# Payroll Paperwork for House of Delegates Page Program

# DUE DATE: MONDAY, DECEMBER 8, 2025

Please go through each page of the **FOUR** payroll paperwork forms carefully. Read the instructions on the next page and provide copies of required documents. Complete all required fields on each form. Before submitting, make a copy of all forms to keep for your records.

**Email** (preferred) a completed set of forms and documents

(scanned as one PDF, if possible) to:

plambert@house.virginia.gov

\*\*Before emailing your completed set of forms, please name the file(s) as follows:

Page Payroll Forms – Last Name, First Name mmdd2025

\*\*Please include the following in the subject line of your email: Page Payroll Forms — Last Name, First Name

**OR mail** a completed set of forms and documents to:

Virginia House of Delegates Clerk's Office Attn: Paula Lambert (House Finance Office) P.O. Box 406 Richmond, VA 23218

### **QUESTIONS? Please contact:**

**Paula Lambert** 

804.698.1514 / plambert@house.virginia.gov

#### Tax Withholding (Federal and State)

W-4 Form (Federal Tax Withholding) and VA-4 Form (Virginia Tax Withholding)

- All sections of each withholding form must be completed.
- Submit page 1 of each form.
- Keep the instructions and worksheets for your records.
- Both forms include instructions; please read them carefully.
- Submit a copy of your social security card along with the W-4 form.

  This is a federal requirement that employers must verify the accuracy of your social security number before processing any payroll actions.
- \*\*\*If you do <u>NOT</u> want federal and state taxes withheld from your bi-weekly paychecks, please do the following:
  - W-4 Form (federal taxes): Write the word "EXEMPT" on the line above your signature at the bottom of the form.
  - VA-4 Form (state taxes): Check the #3 box that states "I certify that I am not subject to Virginia withholding" and initial to the right of the box.
- \*\*\*If you <u>DO</u> want federal and state taxes withheld from your bi-weekly paychecks, please do the following:
  - W-4 Form (federal taxes): Do NOT write the word "EXEMPT" on the form.
  - VA-4 Form (state taxes): Do NOT check the #3 box on the form.

#### I-9 Employment Eligibility Verification

- This form is used to enter information into the E-Verify system, which is a secure online system managed by the Federal Department of Homeland Security. We are required to verify all employees' eligibility through E-Verify.
- Complete Page 1 (Section 1) of the I-9 form and return this along with copies of acceptable documents (see list on page 2 of the I-9 form).
- You must supply one item from List A <u>OR</u> an item from both List B and List C. Since you must supply a copy of your social security card for the W-4 federal withholding form, this can be used to satisfy the List C requirement. You would then need to supply a copy of a List B item. A photo ID is preferred but not required for those under the age of 18.

### **Direct Deposit**

- All payments will be deposited electronically into your bank account.
- Complete the form and attach a voided check OR a document from your bank that includes your bank routing and account numbers.
  - \*\*\*Note: Please note that "allowance cards" have had issues with direct deposit payments, so we recommend not setting one of these up for purposes of receiving your weekly session expense and regular bi-weekly payroll payments. Instead, we recommend setting up a regular checking or savings account. Also, please note that not all custodial bank accounts accept electronic direct deposits, so please make sure the bank account you wish to use accepts electronic direct deposits. This will help avoid issues once you have been set up in the state's payroll system.\*\*\*
- If you do not have a voided check or it is a savings account, please contact your bank to request a letter/document with the bank routing and account numbers.
- A deposit slip for a savings account may not have enough information for us to set up your direct deposit.

