dependents (for example, "-0-" for one dependent, "1" if you have two or the		
four dependents).	rec dependente, and 2 in you have	
• If your total income will be higher than \$175,550 (\$339,000 if married filing jointly)	enter "-0-"	F
G Other credits. If you have other credits, see Worksheet 1-6 of Pub. 505 and enter the amo		G
H Add lines A through G and enter the total here		н —
Add most allough a did only the total note.		
• If you plan to itemize or claim adjustments to income and war	nt to reduce your withholding, or if you	
have a large amount of nonwage income and want to increase y  Adjustments, and Additional Income Worksheet below.	our withholding, see the <b>Deductions</b> ,	
10. 000.007	sinth, and you and your analyse both	
worksheets work, and the combined earnings from all jobs exceed \$52,000 (\$	24,000 if married filing jointly), see the	
that apply. Two-Earners/Multiple Jobs Worksheet on page 4 to avoid having	too little tax withheld.	
<ul> <li>If neither of the above situations applies, stop here and enter the</li> </ul>	e number from line H on line 5 of Form	
W-4 above.		
Deductions, Adjustments, and Additional Inco	me Worksheet	
<b>Note:</b> Use this worksheet <i>only</i> if you plan to itemize deductions, claim certain adjustment income.	s to income, or have a large amount of	nonwage
1 Enter an estimate of your 2018 itemized deductions. These include qualifying	home mortgage interest.	
charitable contributions, state and local taxes (up to \$10,000), and medical expen		
your income. See Pub. 505 for details	1 \$	
\$24,000 if you're married filing jointly or qualifying widow(er)		
2 Enter: { \$18,000 if you're head of household }	<b>2</b> \$	
\$12,000 if you're single or married filing separately		
3 Subtract line 2 from line 1. If zero or less, enter "-0-"	The state of the s	
4 Enter an estimate of your 2018 adjustments to income and any additional stand		
blindness (see Pub. 505 for information about these items)		
5 Add lines 3 and 4 and enter the total		
6 Enter an estimate of your 2018 nonwage income (such as dividends or interest) .		
7 Subtract line 6 from line 5. If zero, enter "-0-". If less than zero, enter the amount in		
8 Divide the amount on line 7 by \$4,150 and enter the result here. If a negative amount		
Drop any fraction		
9 Enter the number from the <b>Personal Allowances Worksheet</b> , line H above		
10 Add lines 8 and 9 and enter the total here. If zero or less, enter "-0-". If you plan		
Multiple Jobs Worksheet, also enter this total on line 1, page 4. Otherwise, stop		
on Form W-4, line 5, page 1	10	

FOIIII VV	-4 (2018)							rage <del>1</del>				
			Two-E	arners/Mu	ltiple Jobs Worksh	eet						
Note: Use this worksheet only if the instructions under line H from the Personal Allowances Worksheet direct you here.												
1	Deductions, Adjustments, and Additional Income Worksheet on page 3, the number from line 10 of that worksheet)											
2	married filing jointly and wages from the highest paying job are \$75,000 or less and the combined wages for you and your spouse are \$107,000 or less, don't enter more than "3"											
3	If line 1 is more than or equal to line 2, subtract line 2 from line 1. Enter the result here (if zero, enter "-0-") and on Form W-4, line 5, page 1. Do not use the rest of this worksheet											
Note	Note: If line 1 is less than line 2, enter "-0-" on Form W-4, line 5, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill.											
4	Enter the nun	nber from line	2 of this worksheet			4						
5	Enter the nun	nber from line	1 of this worksheet			5						
6												
7					ST paying job and ente							
8					additional annual withh							
9	The second of th	The state of the s			8. For example, divide							
9					ril when there are 18 p							
					This is the additional							
	from each pa											
	nom each pa	*	le 1				ble 2					
	Married Filing		All Other	'e	Married Filing		All Othe	rs				
						-						
	es from <b>LOWEST</b> job are—	Enter on line 2 above	If wages from LOWEST paying job are —	Enter on line 2 above	If wages from HIGHEST paying job are—	Enter on line 7 above	If wages from HIGHEST paying job are—	Enter on line 7 above				
9 19 26 37 43 55 60 70 75 85 95 130 150 160 170 180	\$0 - \$5,000 ,001 - 9,500 ,501 - 19,000 ,001 - 26,500 ,501 - 37,000 ,001 - 43,500 ,501 - 55,000 ,001 - 70,000 ,001 - 70,000 ,001 - 95,000 ,001 - 130,000 ,001 - 150,000 ,001 - 170,000 ,001 - 170,000 ,001 - 170,000 ,001 - 170,000 ,001 - 170,000 ,001 - 170,000 ,001 - 180,000 ,001 - 190,000 ,001 - 190,000 ,001 - 190,000	0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	\$0 - \$7,000 7,001 - 12,500 12,501 - 24,500 24,501 - 31,500 31,501 - 39,000 39,001 - 55,000 55,001 - 70,000 70,001 - 85,000 85,001 - 90,000 90,001 - 105,000 100,001 - 105,000 115,001 - 120,000 120,001 - 130,000 130,001 - 145,000 145,001 - 185,000 155,001 - 185,000 185,001 and over	0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	\$0 - \$24,375 24,376 - 82,725 82,726 - 170,325 170,326 - 320,325 320,326 - 405,325 405,326 - 605,325 605,326 and over	\$420 500 910 1,000 1,330 1,450 1,540	\$0 - \$7,000 7,001 - 36,175 36,176 - 79,975 79,976 - 154,975 154,976 - 197,475 197,476 - 497,475 497,476 and over	\$420 500 910 1,000 1,330 1,450 1,540				

**Privacy Act and Paperwork Reduction** Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person who claims no withholding allowances; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and

200,001 and over

U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

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The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.