

Peter Franchot

Comptroller

Dhiren V. Shah

Director

Central Payroll Bureau

TO: All State Agencies

FROM: Dhiren V. Shah, Director

Central Payroll Bureau

DATE: January 10, 2021

SUBJECT: 2021 FEDERAL INCOME TAX WITHHOLDING INFORMATION

The Percentage Method of Withholding is addressed in this memo which includes extractions from the 2021 Federal Income Tax Withholding Tables (found in the IRS Publication 15-T).

#### Please Note:

- Advance payment of earned income credit (EIC) through payroll payments expired on December 31, 2010. Individuals eligible for EIC in 2020 can still claim the credit when they file their 2020 federal income tax return. Additionally, any employee who expects to be eligible for the EIC and will have income tax withheld from wages in 2021 may reduce their withholding in order to receive the benefit of a portion of the credit throughout the year.
- In calendar year 2020, the IRS eliminated withholding allowances, but employee may report the amount of credit in Step 3. Step 3 of Form W-4 provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may claim when you file your tax return. You may also include other tax credits in this step.
- Individual tax calculations and estimates can be readily determined by using the Central Payroll Bureau, Net Pay Calculator located with the following link:

https://www.marylandtaxes.gov/statepayroll/online-services.php Click on "Net Pay Calculator"

Other related documents located from our home page:

Click on "Payroll Officers / then click on Current Memos"

2020 Earned Income Credit (EIC)
2021 Maryland State and Local Income Tax Withholding Information

Attached are Federal Income Tax Withholding tables for Percentage method, 2021 Employer's Withholding Worksheet with 3 examples of withholding calculations using Percentage method.

### 2021 Federal Income Tax Withholding Information Tax tables for Percentage Method of Withholding With Forms W-4 From 2020 or Later

**BIWEEKLY Payroll Period** 

STANDARD Withholding Rate Schedules (Use these if the box in Step 2 of Form W-4 is NOT checked)				ecked)	Form W-4, Step 2, Checkbox, Withholding Rate Schedules (Use these if the box in Step 2 of Form W-4 IS checked)					
If the Adjusted \ Amount (line 1h	•	The		of the amount that	If the Adjusted Amount (line 1	•	The		of the amount that	
At least—	But less than—	tentative amount to withhold is:	Plus this percentage—	the Adjusted Wage exceeds—	At least—	But less than—	tentative amount to withhold is:	Plus this percentage—	the Adjusted Wage exceeds—	
Α	В	С	D	Е	Α	В	С	D	E	
Married Filing Jointly						Mar	ried Filing Jo	intly		
\$0	\$965	\$0.00	0%	\$0	\$0	\$483	\$0.00	0%	\$0	
\$965	\$1,731	\$0.00	10%	\$965	\$483	\$865	\$0.00	10%	\$483	
\$1,731	\$4,083	\$76.60	12%	\$1,731	\$865	\$2,041	\$38.20	12%	\$865	
\$4,083	\$7,610	\$358.84	22%	\$4,083	\$2,041	\$3,805	\$179.32	22%	\$2,041	
\$7,610	\$13,652	\$1,134.78	24%	\$7,610	\$3,805	\$6,826	\$567.40	24%	\$3,805	
\$13,652	\$17,075	\$2,584.86	32%	\$13,652	\$6,826	\$8,538	\$1,292.44	32%	\$6,826	
\$17,075	\$25,131	\$3,680.22	35%	\$17,075	\$8,538	\$12,565	\$1,840.28	35%	\$8,538	
\$25,131		\$6,499.82	37%	\$25,131	\$12,565		\$3,249.73	37%	\$12,565	
	Single or N	larried Filing	Separately		Single or Married Filing Separately					
\$0	\$483	_		\$0	\$0	\$241	\$0.00		\$0	
\$483	\$865	\$0.00	10%	\$483	\$241	\$433	\$0.00	10%	\$241	
\$865	\$2,041	\$38.20	12%	\$865	\$433	\$1,021	\$19.20	12%	\$433	
\$2,041	\$3,805	\$179.32	22%	\$2,041	\$1,021	\$1,902	\$89.76	22%	\$1,021	
\$3,805	\$6,826	\$567.40	24%	\$3,805	\$1,902	\$3,413	\$283.58	24%	\$1,902	
\$6,826	\$8,538	\$1,292.44	32%	\$6,826	\$3,413	\$4,269	\$646.22	32%	\$3,413	
\$8,538	\$20,621	\$1,840.28	35%	\$8,538	\$4,269	\$10,311	\$920.14	35%	\$4,269	
\$20,621		\$6,069.33	37%	\$20,621	\$10,311		\$3,034.84	37%	\$10,311	