Department of the Treasury

**Employee's Withholding Certificate**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

ınternai Revenue Sei	ervice	Tour w	vitiliolali	ig is subject to review by the in	1 <b>3.</b>							
Step 1:	(a) Firs	t name and middle initial		Last name		(b) So	cial security number					
Enter Personal Information	Address					name o	our name match the on your social security f not, to ensure you get					
	City or to	own, state, and ZIP code	contact	credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov.								
	(c)	Single or Married filing separately										
		Married filing jointly or Qualifying	_									
		Head of household (Check only if yo	ou're unma	rried and pay more than half the costs	of keeping up a home for y	ourself an	d a qualifying individual.)					
are completino marital status, deductions, or	g this fo , numbe r credits	ne estimator at www.irs.gov/lorm after the beginning of the rof jobs for you (and/or your . Have your most recent pay or again to recheck your withle	year; ex spouse stub(s) f	pect to work only part of the if married filing jointly), depe	year; or have change ndents, other income	s durino (not fro	g the year in your m jobs),					
_	-	ONLY if they apply to you; withholding, and when to us				on on ea	ach step, who can					
Step 2: Multiple Job		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.										
or Spouse	1	Do <b>only one</b> of the following.										
Works	(	(a) Use the estimator at www you or your spouse have	_	/ <i>W4App</i> for the most accurat ployment income, use this op	-	step (a	nd Steps 3–4). If					
		<b>(b)</b> Use the Multiple Jobs Wo	orksheet	on page 3 and enter the resu	ılt in Step 4(c) below;	or						
	(	(c) If there are only two jobs option is generally more a higher paying job. Otherw	accurate	than (b) if pay at the lower pa	aying job is more tha							
		(b) on Form W-4 for only ON ou complete Steps 3–4(b) on				bs. (You	ır withholding will					
Step 3:	1	If your total income will be \$2	200,000	or less (\$400,000 or less if ma	arried filing jointly):							
Claim		Multiply the number of gu	alifying o	children under age 17 by \$2,0	00 \$							
Dependent and Other		Multiply the number of otl		-	. \$	_						
Credits		Add the amounts above for a			ents. You may add t	0 3	\$					
Step 4 (optional):	(		't have v	vithholding, enter the amount		∍. │						
Other		rnis may include interest,	aiviaen	ds, and retirement income .		4(a)	Ф					
Adjustments	S	d er										
		the result here				4(b)	\$					
	(	(c) Extra withholding. Enter	any add	itional tax you want withheld	each <b>pay period</b>	4(c)	\$					
Step 5:	Under p	penalties of perjury, I declare that	t this cert	tificate, to the best of my knowle	dge and belief, is true, o	correct, a	nd complete.					
Sign Here												
	Emp	loyee's signature (This form	is not va	alid unless you sign it.)	D	ate						
Employers Only	Employ	rer's name and address			First date of employment	Employ- number	er identification (EIN)					

Form W-4 (2025) Page **2** 

#### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

#### **Future Developments**

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

#### **Purpose of Form**

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. If too little is withheld, you will generally owe tax when you file your tax return and may owe a penalty. If too much is withheld, you will generally be due a refund. Complete a new Form W-4 when changes to your personal or financial situation would change the entries on the form. For more information on withholding and when you must furnish a new Form W-4, see Pub. 505, Tax Withholding and Estimated Tax.

Exemption from withholding. You may claim exemption from withholding for 2025 if you meet both of the following conditions: you had no federal income tax liability in 2024 and you expect to have no federal income tax liability in 2025. You had no federal income tax liability in 2024 if (1) your total tax on line 24 on your 2024 Form 1040 or 1040-SR is zero (or less than the sum of lines 27, 28, and 29), or (2) you were not required to file a return because your income was below the filing threshold for your correct filing status. If you claim exemption, you will have no income tax withheld from your paycheck and may owe taxes and penalties when you file your 2025 tax return. To claim exemption from withholding, certify that you meet both of the conditions above by writing "Exempt" on Form W-4 in the space below Step 4(c). Then, complete Steps 1(a), 1(b), and 5. Do not complete any other steps. You will need to submit a new Form W-4 by February 17, 2026.

**Your privacy.** Steps 2(c) and 4(a) ask for information regarding income you received from sources other than the job associated with this Form W-4. If you have concerns with providing the information asked for in Step 2(c), you may choose Step 2(b) as an alternative; if you have concerns with providing the information asked for in Step 4(a), you may enter an additional amount you want withheld per pay period in Step 4(c) as an alternative.

**When to use the estimator.** Consider using the estimator at *www.irs.gov/W4App* if you:

- 1. Are submitting this form after the beginning of the year;
- 2. Expect to work only part of the year;
- 3. Have changes during the year in your marital status, number of jobs for you (and/or your spouse if married filing jointly), or number of dependents, or changes in your deductions or credits;
- 4. Receive dividends, capital gains, social security, bonuses, or business income, or are subject to the Additional Medicare Tax or Net Investment Income Tax; or
- 5. Prefer the most accurate withholding for multiple job situations

**TIP:** Have your most recent pay stub(s) from this year available when using the estimator to account for federal income tax that has already been withheld this year. At the beginning of next year, use the estimator again to recheck your withholding.

