

Commercial Carpentry Corporation

625 W. University Drive - Unit C Arlington Heights, Illinois 60004 Phone 847.398.0077 Fax 847.398.3141 www.commercialcarpentrycorp.com

Date _____

Name					
Address					
City State Zip Code					
Phone Number					
Social Security Number					
SingleNumber of Dependents					
Please Check					
Journeyman					
First Year Apprentice					
 Second Year Apprentice 					
Third Year Apprentice					
Fourth Year Apprentice					
Member of Local					
Counties					
You Must Attach a Copy of the Following 1 and 2					
1. Copy of Drivers License					
2. Copy of Social Security Card					
Copies of any Certification					

Instructions

Read all instructions carefully before completing this form.

Anti-Discrimination Notice. It is illegal to discriminate against any individual (other than an alien not authorized to work in the United States) in hiring, discharging, or recruiting or referring for a fee because of that individual's national origin or citizenship status. It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because the documents presented have a future expiration date may also constitute illegal discrimination. For more information, call the Office of Special Counsel for Immigration Related Unfair Employment Practices at 1-800-255-8155.

What Is the Purpose of This Form?

The purpose of this form is to document that each new employee (both citizen and noncitizen) hired after November 6, 1986, is authorized to work in the United States.

When Should Form I-9 Be Used?

All employees (citizens and noncitizens) hired after November 6, 1986, and working in the United States must complete Form I-9.

Filling Out Form I-9

Section 1, Employee

This part of the form must be completed no later than the time of hire, which is the actual beginning of employment. Providing the Social Security Number is voluntary, except for employees hired by employers participating in the USCIS Electronic Employment Eligibility Verification Program (E-Verify). The employer is responsible for ensuring that Section 1 is timely and properly completed.

Noncitizen nationals of the United States are persons born in American Samoa, certain former citizens of the former Trust Territory of the Pacific Islands, and certain children of noncitizen nationals born abroad.

Employers should note the work authorization expiration date (if any) shown in Section 1. For employees who indicate an employment authorization expiration date in Section 1, employers are required to reverify employment authorization for employment on or before the date shown. Note that some employees may leave the expiration date blank if they are aliens whose work authorization does not expire (e.g., asylees, refugees, certain citizens of the Federated States of Micronesia or the Republic of the Marshall Islands). For such employees, reverification does not apply unless they choose to present

in Section 2 evidence of employment authorization that contains an expiration date (e.g., Employment Authorization Document (Form I-766)).

Preparer/Translator Certification

The Preparer/Translator Certification must be completed if **Section 1** is prepared by a person other than the employee. A preparer/translator may be used only when the employee is unable to complete **Section 1** on his or her own. However, the employee must still sign **Section 1** personally.

Section 2, Employer

For the purpose of completing this form, the term "employer" means all employers including those recruiters and referrers for a fee who are agricultural associations, agricultural employers, or farm labor contractors. Employers must complete **Section 2** by examining evidence of identity and employment authorization within three business days of the date employment begins. However, if an employer hires an individual for less than three business days, **Section 2** must be completed at the time employment begins. Employers cannot specify which document(s) listed on the last page of Form I-9 employees present to establish identity and employment authorization. Employees may present any List A document **OR** a combination of a List B and a List C document.

If an employee is unable to present a required document (or documents), the employee must present an acceptable receipt in lieu of a document listed on the last page of this form. Receipts showing that a person has applied for an initial grant of employment authorization, or for renewal of employment authorization, are not acceptable. Employees must present receipts within three business days of the date employment begins and must present valid replacement documents within 90 days or other specified time.

Employers must record in Section 2:

- 1. Document title;
- 2. Issuing authority;
- **3.** Document number;
- 4. Expiration date, if any; and
- **5.** The date employment begins.

Employers must sign and date the certification in **Section 2**. Employees must present original documents. Employers may, but are not required to, photocopy the document(s) presented. If photocopies are made, they must be made for all new hires. Photocopies may only be used for the verification process and must be retained with Form I-9. **Employers are still responsible for completing and retaining Form I-9**.

For more detailed information, you may refer to the *USCIS Handbook for Employers* (Form M-274). You may obtain the handbook using the contact information found under the header "USCIS Forms and Information."