	Head of Household				Head of Household				
\$0	\$723	\$0.00	0%	\$0	\$0	\$362	\$0.00	0%	\$0
\$723	\$1,269	\$0.00	10%	\$723	\$362	\$635	\$0.00	10%	\$362
\$1,269	\$2,808	\$54.60	12%	\$1,269	\$635	\$1,404	\$27.30	12%	\$635
\$2,808	\$4,044	\$239.28	22%	\$2,808	\$1,404	\$2,022	\$119.58	22%	\$1,404
\$4,044	\$7,065	\$511.20	24%	\$4,044	\$2,022	\$3,533	\$255.54	24%	\$2,022
\$7,065	\$8,777	\$1,236.24	32%	\$7,065	\$3,533	\$4,388	\$618.18	32%	\$3,533
\$8,777	\$20,862	\$1,784.08	35%	\$8,777	\$4,388	\$10,431	\$891.78	35%	\$4,388
\$20,862		\$6,013.83	37%	\$20,862	\$10,431		\$3,006.83	37%	\$10,431

#### NOTE:

• Use of these tables to compute estimated tax withholdings will result in amounts that differ from the precise amounts computed by the Statewide Payroll System.

### 2021 Federal Income Tax Withholding Information Tax tables for Percentage Method of Withholding With Forms W-4 From 2020 or Later