**Self-employment.** Generally, you will owe both income and self-employment taxes on any self-employment income you receive separate from the wages you receive as an employee. If you want to pay these taxes through withholding from your wages, use the estimator at <a href="https://www.irs.gov/w4App">www.irs.gov/w4App</a> to figure the amount to have withheld.

**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**

**Step 1(c).** Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

**Step 2.** Use this step if you (1) have more than one job at the same time, or (2) are married filing jointly and you and your spouse both work. Submit a separate Form W-4 for each job.

Option (a) most accurately calculates the additional tax you need to have withheld, while option (b) does so with a little less accuracy.

Instead, if you (and your spouse) have a total of only two jobs, you may check the box in option (c). The box must also be checked on the Form W-4 for the other job. If the box is checked, the standard deduction and tax brackets will be cut in half for each job to calculate withholding. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld, and this extra amount will be larger the greater the difference in pay is between the two jobs.



**Multiple jobs.** Complete Steps 3 through 4(b) on only one Form W-4. Withholding will be most accurate if you do this on the Form W-4 for the highest paying job.

Step 3. This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 501, Dependents, Standard Deduction, and Filing Information. You can also include other tax credits for which you are eligible in this step, such as the foreign tax credit and the education tax credits. To do so, add an estimate of the amount for the year to your credits for dependents and enter the total amount in Step 3. Including these credits will increase your paycheck and reduce the amount of any refund you may receive when you file your tax return.

#### Step 4 (optional).

Step 4(a). Enter in this step the total of your other estimated income for the year, if any. You shouldn't include income from any jobs or self-employment. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your paycheck, see Form 1040-ES, Estimated Tax for Individuals.

Step 4(b). Enter in this step the amount from the Deductions Worksheet, line 5, if you expect to claim deductions other than the basic standard deduction on your 2025 tax return and want to reduce your withholding to account for these deductions. This includes both itemized deductions and other deductions such as for student loan interest and IRAs.

**Step 4(c).** Enter in this step any additional tax you want withheld from your pay **each pay period**, including any amounts from the Multiple Jobs Worksheet, line 4. Entering an amount here will reduce your paycheck and will either increase your refund or reduce any amount of tax that you owe.

Form W-4 (2025)

#### Step 2(b) - Multiple Jobs Worksheet (Keep for your records.)



If you choose the option in Step 2(b) on Form W-4, complete this worksheet (which calculates the total extra tax for all jobs) on **only ONE** Form W-4. Withholding will be most accurate if you complete the worksheet and enter the result on the Form W-4 for the highest paying job. To be accurate, submit a new Form W-4 for all other jobs if you have not updated your withholding since 2019.

**Note:** If more than one job has annual wages of more than \$120,000 or there are more than three jobs, see Pub. 505 for additional tables; or, you can use the online withholding estimator at www.irs.gov/W4App.

1	<b>Two jobs.</b> If you have two jobs or you're married filing jointly and you and your spouse each have one job, find the amount from the appropriate table on page 4. Using the "Higher Paying Job" row and the "Lower Paying Job" column, find the value at the intersection of the two household salaries and enter that value on line 1. Then, <b>skip</b> to line 3	1	\$
2	<b>Three jobs.</b> If you and/or your spouse have three jobs at the same time, complete lines 2a, 2b, and 2c below. Otherwise, skip to line 3.		
	<b>a</b> Find the amount from the appropriate table on page 4 using the annual wages from the highest paying job in the "Higher Paying Job" row and the annual wages for your next highest paying job in the "Lower Paying Job" column. Find the value at the intersection of the two household salaries and enter that value on line 2a	2a	\$
	<b>b</b> Add the annual wages of the two highest paying jobs from line 2a together and use the total as the wages in the "Higher Paying Job" row and use the annual wages for your third job in the "Lower Paying Job" column to find the amount from the appropriate table on page 4 and enter this amount on line 2b	2b	\$
	c Add the amounts from lines 2a and 2b and enter the result on line 2c	2c	\$
3	Enter the number of pay periods per year for the highest paying job. For example, if that job pays weekly, enter 52; if it pays every other week, enter 26; if it pays monthly, enter 12, etc	3	
4	<b>Divide</b> the annual amount on line 1 or line 2c by the number of pay periods on line 3. Enter this amount here and in <b>Step 4(c)</b> of Form W-4 for the highest paying job (along with any other additional amount you want withheld)	4	\$
	Step 4(b) - Deductions Worksheet (Keep for your records.)		
1	Enter an estimate of your 2025 itemized deductions (from Schedule A (Form 1040)). Such deductions may include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of your income	1	\$
2	Enter:   • \$30,000 if you're married filing jointly or a qualifying surviving spouse • \$22,500 if you're head of household • \$15,000 if you're single or married filing separately	2	\$
3	If line 1 is greater than line 2, subtract line 2 from line 1 and enter the result here. If line 2 is greater than line 1, enter "-0-"	3	\$
4	Enter an estimate of your student loan interest, deductible IRA contributions, and certain other adjustments (from Part II of Schedule 1 (Form 1040)). See Pub. 505 for more information	4	\$
5	Add lines 3 and 4. Enter the result here and in Step 4(b) of Form W-4	5	\$