Section 3, Updating and Reverification

Employers must complete **Section 3** when updating and/or reverifying Form I-9. Employers must reverify employment authorization of their employees on or before the work authorization expiration date recorded in **Section 1** (if any). Employers **CANNOT** specify which document(s) they will accept from an employee.

- **A.** If an employee's name has changed at the time this form is being updated/reverified, complete Block A.
- **B.** If an employee is rehired within three years of the date this form was originally completed and the employee is still authorized to be employed on the same basis as previously indicated on this form (updating), complete Block B and the signature block.
- C. If an employee is rehired within three years of the date this form was originally completed and the employee's work authorization has expired or if a current employee's work authorization is about to expire (reverification), complete Block B; and:
 - Examine any document that reflects the employee is authorized to work in the United States (see List A or C);
 - **2.** Record the document title, document number, and expiration date (if any) in Block C; and
 - 3. Complete the signature block.

Note that for reverification purposes, employers have the option of completing a new Form I-9 instead of completing **Section 3.**

What Is the Filing Fee?

There is no associated filing fee for completing Form I-9. This form is not filed with USCIS or any government agency. Form I-9 must be retained by the employer and made available for inspection by U.S. Government officials as specified in the Privacy Act Notice below.

USCIS Forms and Information

To order USCIS forms, you can download them from our website at www.uscis.gov/forms or call our toll-free number at 1-800-870-3676. You can obtain information about Form I-9 from our website at www.uscis.gov or by calling 1-888-464-4218.

Information about E-Verify, a free and voluntary program that allows participating employers to electronically verify the employment eligibility of their newly hired employees, can be obtained from our website at www.uscis.gov/e-verify or by calling 1-888-464-4218.

General information on immigration laws, regulations, and procedures can be obtained by telephoning our National Customer Service Center at 1-800-375-5283 or visiting our Internet website at www.uscis.gov.

Photocopying and Retaining Form I-9

A blank Form I-9 may be reproduced, provided both sides are copied. The Instructions must be available to all employees completing this form. Employers must retain completed Form I-9s for three years after the date of hire or one year after the date employment ends, whichever is later.

Form I-9 may be signed and retained electronically, as authorized in Department of Homeland Security regulations at 8 CFR 274a.2.

Privacy Act Notice

The authority for collecting this information is the Immigration Reform and Control Act of 1986, Pub. L. 99-603 (8 USC 1324a).

This information is for employers to verify the eligibility of individuals for employment to preclude the unlawful hiring, or recruiting or referring for a fee, of aliens who are not authorized to work in the United States.

This information will be used by employers as a record of their basis for determining eligibility of an employee to work in the United States. The form will be kept by the employer and made available for inspection by authorized officials of the Department of Homeland Security, Department of Labor, and Office of Special Counsel for Immigration-Related Unfair Employment Practices.

Submission of the information required in this form is voluntary. However, an individual may not begin employment unless this form is completed, since employers are subject to civil or criminal penalties if they do not comply with the Immigration Reform and Control Act of 1986.

Paperwork Reduction Act

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 12 minutes per response, including the time for reviewing instructions and completing and submitting the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Management Division, 111 Massachusetts Avenue, N.W., 3rd Floor, Suite 3008, Washington, DC 20529-2210. OMB No. 1615-0047. **Do not mail your completed Form I-9 to this address.**

Form W-4 (2017)

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. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2017 expires February 15, 2018. See Pub. 505, Tax Withholding and Estimated Tax.

Note: If another person can claim you as a dependent on his or her tax return, you can't claim exemption from withholding if your total income exceeds \$1,050 and includes more than \$350 of unearned income (for example, interest and dividends).

Exceptions. An employee may be able to claim exemption from withholding even if the employee is a dependent, if the employee:

- Is age 65 or older,
- Is blind, or
- Will claim adjustments to income; tax credits; or itemized deductions, on his or her tax return.

The exceptions don't apply to supplemental wages greater than \$1,000,000.

Basic instructions. If you aren't exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the Personal Allowances Worksheet below. See Pub. 505 for information on converting your other credits into withholding allowances.

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 may owe additional tax. If you have pension or annuity income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

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

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2017. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Future developments. Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at www.irs.gov/w4.