MON	ITHI	v	Payroll	Period
IVIOIS	11 111	- 1	ravion	renou

		<b>Withholding Ra</b> n Step 2 of Form		necked)			eckbox, Withhox in Step 2 of Fo	•		
the Adjusted V mount (line 1h	•	The		of the amount that	If the Adjusted Amount (line 1	•	The		of the amount that the Adjusted Wage - exceeds—	
At least—	But less than—	tentative amount to withhold is:	Plus this percentage—	the Adjusted Wage exceeds—	At least—	But less than—	tentative amount to withhold is:	Plus this percentage—		
Α	В	С	D	Е	Α	В	С	D	Е	
	Marı	ried Filing Jo	intly		Married Filing Jointly					
\$0	\$2,092	\$0.00	0%	\$0	\$0	\$1,046	\$0.00	0%	\$0	
\$2,092	\$3,750	\$0.00	10%	\$2,092	\$1,046	\$1,875	\$0.00	10%	\$1,046	
\$3,750	\$8,846	\$165.80	12%	\$3,750	\$1,875	\$4,423	\$82.90	12%	\$1,875	
\$8,846	\$16,488	\$777.32	22%	\$8,846	\$4,423	\$8,244	\$388.66	22%	\$4,423	
\$16,488	\$29,579	\$2,458.56	24%	\$16,488	\$8,244	\$14,790	\$1,229.28	24%	\$8,244	
\$29,579	\$36,996	\$5,600.40	32%	\$29,579	\$14,790	\$18,498	\$2,800.32	32%	\$14,790	
\$36,996	\$54,450	\$7,973.84	35%	\$36,996	\$18,498	\$27,225	\$3,986.88	35%	\$18,498	
\$54,450		\$14,082.74	37%	\$54,450	\$27,225		\$7,041.33	37%	\$27,225	
Single or Married Filing Separately					Single or M	Married Filing	Separately			
\$0	\$1,046	\$0.00	0%	\$0	\$0	\$523	\$0.00	0%	\$0	
\$1,046	\$1,875	\$0.00	10%	\$1,046	\$523	\$938	\$0.00	10%	\$523	
\$1,875	\$4,423	\$82.90	12%	\$1,875	\$938	\$2,211	\$41.50	12%	\$938	
\$4,423	\$8,244	\$388.66	22%	\$4,423	\$2,211	\$4,122	\$194.26	22%	\$2,21	
\$8,244	\$14,790	\$1,229.28	24%	\$8,244	\$4,122	\$7,395	\$614.68	24%	\$4,122	
\$14,790	\$18,498	\$2,800.32	32%	\$14,790	\$7,395	\$9,249	\$1,400.20	32%	\$7,39	
\$18,498	\$44,679	\$3,986.88	35%	\$18,498	\$9,249	\$22,340	\$1,993.48	35%	\$9,249	
\$44,679		\$13,150.23	37%	\$44,679	\$22,340		\$6,575.33	37%	\$22,340	
	Hea	ad of Househ	old			He	ad of Househ	old		
\$0	\$1,567	\$0.00	0%	\$0	\$0	\$783	\$0.00	0%	\$0	
\$1,567	\$2,750	\$0.00	10%	\$1,567	\$783	\$1,375	\$0.00	10%	\$783	
\$2,750	\$6,083	\$118.30	12%	\$2,750	\$1,375	\$3,042	\$59.20	12%	\$1,375	
\$6,083	\$8,763	\$518.26	22%	\$6,083	\$3,042	\$4,381	\$259.24	22%	\$3,042	
\$8,763	\$15,308	\$1,107.86	24%	\$8,763	\$4,381	\$7,654	\$553.82	24%	\$4,38	
\$15,308	\$19,017	\$2,678.66	32%	\$15,308	\$7,654	\$9,508	\$1,339.34	32%	\$7,654	
\$19,017	\$45,200	\$3,865.54	35%	\$19,017	\$9,508	\$22,600	\$1,932.62	35%	\$9,508	
\$45,200		\$13,029.59	37%	\$45,200	\$22,600		\$6,514.82	37%	\$22,600	

#### NOTE:

• Use of these tables to compute estimated tax withholdings will result in amounts that differ slightly from the precise amounts computed by the Statewide Payroll System.

# 2021 Employer's Withholding Worksheet for Percentage Method Tables with Forms W-4 from 2020 or Later

Table 1	Monthly 12	Biweekly 26		
<b>Step 1.</b> 1a	Adjust the employee's Enter the employee's total tax	wage amount able wages this payroll period *	1a	\$
1b	Enter the number of pay period	ds you have per year (Table 1)	1b	
1c	Enter the amount from Step 4	(a) of the employee's Form W-4	1c	\$
1d	Divide line 1c by the number of	on line 1b	1d	\$
1e	Add lines 1a and 1d		1e	\$
1f	Enter the amount from Step 4(	(b) of the employee's Form W-4	1f	\$
1g	Divide line 1f by the number of	n line 1b	1g	\$
<sup>1h</sup> Step 2.	Subtract line 1g from line 1e. If Figure the Tentative W	f zero or less, enter -0 This is the <b>Adjusted Wage Amount</b>	1h	\$
based on your of Form W-4 is 2a	s checked. Find the row in the STANDAR W-4 is NOT checked) or the F it HAS been checked) of the P on line 1h is at least the amou enter here the amount from co	Adjusted Wage Amount, filing status (Step 1(c) of Form W-4), a D Withholding Rate Schedules (if the box in Step 2 of Form form W-4, Step 2, Checkbox, Withholding Rate Schedules (if recentage Method tables in this section in which the amount not in column A but less than the amount in column B, then slumn A of that row	and whe	ther the box in Step 2 \$
2c	Enter the percentage from colu	umn D of that row	2c	%
2d	Subtract line 2a from line 1h .		2d	\$
2e	Multiply the amount on line 2d	by the percentage on line 2c	2e	\$
2f	Add lines 2b and 2e. This is the	e Tentative Withholding Amount	2f	\$
<b>Step 3.</b> 3a	Account for tax credits Enter the amount from Step 3	of the employee's Form W-4	3a	\$
3b	Divide the amount on line 3a b	by the number of pay periods on line 1b	3b	\$
3c	Subtract line 3b from line 2f. If	zero or less, enter -0-	3c	\$
<b>Step 4.</b> 4a	Figure the final amount to Enter the additional amount to	t to withhold withhold from Step 4(c) of the employee's Form W-4	4a	\$
4b		ne amount to withhold from the employee's wages this	4b	\$