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 with no other entries on the form; 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 territories 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 W-4 (2025) Page **4** 

Married Filing Jointly or Qualifying Surviving Spouse												
Higher Paying Job				Lowe	r Paying .	Job Annua	al Taxable	Wage & S	Salary			
Annual Taxable Wage & Salary	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
\$0 - 9,999	\$0	\$0	\$700	\$850	\$910	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020
\$10,000 - 19,999	0	700	1,700	1,910	2,110	2,220	2,220	2,220	2,220	2,220	2,220	3,220
\$20,000 - 29,999	700	1,700	2,760	3,110	3,310	3,420	3,420	3,420	3,420	3,420	4,420	5,420
\$30,000 - 39,999	850	1,910	3,110	3,460	3,660	3,770	3,770	3,770	3,770	4,770	5,770	6,770
\$40,000 - 49,999	910	2,110	3,310	3,660	3,860	3,970	3,970	3,970	4,970	5,970	6,970	7,970
\$50,000 - 59,999	1,020	2,220	3,420	3,770	3,970	4,080	4,080	5,080	6,080	7,080	8,080	9,080
\$60,000 - 69,999	1,020	2,220	3,420	3,770	3,970	4,080	5,080	6,080	7,080	8,080	9,080	10,080
\$70,000 - 79,999	1,020	2,220	3,420	3,770	3,970	5,080	6,080	7,080	8,080	9,080	10,080	11,080
\$80,000 - 99,999	1,020	2,220	3,420	4,620	5,820	6,930	7,930	8,930	9,930	10,930	11,930	12,930
\$100,000 - 149,999	1,870	4,070	6,270	7,620	8,820	9,930	10,930	11,930	12,930	14,010	15,210	16,410
\$150,000 - 239,999	1,870	4,240	6,640	8,190	9,590	10,890	12,090	13,290	14,490	15,690	16,890	18,090
\$240,000 - 259,999	2,040	4,440	6,840	8,390	9,790	11,100	12,300	13,500	14,700	15,900	17,100	18,300
\$260,000 - 279,999	2,040	4,440	6,840	8,390	9,790	11,100	12,300	13,500	14,700	15,900	17,100	18,300
\$280,000 - 299,999	2,040	4,440	6,840	8,390	9,790	11,100	12,300	13,500	14,700	15,900	17,100	18,300
\$300,000 - 319,999	2,040	4,440	6,840	8,390	9,790	11,100	12,300	13,500	14,700	15,900	17,170	19,170
\$320,000 - 364,999	2,040	4,440	6,840	8,390	9,790	11,100	12,470	14,470	16,470	18,470	20,470	22,470
\$365,000 - 524,999	2,790	6,290	9,790	12,440	14,940	17,350	19,650	21,950	24,250	26,550	28,850	31,150
\$525,000 and over	3,140	6,840	10,540	13,390	16,090	18,700	21,200	23,700	26,200	28,700	31,200	33,700
	Single or Married Filing Separately  Sher Paying Job  Lower Paying Job Annual Taxable Wage & Salary											
Higher Paying Job Annual Taxable	Φ0	<b>440.000</b>	фоо ооо							<b>#</b> 00 000	4400 000	<b>#</b> 440,000
Wage & Salary	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 <i>-</i> 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
\$0 - 9,999	\$200	\$850	\$1,020	\$1,020	\$1,020	\$1,370	\$1,870	\$1,870	\$1,870	\$1,870	\$1,870	\$2,040
\$10,000 - 19,999	850	1,700	1,870	1,870	2,220	3,220	3,720	3,720	3,720	3,720	3,890	4,090
\$20,000 - 29,999	1,020	1,870	2,040	2,390	3,390	4,390	4,890	4,890	4,890	5,060	5,260	5,460