		Person	al Allowances Works	sheet (Keep for your red	cords.)				
Α	Enter "1" for yo	ourself if no one else can	claim you as a dependen	t		A			
	ſ	 You're single and have 	e only one job; or)				
В	Enter "1" if: {	 You're married, have 	only one job, and your sp	ouse doesn't work; or	}	В			
	l	 Your wages from a se 	cond job or your spouse's	wages (or the total of both) a	are \$1,500 or less.				
С	Enter "1" for yo	our spouse. But, you may	choose to enter "-0-" if y	ou are married and have ei	ther a working spouse	e or more			
	than one job. (E	Entering "-0-" may help y	ou avoid having too little t	ax withheld.)		· · · C			
D	Enter number of dependents (other than your spouse or yourself) you will claim on your tax return								
E	Enter "1" if you	er "1" if you will file as head of household on your tax return (see conditions under Head of household above) E							
F	Enter "1" if you	Enter "1" if you have at least \$2,000 of child or dependent care expenses for which you plan to claim a credit F							
	(Note: Do not i	Note: Do not include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.)							
G	Child Tax Cred	Child Tax Credit (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information.							
		If your total income will be less than \$70,000 (\$100,000 if married), enter "2" for each eligible child; then less "1" if you							
	have two to fou	nave two to four eligible children or less "2" if you have five or more eligible children.							
	 If your total inc 	• If your total income will be between \$70,000 and \$84,000 (\$100,000 and \$119,000 if married), enter "1" for each eligible child.							
Н	Add lines A throu	ugh G and enter total here.	Note: This may be different	from the number of exemption	ns you claim on your tax	return.) ► H			
	_			income and want to reduce	your withholding, see th	ne Deductions			
	For accuracy, complete all	and Adjustments Wo							
	 e If you are single and have more than one job or are married and you and your spouse both work and the comb earnings from all jobs exceed \$50,000 (\$20,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 								
	that apply. to avoid having too little tax withheld.								
		• If neither of the abo	ve situations applies, stop l	nere and enter the number fro	om line H on line 5 of Fo	orm W-4 below.			
		Separate here and	l give Form W-4 to your e	nployer. Keep the top part	for your records				
		-			-				
Form	W-4	Employ	ee's Withholding	g Allowance Cert	ificate	OMB No. 1545-0074			
Form Department of the Treasury Whether you are entitled to claim a certain number				_	1 2017				
Interna	al Revenue Service	•		pe required to send a copy of the					
1	Your first name	and middle initial	Last name		2 Your socia	Il security number			
	Home address (number and street or rural rou	3 Single Married Married, but withhold at higher Single rate.						
	0"1		Note: If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.						
	City or town, state, and ZIP code			4 If your last name differs fr	-	<u> </u>			
				check here. You must call 1-800-772-1213 for a replacement card. ▶ □					
5		Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)							
6	Additional amount, if any, you want withheld from each paycheck								
7		I claim exemption from withholding for 2017, 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.								
	If you meet b								
Unde	er penalties of per	jury, I declare that I have e	xamined this certificate and	I, to the best of my knowledg	e and belief, it is true, o	correct, and complete.			
	loyee's signatur				_				
		unless you sign it.) ▶			Date ►				
8	Employer's nam	ne and address (Employer: Co	nplete lines 8 and 10 only if ser	iding to the IRS.) 9 Office code	e (optional) 10 Employer	identification number (EIN)			