<sup>\*</sup>Biweekly or Monthly Gross pay less tax sheltered and/or pre-tax deductions.



## **Employee's Withholding Certificate**

2021

FOR MARYLAND STATE GOVERNMENT EMPLOYEES ONLY

Department of the T Internal Revenue Se	reasury Complete Fo	<u> </u>	Give Form W-4	ithhold the correct feder to your employer. bject to review by the l		ur pay.		
Step 1 - Perso	onal Information	(Please complete fo	orm in black ink	.)				
Payroll System (c	check one)	Agency Number 24.01.01		e of Employing Agency MPTROLLER OF	MARYLAND			
(a) Employe JANE	ee Name DOE			(b) Social Security Nur 111-22-3333	nber			
Home Address (n	umber and street or ru	ral route) (apartment	t number, if any)		Does the name ma Security card? If n your earnings, conta to www.ssa.gov	ot, to er	nsure	e you get credit for
City ANNAPOLIS	}	State MD	Zip Code County of Residence (required) AA					
Married fil Head of he	· · · · · · · · · · · · · · · · · · ·	widow(er)) rou're unmarried and pa apply to you; oth	erwise, skip to	e costs of keeping up a hom  Step 5. See page 2	· · · · · · · · · · · · · · · · · · ·			•
withholding dependence  Do only one of the  (a) Use  (b) Use  (c) If the	ds on income earned for following.  The the estimator at www the the Multiple Jobs Work were are only two jobs to	rom all of these jobs.  irs.gov/W4App for mean sheet on page 3 and obtal, you may check to	nost accurate with enter the result in S this box. Do the s	ed filing jointly and your so wholding for this step (and Step 4(c) below for roughl ame on Form W-4 for the	d Steps 3–4); <b>or</b> y accurate withholding; e other job. This option	<b>or</b> is accur	rate f	
Complete Steps 3 accurate if you cor	e estimator. 3–4(b) on Form W-4 fo mplete Steps 3–4(b) or	or only ONE of thes the Form W-4 for th	e jobs. Leave the	· ·	ther jobs. (Your withho			
Step 3: Claim	,	, ,	,	ess if married filing jointly age 17 by \$2,000	, 			
Dependents	Multiply the n	umber of other depe	ndents by \$500	<u> </u>	1,000.00			
		above and enter the				3	\$	1,000.00
Step 4 (optional): Other	this year that	•	ing, enter the amo	x withheld for other incorpunt of other income here	•	4(a)	\$	3,000.00
Adjustments	want to redu	, ,	use the Deduction	ther than the standard		4(b)	\$	2,000.00
	(c) Extra withho	olding. Enter any ad	ditional tax you w	ant withheld each <b>pay p</b>	period.	4(c)	\$	50.00
	Under penalties of pe	erjury, I declare that t	this certificate. to	the best of my knowledg	ge and belief, is true o	orrect. a	ınd o	complete.
Sign	DANC	DOC	, 10	,	,,, c	01/01		
Here	Employee's sign	ature (This form is n	ot valid unless yo	ou sign it.)		Date	.,	
Employers Only	Employer's name and address  Employer's name and address  Central Payroll Bureau  P.O. Box 2396  Apparolis MD 24404							