\$30,000 - 39,999	1,020	1,870	2,390	3,390	4,390	5,390	5,890	5,890	6,060	6,260	6,460	6,660
\$40,000 - 59,999	1,220	3,070	4,240	5,240	6,240	7,240	7,880	8,080	8,280	8,480	8,680	8,880
\$60,000 - 79,999	1,870	3,720	4,890	5,890	7,030	8,230	8,930	9,130	9,330	9,530	9,730	9,930
\$80,000 - 99,999	1,870	3,720	5,030	6,230	7,430	8,630	9,330	9,530	9,730	9,930	10,130	10,580
\$100,000 - 124,999	2,040	4,090	5,460	6,660	7,860	9,060	9,760	9,960	10,160	10,950	11,950	12,950
\$125,000 - 149,999	2,040	4,090	5,460	6,660	7,860	9,060	9,950	10,950	11,950	12,950	13,950	14,950
\$150,000 - 174,999	2,040	4,090	5,460	6,660	8,450	10,450	11,950	12,950	13,950	15,080	16,380	17,680
\$175,000 - 199,999	2,040	4,290	6,450	8,450	10,450	12,450	13,950	15,230	16,530	17,830	19,130	20,430
\$200,000 - 249,999	2,720	5,570	7,900	10,200	12,500	14,800	16,600	17,900	19,200	20,500	21,800	23,100
\$250,000 - 399,999	2,970	6,120	8,590	10,890	13,190	15,490	17,290	18,590	19,890	21,190	22,490	23,790
\$400,000 - 449,999	2,970	6,120	8,590	10,890	13,190	15,490	17,290	18,590	19,890	21,190	22,490	23,790
\$450,000 and over	3,140	6,490	9,160	11,660	14,160	16,660 Househo	18,660	20,160	21,660	23,160	24,660	26,160
Higher Paying Job						Job Annua		Wage & S	Salarv			
Annual Taxable	\$0 -	\$10,000 -	\$20,000 -	\$30,000 -	\$40,000 -	\$50,000 -	\$60,000 -	\$70,000 -	\$80,000 -	\$90,000 -	\$100,000-	\$110,000-
Wage & Salary	9,999	19,999	29,999	39,999	49,999	59,999	69,999	79,999	89,999	99,999	109,999	120,000
\$0 - 9,999	\$0	\$450	\$850	\$1,000	\$1,020	\$1,020	\$1,020	\$1,020	\$1,870	\$1,870	\$1,870	\$1,890
\$10,000 - 19,999	450	1,450	2,000	2,200	2,220	2,220	2,220	3,180	4,070	4,070	4,090	4,290
\$20,000 - 29,999	850	2,000	2,600	2,800	2,820	2,820	3,780	4,780	5,670	5,690	5,890	6,090
\$30,000 - 39,999	1,000	2,200	2,800	3,000	3,020	3,980	4,980	5,980	6,890	7,090	7,290	7,490
\$40,000 - 59,999	1,020	2,220	2,820	3,830	4,850	5,850	6,850	8,050	9,130	9,330	9,530	9,730
\$60,000 - 79,999	1,020	3,030	4,630	5,830	6,850	8,050	9,250	10,450	11,530	11,730	11,930	12,130
\$80,000 - 99,999	1,870	4,070	5,670	7,060	8,280	9,480	10,680	11,880	12,970	13,170	13,370	13,570
\$100,000 - 124,999	1,950	4,350	6,150	7,550	8,770	9,970	11,170	12,370	13,450	13,650	14,650	15,650
\$125,000 - 149,999	2,040	4,440	6,240	7,640	8,860	10,060	11,260	12,860	14,740	15,740	16,740	17,740
\$150,000 - 174,999	2,040	4,440	6,240	7,640	8,860	10,860	12,860	14,860	16,740	17,740	18,940	20,240
\$175,000 - 199,999	2,040	4,440	6,640	8,840	10,860	12,860	14,860	16,910	19,090	20,390	21,690	22,990
\$200,000 - 249,999	2,720	5,920	8,520	10,960	13,280	15,580	17,880	20,180	22,360	23,660	24,960	26,260
\$250,000 - 449,999	2,970	6,470	9,370	11,870	14,190	16,490	18,790	21,090	23,280	24,580	25,880	27,180
\$450,000 and over	3,140	6,840	9,940	12,640	15,160	17,660	20,160	22,660	25,050	26,550	28,050	29,550