Form W-4 (2017) Page **2**

					djustments Works				
Note 1	Et Use this worksheet only if you plan to itemize deductions or claim certain credits or adjustments to income. Enter an estimate of your 2017 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes, medical expenses in excess of 10% of your income, and miscellaneous deductions. For 2017, you may have to reduce your itemized deductions if your income is over \$313,800 and you're married filing jointly or you're a qualifying widow(er); \$287,650 if you're head of household; \$261,500 if you're single, not head of household and not a qualifying widow(er); or \$156,900 if you're								
	married filing sep	parately. See Pub	. 505 for details ied filing jointly or qua				1	\$	
2	Enter: { \$9	9,350 if head			}		2	\$	
3	Subtract line	2 from line 1	. If zero or less, enter	"-0-"			3	\$	
4	Enter an estin	nate of your 2	017 adjustments to in	come and an	y additional standard de	eduction (see	Pub. 505) 4	\$	
5	Add lines 3 and 4 and enter the total. (Include any amount for credits from the Converting Credits to								
6	Enter an estir	mate of your 2	2017 nonwage income	e (such as div	vidends or interest) .		6	\$	
7			. If zero or less, enter					\$	
8	Divide the an	nount on line	7 by \$4,050 and ente	r the result he	ere. Drop any fraction		8		
9					t, line H, page 1				
10					the Two-Earners/Mult				
			•	•	d enter this total on Fo	-			
	-	Two-Earne	rs/Multiple Jobs	Worksheet	: (See Two earners o	or multiple j	obs on page	1.)	
Note			the instructions unde					•	
1	Enter the numb	per from line H,	page 1 (or from line 10	above if you us	sed the Deductions and A	Adjustments W	orksheet) 1		
2	Find the num	ber in Table	1 below that applies	to the LOWE	ST paying job and en	ter it here. Ho	wever, if		
	you are marri	ed filing jointl	y and wages from the	highest pay	ing job are \$65,000 or l				
3	If line 1 is m	ore than or	equal to line 2, subti	ract line 2 fro	om line 1. Enter the res	sult here (if z	_		
			-		of this worksheet	•			
Note			· -		age 1. Complete lines		-	_	
			olding amount necess		•	g			
4	_		2 of this worksheet		-	4			
5			1 of this worksheet			5			
6	Subtract line						6		
7					ST paying job and ente	r it horo		\$	
8					additional annual withh			Ψ	
9		-			r example, divide by 25	-		Ψ	
9		-		-	nere are 25 pay periods		-		
	•			•	ional amount to be withh	-		\$	
			le 1		The second secon		ble 2	Ψ	
Married Filing Jointly All Other			<u> </u>	Married Filing Jointly			All Others		
	es from LOWEST	Enter on	If wages from LOWEST	Enter on	If wages from HIGHEST				
	job are—	line 2 above	paying job are—	line 2 above	paying job are—	Enter on line 7 above	If wages from HIC paying job are—	aHE51	Enter on line 7 above
	\$0 - \$7,000	0	\$0 - \$8,000	0	\$0 - \$75,000	\$610	\$0 - \$0	38.000	\$610
	001 - 14,000	1	8,001 - 16,000	1	75,001 - 135,000	1,010	38,001 - 8	35,000	1,010
	001 - 22,000 001 - 27,000	2 3	16,001 - 26,000 26,001 - 34,000	2	135,001 - 205,000 205,001 - 360,000	1,130 1,340	85,001 - 18 185,001 - 40		1,130 1,340
27,	001 - 35,000	4	34,001 - 44,000	4	360,001 - 405,000	1,420	400,001 and		1,600
	001 - 44,000	5	44,001 - 70,000	5	405,001 and over	1,600			
	001 - 55,000 001 - 65,000	6 7	70,001 - 85,000 85,001 - 110,000	6 7					
65,	001 - 75,000	8	110,001 - 125,000	8					
	001 - 80,000 001 - 95,000	9 10	125,001 - 140,000 140,001 and over	9 10					
	001 - 95,000	11	140,001 and over	10					
115,001 - 130,000		12							
	001 - 140,000	13							

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 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.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

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.



Form IL-W-4

Employee's and other Payee's Illinois Withholding Allowance Certificate and Instructions

Note: These instructions are written for employees to address withholding from wages. However, this form can also be completed and submitted to a payor if an agreement was made to voluntarily withhold Illinois Income tax from other (non-wage) Illinois income.

Who must complete Form IL-W-4?

If you are an employee, you must complete this form so your employer can withhold the correct amount of Illinois Income Tax from your pay. The amount withheld from your pay depends, in part, on the number of allowances you claim on this form.

Even if you claimed exemption from withholding on your federal Form W-4, U.S. Employee's Withholding Allowance Certificate, because you do not expect to owe any federal income tax, you may be required to have Illinois Income Tax withheld from your pay (see Publication 130, Who is Required to Withhold Illinois Income Tax). If you are claiming exempt status from Illinois withholding, you must check the exempt status box on Form IL-W-4 and sign and date the certificate. Do not complete Lines 1 through 3.