#### Examples of Withholding Calculations using the Percentage Method.

#### Scenario 1. Biweekly employee claimed Married filing jointly with ✓ in STEP 2 checkbox.

Employee is **Married** filing jointly biweekly pay \$2103.83 (annually \$54,700.00), **STEP 2** was checked (<u>find the Percentage Method Table the Form W-4, Step 2, Checkbox</u>), **STEP 3** entered amount \$1000.00 credit, **STEP 4a** other income \$3000.00, **STEP 4** (b) entered amount \$2000.00 deductions and **STEP 4(c)** entered additional tax withholding for each PPE \$50.00

Table 1	Monthly Biweekly 12 26				
<b>Step 1.</b> 1a	Adjust the employee's wage amount Enter the employee's total taxable wages this payroll	period *	1a <u>.</u>	\$	2103.83
1b	Enter the number of pay periods you have per year (T	able 1)	1b		26
1c	Enter the amount from Step 4(a) of the employee's Fo	orm W-4	1c	\$	3,000.00
1d	Divide line 1c by the number on line 1b		1d	\$	115.38
1e	Add lines 1a and 1d		1e	\$	2,219.21
1f	Enter the amount from Step 4(b) of the employee's Fo	orm W-4	1f	\$_	2,000.00
1g	Divide line 1f by the number on line 1b		1g	\$	76.92
<sup>1h</sup> Step 2.	Subtract line 1g from line 1e. If zero or less, enter -0 Figure the Tentative Withholding Amour		1h	\$	2142.29
based on your of Form W-4 is 2a	pay frequency, the employee's Adjusted Wage Amounts checked. Find the row in the STANDARD Withholding Rate Schw-4 is NOT checked) or the Form W-4, Step 2, Checked it HAS been checked) of the Percentage Method table on line 1h is at least the amount in column A but less enter here the amount from column A of that row	t, filing status (Step 1(c) of Form W-4), a nedules (if the box in Step 2 of Form kbox, Withholding Rate Schedules (if es in this section in which the amount than the amount in column B, then	2a	\$	2,041.00
2b 2c	Enter the amount from column C of that row Enter the percentage from column D of that row		2b 2c	\$ <u></u> %	179.32 22.00
			-		
2d	Subtract line 2a from line 1h		2d	\$	101.29
2e	Multiply the amount on line 2d by the percentage on li		2e	\$	22.28
2f	Add lines 2b and 2e. This is the <b>Tentative Withhold</b> in	ng Amount	2f	\$	201.60
<b>Step 3.</b> 3a	Account for tax credits Enter the amount from Step 3 of the employee's Form	n W-4	3a	\$	1,000.00
3b	Divide the amount on line 3a by the number of pay pe	riods on line 1b	3b	\$	38.46
3c	Subtract line 3b from line 2f. If zero or less, enter -0		3c	\$	163.14
<b>Step 4.</b> 4a	Figure the final amount to withhold Enter the additional amount to withhold from Step 4(c	) of the employee's Form W-4	4a	\$	50.00
4b	Add lines 3c and 4a. This is the amount to withhold pay period		4b	\$	213.14

<sup>\*</sup>Biweekly or Monthly Gross pay less tax sheltered and/or pre-tax deductions.