## **FORM VA-4**

# COMMONWEALTH OF VIRGINIA DEPARTMENT OF TAXATION PERSONAL EXEMPTION WORKSHEET

(See back for instructions)

2.	If you wish to claim yourself, will find you are married and your spon his or her own certificate, will write the number of dependent on your income tax return (do	ouse is not claimed rite "1"ts you will be allowed to cl	aim		· · · · · · · · · · · · · · · · · · ·		
	Subtotal Personal Exemptions	(add lines 1 through 3)					
5.	Exemptions for age						
6.	<ul> <li>(b) If you claimed an exer will be 65 or older on an exer seemptions for blindness</li> <li>(a) If you are legally blind</li> <li>(b) If you claimed an exer</li> </ul>	er on January 1, write "1" mption on line 2 and your s January 1, write "1" , write "1" mption on line 2 and your , write "1"	pouse				
7.	Subtotal exemptions for age a	nd blindness (add lines 5 tl	nrough 6)				
8.	Total of Exemptions - add line	4 and line 7					
Yo		nd give the certificate to your er RGINIA INCOME TAX WIT				<u> </u>	
Cit	ty		State		Zip Code		
	• •	s for Age and Blindness Exemption Worksheet					
	(c) Total Exemptions - line	e 8 of the Personal Exempt	ion Worksheet				
2.	Enter the amount of additional	withholding requested (se	e instructions)				
3.	I certify that I am not subject to set forth in the instructions			(check h	ere)		
4.	I certify that I am not subject to				_		
	Under the Service member Civ Residency Relief Act		• •		ere)		
Sign	inature			Da	nte		

601064 Rev 08/1

#### **FORM VA-4 INSTRUCTIONS**

Use this form to notify your employer whether you are subject to Virginia income tax withholding and how many exemptions you are allowed to claim. You must file this form with your employer when your employment begins. If you do not file this form, your employer must withhold Virginia income tax as if you had no exemptions.

#### PERSONAL EXEMPTION WORKSHEET

You may not claim more personal exemptions on form VA-4 than you are allowed to claim on your income tax return unless you have received written permission to do so from the Department of Taxation.

- Line 1. You may claim an exemption for yourself.
- Line 2. You may claim an exemption for your spouse if he or she is not already claimed on his or her own certificate.
- Line 3. Enter the number of dependents you are allowed to claim on your income tax return.
  - **NOTE:** A spouse is not a dependent.
- Line 5. If you will be age 65 or over by January 1, you may claim one exemption on Line 5(a). If you claim an exemption for your spouse on Line 2, and your spouse will also be age 65 or over by January 1, you may claim an additional exemption on Line 5(b).
- Line 6. If you are legally blind, you may claim an exemption on Line 6(a). If you claimed an exemption for your spouse on Line 2, and your spouse is legally blind, you may claim an exemption on Line 6(b).

#### **FORM VA-4**

Be sure to enter your social security number, name and address in the spaces provided.

- Line 1. If you are subject to withholding, enter the number of exemptions from:
  - (a) Subtotal of Personal Exemptions line 4 of the Personal Exemption Worksheet
  - (b) Subtotal of Exemptions for Age and Blindness line 7 of the Personal Exemption Worksheet
  - (c) Total Exemptions line 8 of the Personal Exemption Worksheet
- Line 2. If you wish to have additional tax withheld, and your employer has agreed to do so, enter the amount of additional tax on this line.
- Line 3. If you are not subject to Virginia withholding, check the box on this line. You are not subject to withholding if you meet any one of the conditions listed below. Form VA-4 must be filed with your employer for each calendar year for which you claim exemption from Virginia withholding.
  - (a) You had no liability for Virginia income tax last year and you do not expect to have any liability for this year.
  - (b) You expect your Virginia adjusted gross income to be less than the amount shown below for your filing status:

	Taxable Years 2005, 2006 and 2007	Taxable Years 2008 and 2009	Taxable Years 2010 and 2011	Taxable Years 2012 and Beyond
Single	\$7,000	\$11,250	\$11,650	\$11,950
Married	\$14,000	\$22,500	\$23,300	\$23,900
Married, filing a separate return	\$7,000	\$11,250	\$11,650	\$11,950

- (c) You live in Kentucky or the District of Columbia and commute on a daily basis to your place of employment in Virginia.
- (d) You are a domiciliary or legal resident of Maryland, Pennsylvania or West Virginia whose only Virginia source income is from salaries and wages and such salaries and wages are subject to income taxation by your state of domicile.
- Line 4. Under the Servicemember Civil Relief Act, as amended by the Military Spouses Residency Relief Act, you may be exempt from Virginia income tax on your wages if (i) your spouse is a member of the armed forces present in Virginia in compliance with military orders; (ii) you are present in Virginia solely to be with your spouse; and (iii) you maintain your domicile in another state. If you claim exemption under the SCRA check the box on Line 4 and attach a copy of your spousal military identification card to Form VA-4.



### **Employment Eligibility Verification**

#### **Department of Homeland Security**

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No.1615-0047 Expires 05/31/2027

START HERE: Employers must ensure the form instructions are available to employees when completing this form. Employers are liable for failing to comply with the requirements for completing this form. See below and the <a href="Instructions">Instructions</a>.

**ANTI-DISCRIMINATION NOTICE:** All employees can choose which acceptable documentation to present for Form I-9. Employers cannot ask employees for documentation to verify information in **Section 1**, or specify which acceptable documentation employees must present for **Section 2** or Supplement B, Reverification and Rehire. Treating employees differently based on their citizenship, immigration status, or national origin may be illegal.

Section 1. Employee Inday of employment, but	formation t not befor	n and Attestation re accepting a jo	on: Emplo b offer.	oyee	es must compl	ete an	d sign Sec	tion 1 of F	orm I-9 r	no late	r than the <b>first</b>
Last Name (Family Name)		First Name	(Given Nar	me)		Middle	Initial (if any)	Other Las	Names Us	sed (if ar	ny)
Address (Street Number and I	Name)	A	pt. Number	(if an	y) City or Town	l			State		ZIP Code
Date of Birth (mm/dd/yyyy)	Date of Birth (mm/dd/yyyy)  U.S. Social Security Number				Employee's Email Address					e's Telep	phone Number
I am aware that federal la provides for imprisonme fines for false statement use of false documents, connection with the comthis form. I attest, under of perjury, that this infor including my selection of attesting to my citizensh immigration status, is trucorrect.  Signature of Employee  If a preparer and/or transports of the second state of t	ent and/or s, or the in ipletion of penalty mation, if the box ip or ue and	3. A lawful p 4. An alien a If you check	of the United zen national permanent re authorized to litem Number OR	of the esider o worrer 4.,	tes e United States (S nt (Enter USCIS o k until (exp enter one of these rm I-94 Admission	ee Instruction A-Num  date, if	any)  OR  For  Today's Date	eign Passpo	ort Number	r and Co	ountry of Issuance
Section 2. Employer Robusiness days after the emauthorized by the Secretary documentation in the Additi	ployee's firs of DHS. do	et day of employment ocumentation from ation box; see Ins	ent, and m List A OF tructions.	nust p R a co	ohysically examombination of de	ine, or e ocumer	examine cor station from	isistent with List B and I	nd sign <b>S</b> o an altern List C. En	ative p iter any	rocedure additional
		List A	OR		Lis	t B		AND		List	C
Document Title 1											
Issuing Authority											
Document Number (if any)											
Expiration Date (if any)				-1-1'4'							
Document Title 2 (if any)			A	aaiti	onal Information	on					
Issuing Authority											
Document Number (if any)											
Expiration Date (if any)											
Document Title 3 (if any)											
Issuing Authority											
Document Number (if any)											
Expiration Date (if any)				Che	eck here if you use	ed an alt	ernative proce	edure authori	zed by DH	S to exa	mine documents.
Certification: I attest, under pemployee, (2) the above-listed best of my knowledge, the en	d documenta	ation appears to be	genuine a	nd to	relate to the emp				First Da (mm/dd	•	ployment
Last Name, First Name and Titl	e of Employe	r or Authorized Rep	resentative		Signature of Em	ployer o	Authorized F	Representativ	e	Today's	s Date (mm/dd/yyyy)
Employer's Business or Organiz	zation Name		Employe	r's Bu	ısiness or Organiz	ation Ad	ldress, City or	Town, State	, ZIP Code	ı	

#### LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired.

\* Documents extended by the issuing authority are considered unexpired.