If you are a resident of lowa, Kentucky, Michigan, or Wisconsin, or a military spouse, see Form W-5-NR, Employees Statement of Nonresidence in Illinois, to determine if you are exempt.

If you do not file a completed Form IL-W-4 with your employer, if you fail to sign the form or to include all necessary information, or if you alter the form, your employer must withhold Illinois Income Tax on the entire amount of your compensation, without allowing any exemptions.

When must I submit this form?

You should complete this form and give it to your employer on or before the date you start work. You must submit Form IL-W-4 when Illinois Income Tax is required to be withheld from compensation that you receive as an employee. You may file a new Form IL-W-4 any time your withholding allowances increase. If the number of your claimed allowances decreases, you **must** file a new Form IL-W-4 within 10 days. However, the death of a spouse or a dependent does not affect your withholding allowances until the next tax year.

When does my Form IL-W-4 take effect?

If you do not already have a Form IL-W-4 on file with your employer, this form

will be effective for the first payment of compensation made to you after this form is filed. If you already have a Form IL-W-4 on file with this employer, your employer may allow any change you file on this form to become effective immediately, but is not required by law to change your withholding until the first payment of compensation is made to you after the first day of the next calendar quarter (that is, January 1, April 1, July 1, or October 1) that falls at least 30 days after the date you file the change with your employer.

Example: If you have a baby and file a new Form IL-W-4 with your employer to claim an additional allowance for the baby, your employer may immediately change the withholding for all future payments of compensation. However, if you file the new form on September 1, your employer does not have to change your withholding until the first payment of compensation is made to you after October 1. If you file the new form on September 2, your employer does not have to change your withholding until the first payment of compensation made to you after December 31.

How long is Form IL-W-4 valid?

Your Form IL-W-4 remains valid until a new form you have submitted takes effect or until your employer is required by the Department to disregard it. Your employer is required to disregard your Form IL-W-4 if

- you claim total exemption from Illinois Income Tax withholding, but you have not filed a federal Form W-4 claiming total exemption, or
- the Internal Revenue Service (IRS) has instructed your employer to disregard your federal Form W-4.

What is an "exemption"?

An "exemption" is a dollar amount on which you do not have to pay Illinois Income Tax that you may claim on your Illinois Income tax return.

What is an "allowance"?

The dollar amount that is exempt from Illinois Income Tax is based on the number of allowances you claim on this form. As an employee, you receive one allowance unless you are claimed as a dependent on another person's tax return (e.g., your parents claim you as a dependent on their tax return). If you are married, you may claim additional allowances for your spouse and any dependents that you are entitled to claim for federal income tax purposes. You also will receive additional allowances if you or your spouse are age 65 or older, or if you or your spouse are legally blind.

Important: For tax years beginning on or after January 1, 2017, the personal exemption allowance, and additional allowances if you or your spouse are age 65 or older, or if you or your spouse are legally blind, may not be claimed if the taxpayer's adjusted gross income for the taxable year exceeds \$500,000 for returns with a federal filing status of married filing jointly, or \$250,000 for all other returns. Employees who exceed these income amounts may complete a new Form IL-W-4 to update their exemption amounts and increase their Illinois withholding.

How do I figure the correct number of allowances?

Complete the worksheet on the back of this page to figure the correct number of allowances you are entitled to claim. Give your completed Form IL-W-4 to your employer. Keep the worksheet for your records.

Note If you have more than one job or your spouse works, your withholding usually will be more accurate if you claim all of your allowances on the Form IL-W-4 for the highest-paying job and claim zero on all of your other IL-W-4 forms.

How do I avoid underpaying my tax and owing a penalty?

You can avoid underpayment by reducing the number of allowances or requesting that your employer withhold an additional amount from your pay. Even if your withholding covers the tax you owe on your wages, if you have non-wage income that is taxable, such as interest on a bank account or dividends on an investment, you may have additional tax liability. If you owe more than \$500 tax at the end of the year, you may owe a late-payment penalty or will be required to make estimated tax payments. For additional information on penalties see Publication 103, Uniform Penalties and Interest. Visit our website at tax.illinois.gov to obtain a copy.

Where do I get help?