### **Employee's Withholding Certificate**

2021

FOR MARYLAND STATE GOVERNMENT EMPLOYEES ONLY

Internal Revenue Se	rvice Complete Fo		orm W-4	ithhold the correct feder to your employer. bject to review by the l	•	ır pay.			
Sten 1 – Perso	nal Information (	(Please complete form in I			NO.		_		
Payroll System (cl	heck one)	Agency Number 24.01.01	Name	e of Employing Agency  MPTROLLER OF	MARYLAND				
(a) Employe	e Name			(b) Social Security Nur 111-22-3333	mber				
Home Address (nu		ral route) (apartment numbe	er, if any)	7	Does the name mad Security card? If no your earnings, conta to www.ssa.gov	t, to e	nsur	e you get credit for	
City ANNAPOLIS		State MD	Zip C		County of Residence	ce (required)			
✓ Married fili ☐ Head of ho	2–4 ONLY if they a		e, skip to	Step 5. See page 2				•	
withholding dependence  (a) Use (b) Use (c) If the similar pay; other contractor, use the	ds on income earned from following.  the estimator at www. the Multiple Jobs Works ere are only two jobs to the following in	nan one job at a time, or (2) a rom all of these jobs.  irs.gov/W4App for most accusheet on page 3 and enter the otal, you may check this box necessary may be withheld.  W-4 for all other jobs. If you or only ONE of these jobs.	curate with e result in the substitution of th	nholding for this step (an Step 4(c) below for roughl ame on Form W-4 for the spouse) have self-emple	d Steps 3–4); <b>or</b> y accurate withholding; e other job. This option i	or s accu ng as a	rate 	for jobs with	
	nplete Steps 3–4(b) on	the Form W-4 for the highe ill be \$200,000 or less (\$400	est paying	job.)		<u> </u>			
Claim Dependents	Multiply the n	number of qualifying childre	en under a	age 17 by \$2,000	\$				
·		umber of other dependents above and enter the total h			\$ 1,000.00	3	\$	1,000.00	
Step 4 (optional): Other	(a) Other income this year that	me (not from jobs). If you won't have withholding, entendends, and retirement incom	ou want ta er the amo	x withheld for other inco	•	4(a)	\$	3,000.00	
Adjustments	want to reduce	s. If you expect to claim decce your withholding, use the	Deduction			4(b)	\$	2,000.00	
	(c) Extra withho	olding. Enter any additional	tax you w	ant withheld each <b>pay p</b>	period.	4(c)	\$	50.00	
Step 5:	Under penalties of pe	erjury, I declare that this cert	tificate, to	the best of my knowledg	ge and belief, is true, co	rrect,	and ·	complete.	
Sign Here	QANCDOC 01/01/2021								
	Employee's sign	ature (This form is not valid	unless yo	ou sign it.)		ate			
Employers Only		Employer's name and a Central Payroll But P.O. Box 2396 Annapolis, MD 214	reau		First date of employment		•	identification (EIN)	

### Scenario 2. Biweekly employee claimed Married filing jointly with NO ✓ in STEP 2 checkbox.

Employee is **Married** filing jointly biweekly pay \$2103.83 (annually \$54,700.00), **STEP 2** was **NOT** checked (*find the Percentage Method Table the STANDARD Withholding Rate Schedules, Step 2 NOT checked)*, **STEP 3** entered amount \$1000.00 credit, **STEP 4a** other income \$3000.00, **STEP 4** (b) entered amount \$2000.00 deductions and **STEP 4**(c) entered additional tax withholding for each PPE \$50.00

