

**SUBSTITUTE FORM W-4  
ANGELO VENTRESCA ASSOCIATES**

NAME:	
ADDRESS:	
SOCIAL SECURITY #	DATE OF BIRTH:
PHONE #	
COUNTY	
SCHOOL DISTRICT	
TWP or BORO	

**WITHHOLDING INFORMATION**

CIRCLE ONE	SINGLE	MARRIED	MARRIED claiming single rate
# of exemptions claimed (if none, enter a "0")			
Enter added tax deduction per pay period, if any			
Exempt from withholding (give reason)			

**DIRECT PAYROLL DEPOSIT INFORMATION**

BANK NAME		
BANK ADDRESS		
CIRCLE ONE	CHECKING	SAVINGS
BANK Number (9 digit #, 1 <sup>st</sup> # lower left corner of check)		
ACCOUNT #		
Please attach a photocopy of a blank check. Write "VOID" on the photocopy.		

*Please sign & date below:*

Signature:

Date:

**Office USE Only**

Rate of Pay	Salary:	Hourly:	Commission:
Local Tax:	Yes	No	OPT Tax: Yes No
Other Deductions:			
Other Income:			
DATE OF HIRE:			

# Employee's Withholding Certificate

**2020**

▶ **Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.**  
 ▶ **Give Form W-4 to your employer.**  
 ▶ **Your withholding is subject to review by the IRS.**

<b>Step 1:</b> <b>Enter Personal Information</b>	(a) First name and middle initial	Last name	<b>(b) Social security number</b>  ▶ Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to <a href="http://www.ssa.gov">www.ssa.gov</a> .
	Address		
	City or town, state, and ZIP code		
	(c) <input type="checkbox"/> Single or Married filing separately <input type="checkbox"/> Married filing jointly (or Qualifying widow(er)) <input type="checkbox"/> Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)		

**Complete Steps 2-4 ONLY if they apply to you; otherwise, skip to Step 5.** See page 2 for more information on each step, who can claim exemption from withholding, when to use the online estimator, and privacy.

**Step 2: Multiple Jobs or Spouse Works**

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs. Do **only one** of the following.

(a) Use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) for most accurate withholding for this step (and Steps 3-4); or  
 (b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; or  
 (c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld . . . . . ▶

**TIP:** To be accurate, submit a 2020 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

**Complete Steps 3-4(b) on Form W-4 for only ONE of these jobs.** Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3-4(b) on the Form W-4 for the highest paying job.)

<b>Step 3:</b> <b>Claim Dependents</b>	If your income will be \$200,000 or less (\$400,000 or less if married filing jointly):		
	Multiply the number of qualifying children under age 17 by \$2,000 ▶ \$	_____	
	Multiply the number of other dependents by \$500 . . . . . ▶ \$	_____	
	Add the amounts above and enter the total here . . . . .		<b>3</b> \$
<b>Step 4 (optional): Other Adjustments</b>	(a) <b>Other income (not from jobs).</b> If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income . . . . .		<b>4(a)</b> \$
	(b) <b>Deductions.</b> If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here . . . . .		<b>4(b)</b> \$
	(c) <b>Extra withholding.</b> Enter any additional tax you want withheld each pay period . . . . .		<b>4(c)</b> \$

**Step 5: Sign Here**

Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.

▶ \_\_\_\_\_ ▶ \_\_\_\_\_  
**Employee's signature** (This form is not valid unless you sign it.) **Date**

<b>Employers Only</b>	Employer's name and address	First date of employment	Employer identification number (EIN)