- Visit our website at tax.illinois.gov
- Call our Taxpayer Assistance Division at 1 800 732-8866 or 217 782-3336
- Call our TDD (telecommunications device for the deaf) at 1 800 544-5304
- Write to

ILLINOIS DEPARTMENT OF REVENUE PO BOX 19044 SPRINGFIELD IL 62794-9044

Illinois Withholding Allowance Worksheet

General Information

Complete this worksheet to figure your total withholding allowances.

Do not complete this worksheet if your adjusted gross income for the taxable year will exceed \$500,000 for returns with a federal filing status of married filing jointly, or \$250,000 for all other returns, and enter zero "0" on Lines 1 and 2 of your Form IL-W-4. You may enter an amount on Line 3 for additional withholding.

Complete Step 1.

Complete Step 2 if

· you wrote an amount on Line 4 of the Deductions and Adjustments Worksheet for federal Form W-4.

If you have more than one job or your spouse works, your withholding usually will be more accurate if you claim all of your allowances on the Form IL-W-4 for the highest-paying job and claim zero on all of your other IL-W-4 forms.

You may reduce the number of allowances or request that your employer withhold an additional amount from your pay, which may help avoid having too little tax withheld.

 you (or your spouse) are age 65 or older or legally blind, or 								
Step 1: Figure your basic personal allowa	nces (including allowances for	dependents)						
Check all that apply:	, ,	• ,						
☐ I can claim my spouse as a dependent.								
1 Enter the total number of boxes you checked.		1						
2 Enter the number of dependents (other than you or your spouse) you will claim on your tax return.	2						
3 Add Lines 1 and 2. Enter the result. This is the total number of b	asic personal allowances to which you are							
entitled. You are not required to claim these allowances. The nu	·							
choose to claim will determine how much money is withheld from	• • •	3						
4 Enter the total number of basic personal allowances you choose Form IL-W-4 below. This number may not exceed the amount or								
few as zero. Entering lower numbers here will result in more mo	-	. 4						
Step 2: Figure your additional allowances								
Check all that apply:								
☐ I am 65 or older. ☐ I am legally b	lind.							
☐ My spouse is 65 or older. ☐ My spouse is								
5 Enter the total number of boxes you checked.	3,	5						
6 Enter any amount that you reported on Line 4 of the Deductions	and Adjustments Worksheet							
for federal Form W-4 plus any additional Illinois subtractions or of	•	6						
7 Divide Line 6 by 1,000. Round to the nearest whole number. Ent	7							
	Add Lines 5 and 7. Enter the result. This is the total number of additional allowances to which							
you are entitled . You are not required to claim these allowances								
that you choose to claim will determine how much money is with 9 Enter the total number of additional allowances you elect to claim	8							
number may not exceed the amount on Line 8 above, however y	ı							
numbers here will result in more money being withheld(deducte	•	9						
IMPORTANT: If you want to have additional amounts withheld from y								
below. This amount will be deducted from your pay in addition to the	amounts that are withheld as a result of the	allowances you have						
claimed. — — — — — — Cut here and give the certificate to your en	nployer. Keep the top portion for your records. — — —	×						
/ Illinois Department of Revenue								
√ IL-W-4 Employee's Illinois Withholding Allow	vance Certificate							
W.	1 Enter the total number of basic allowances the	——————————hat you						
Social Security number	are claiming (Step 1, Line 4, of the workshee	-						
	2 Enter the total number of additional allowances that							
Name	you are claiming (Step 2, Line 9, of the work							
Ohrant address.	3 Enter the additional amount you want withhe (deducted) from each pay.	ala 3						
Street address								
City State ZIP	I certify that I am entitled to the number of withhol this certificate.	uing allowances claimed on						
Check the box if you are exempt from federal and Illinois								
Income Tax withholding and sign and date the certificate.	Your signature	Date						
	Employer: Keep this certificate with your records. If you have	e referred the employee's federal						

This form is authorized under the Illinois Income Tax Act. Disclosure of this information is required. Failure to provide information may result in this form not being processed and may result in a penalty.

certificate to the IRS and the IRS has notified you to disregard it, you may also be required to disregard this certificate. Even if you are not required to refer the employee's federal certificate to the IRS, you still may be required to refer this certificate to the IRS, you still may be required to refer this certificate to the Illinois Department of Revenue for inspection. See Illinois Income Tax Regulations 86 Ill. Adm. Code 100.7110.