Table 1	Monthly 12	Biweekly 26			
<b>Step 1.</b> 1a	Adjust the employee's Enter the employee's total tax	wage amount able wages this payroll period *	1a <u>-</u>	\$	2103.83
1b	Enter the number of pay period	ds you have per year (Table 1)	1b		26
1c	Enter the amount from Step 4(	(a) of the employee's Form W-4	1c	\$	3,000.00
1d	Divide line 1c by the number of	on line 1b	1d	\$	115.38
1e	Add lines 1a and 1d	1e	\$	2,219.21	
1f	Enter the amount from Step 4(	1f	\$_	2,000.00	
1g	Divide line 1f by the number of	1g	\$	76.92	
<sup>1h</sup> Step 2.	Subtract line 1g from line 1e. If Figure the Tentative W	f zero or less, enter -0 This is the Adjusted Wage Amount	1h	\$	2,142.29
•	pay frequency, the employee's checked. Find the row in the STANDAR W-4 is NOT checked) or the F it HAS been checked) of the P on line 1h is at least the amou	Adjusted Wage Amount, filing status (Step 1(c) of Form W-4), and D Withholding Rate Schedules (if the box in Step 2 of Form Form W-4, Step 2, Checkbox, Withholding Rate Schedules (if ercentage Method tables in this section in which the amount not in column A but less than the amount in column B, then blumn A of that row	and whe	ther t	1,731.00
2b		C of that row	2b	\$	76.60
2c	Enter the percentage from colu	umn D of that row	2c	%	12.00
2d	Subtract line 2a from line 1h .		2d	\$	411.29
2e	Multiply the amount on line 2d	by the percentage on line 2c	2e	\$	49.35
2f	Add lines 2b and 2e. This is th	e Tentative Withholding Amount	2f	\$	125.95
<b>Step 3.</b> 3a	Account for tax credits Enter the amount from Step 3	of the employee's Form W-4	3a	\$	1,000.00
3b	Divide the amount on line 3a b	by the number of pay periods on line 1b	3b	\$	38.46
3c	Subtract line 3b from line 2f. If	zero or less, enter -0-	3с	\$	87.49
<b>Step 4.</b> 4a	Figure the final amount to	t to withhold withhold from Step 4(c) of the employee's Form W-4	4a	\$	50.00
4b		ne amount to withhold from the employee's wages this	4b	\$	137.49

<sup>\*</sup>Biweekly or Monthly Gross pay less tax sheltered and/or pre-tax deductions.



## **Employee's Withholding Certificate**

2021

FOR MARYLAND STATE GOVERNMENT EMPLOYEES ONLY

Internal Revenue Se	rvice Complete Fo	<b>Ŀ</b> Gi	ive Form W-4	thhold the correct feder to your employer. pject to review by the l		ur pay.			
Step 1 – Perso	nal Information (	(Please complete form							
Payroll System (cl		Agency Number		of Employing Agency					_
✓ RG		24.01.01		MPTROLLER OF	MARYLAND				
(a) Employe		1		(b) Social Security Nur					_
JOHŇ	DOE			123-22-3333					
Home Address (no	umber and street or ru	ral route) (apartment nu	umber, if any)		Does the name ma	tch the	nan	ne on your Soc	ia
123 MAIN ST		, , ,	• • • • • • • • • • • • • • • • • • • •		Security card? If n				
120 107 (114 0					your earnings, conta to www.ssa.gov	act SSA	at 8	00-772-1213 or	gc
City		State	Zip C		County of Residence	e (requ	ired)		
<b>ANNAPOLIS</b>		MD	214	21401 AA					
☐ Married fil		widow(er)) ou're unmarried and pay n		e costs of keeping up a hom				•	_
can claim exemp		g, when to use the or		Step 5. See page 2 or, and privacy.	for more information	on ea	ich s	tep, who	
Complete this step		nan one job at a time, or	r (2) are marrie	d filing jointly and your s	pouse also works. The	e corre	ct am	ount of	
Do <b>only one</b> of the	following.								
(a) Use	the estimator at www.	.irs.gov/W4App for mos	t accurate with	holding for this step (and	d Steps 3–4); <b>or</b>				
<b>(b)</b> Use	the Multiple Jobs Work	sheet on page 3 and ent	er the result in S	Step 4(c) below for roughl	y accurate withholding;	or			
(c) If the	ere are only two jobs to	otal, you may check this	box. Do the sa	ame on Form W-4 for the	other job. This option	is accu	rate f	or jobs with	
similar pay; oth	erwise, more tax than	necessary may be withl	held					<b>•</b>	
contractor, use the	estimator.	,		spouse) have self-emploose steps blank for the o		Ü		•	
		the Form W-4 for the h			aror jobo. (Tour within	namy v	50	moot	
Step 3:	If your income wi	 ill be \$200,000 or less (	\$400,000 or le	ss if married filing jointly	):				
Claim Dependents	•	,		age 17 by \$2,000	,				
Dependents	Multiply the n	umber of other depende	ents by \$500	[	<b>S</b> \$				
		s above and enter the to				3	\$	2,000.00	
Step 4 (optional): Other	(a) Other income this year that	me (not from jobs).	If you want tax , enter the amo	withheld for other incor		4(a)		1,000.00	
Adjustments									
				ther than the standard				0.000.00	
		ce your withholding, us	e the Deduction	ns Worksheet on page 3	and enter the result	4(b)	\$	3,000.00	
	11010					4/->	¢.		
	(c) Extra withho	lding. Enter any additi	onal tax you w	ant withheld each <b>pay p</b>	eriod.	4(c)	Φ	20.00	
Step 5:	Under penalties of pe	erjury, I declare that this	s certificate, to	the best of my knowledg	je and belief, is true, c	orrect,	and c	omplete.	
Sign Here	90HM	V DOC				01/0	1/20	021	
11010	Employee's sign	ature (This form is not	valid unless yo	u sign it.)	i	Date			_
Employers		Employer's name a	and address		First date of Employer identification				_
Only		Central Payrol	l Bureau		employment			(EIN)	
- •		P.O. Box 2			. •				
		Annapolis, MD	21404						