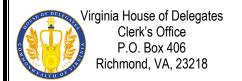
Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

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

LIST A		LIST B	LIST C			
Documents that Establish Both Identity and Employment Authorization	OR	Documents that Establish Identity AN	D Documents that Establish Employment Authorization			
U.S. Passport or U.S. Passport Card		Driver's license or ID card issued by a State or outlying possession of the United States	A Social Security Account Number card, unless the card includes one of the follow			
Permanent Resident Card or Alien     Registration Receipt Card (Form I-551)		provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address	restrictions:  (1) NOT VALID FOR EMPLOYMENT			
Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-		2. ID card issued by federal, state or local	(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION			
readable immigrant visa	_	government agencies or entities, provided it contains a photograph or information such as name, date of birth, sex, height, eye color,	(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION			
4. Employment Authorization Document that contains a photograph (Form I-766)		and address  3. School ID card with a photograph	Certification of report of birth issued by the Department of State (Forms DS-1350,			
5. For an individual temporarily authorized to work for a specific employer because			FS-545, FS-240)			
of his or her status or parole:		4. Voter's registration card	Original or certified copy of birth certificate issued by a State, county, municipal			
a. Foreign passport; and		5. U.S. Military card or draft record	authority, or territory of the United States			
<b>b.</b> Form I-94 or Form I-94A that has the following:		6. Military dependent's ID card	bearing an official seal  4. Native American tribal document			
(1) The same name as the		7. U.S. Coast Guard Merchant Mariner Card				
passport; and (2) An endorsement of the		8. Native American tribal document	5. U.S. Citizen ID Card (Form I-197)			
individual's status or parole as long as that period of		Driver's license issued by a Canadian government authority	d. Identification Card for Use of Resident         Citizen in the United States (Form I-179)			
endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or		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			
limitations identified on the form.		10. School record or report card	For examples, see Section 7 and Section 13 of the M-274 on uscis.gov/i-9-central.			
<b>6.</b> Passport from the Federated States of Micronesia (FSM) or the Republic of the		11. Clinic, doctor, or hospital record	The Form I-766, Employment			
Marshall Islands (RMI) with Form 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	Authorization Document, is a List A, <b>Item Number 4.</b> document, not a List C document.			
		Acceptable Receipts				
May be prese	entec	in lieu of a document listed above for a t	emporary period.			
		For receipt validity dates, see the M-274.				
Receipt for a replacement of a lost, stolen, or damaged List A document.	OR	Receipt for a replacement of a lost, stolen, or damaged List B document.	Receipt for a replacement of a lost, stolen, or damaged List C document.			
Form I-94 issued to a lawful permanent resident that contains an I-551 stamp and a photograph of the individual.						
Form I-94 with "RE" notation or refugee stamp issued to a refugee.						

<sup>\*</sup>Refer to the Employment Authorization Extensions page on <u>I-9 Central</u> for more information.

Form I-9 Edition 01/20/25 Page 2 of 4



Inquiries: Paula Lambert Finance Department 804.698.1514

## **DIRECT DEPOSIT**

#### **PAGES**

	Name				_	
	Financial Institution	ı			_	
	Circle One:	Checking	Savings			
financial so that	financial instit  o have the House of Delinstitution indicated all my pay may be prope	ution that includ elegates deposit m bove. I agree to not erly distributed. I ui	ed check or docume les the bank routing y net pay amount each tify my employer immedi nderstand that in the ev ited into my account, my	and account no	nto my account or ges to the inform r notifies my find	nation ancial
	amount of the adjustme	•	nou mio my doddam, my	<i>54.11.</i> 10 444.161.1 <u>2</u> 6	ou to uobiting uo	Joann
Signatui	re:			Date:		
Payroll <b>l</b>	Jse Only:					
Bank Routi	ng Number	Bank <i>I</i>	Account Number	- ō	Checking or Savings	
House Clerk's	s Office / Finance Department				November 2	2025