### Scenario 3. Monthly employee claimed Single with NO ✓ in STEP 2 checkbox.

Employee is **Single** monthly pay 4,166.66 (annually \$50,000), **STEP 2** was **NOT** checked (<u>find the Percentage Method Table the STANDARD Withholding Rate Schedules, Step 2 NOT checked</u>), **STEP 3** entered amount \$2000.00 credit, **STEP 4a** other income \$1000.00, **STEP 4** (b) entered amount \$3000.00 deductions and **STEP 4(c)** entered additional tax withholding for each PPE \$20.00. Employee has \$60.00 pretax deduction.

Table 1	Monthly 12	Biweekly 26			
Step 1.	Adjust the employee's				
1a	• •	able wages this payroll period * 4166.66-60.00= 4,106.66	1a	\$	4,106.66
1b	Enter the number of pay period	ds you have per year (Table 1)	1b		12
1c	Enter the amount from Step 4	(a) of the employee's Form W-4	1c	\$	1,000.00
1d	Divide line 1c by the number of	on line 1b	1d	\$	83.33
1e	Add lines 1a and 1d		1e	\$	4,189.99
1f	Enter the amount from Step 4	(b) of the employee's Form W-4	1f	\$	3,000.00
1g	Divide line 1f by the number o	n line 1b	1g	\$	250.00
<sup>1h</sup> Step 2.	Figure the Tentative W		1h	\$	3939.99
based on your of Form W-4 is		Adjusted Wage Amount, filing status (Step 1(c) of Form W-4),	and whe	ether th	ne box in Step 2
2a	Find the row in the STANDAR	D Withholding Rate Schedules (if the box in Step 2 of Form	2a	\$	1875.00
	W-4 is NOT checked) or the F it HAS been checked) of the P on line 1h is at least the amou enter here the amount from co				
2b		n C of that row	2b	\$	82.90
2c	Enter the percentage from col	umn D of that row	2c	%	12.00
2d	Subtract line 2a from line 1h .		2d	\$	2064.99
2e	Multiply the amount on line 2d	by the percentage on line 2c	2e	\$	247.80
2f	Add lines 2b and 2e. This is the	e Tentative Withholding Amount	2f	\$	330.70
Step 3.	Account for tax credits	•			
3a	Enter the amount from Step 3	of the employee's Form W-4	3a	\$	2,000.00
3b	Divide the amount on line 3a b	by the number of pay periods on line 1b	3b	\$	166.66
3c	Subtract line 3b from line 2f. If	zero or less, enter -0-	3c	\$	164.04
<b>Step 4.</b> 4a	Figure the final amoun Enter the additional amount to	t to withhold withhold from Step 4(c) of the employee's Form W-4	4a	\$	20.00
4b		he amount to withhold from the employee's wages this	4b	\$ <u></u>	184.04

<sup>\*</sup> Biweekly or Monthly Gross pay less tax sheltered and/or pre-tax deductions.