STATE OF GEORGIA

EMPLOYEE'S WITHHOLDING ALLOWANCE CERTIFICATE

1a. YOUR FULL NAME	1b. YOUR SOCIAL SECURITY NUMBER
2a. HOME ADDRESS (Number, Street, or Rural Route)	2b. CITY, STATE AND ZIP CODE
PLEASE READ INSTRUCTIONS ON REVE 3. MARITAL STATUS	RSE SIDE BEFORE COMPLETING LINES 3 - 8
(If you do not wish to claim an allowance, enter "0" in the bracket	ts beside your marital status.)
A. Single: enter 0 or 1	4. DEPENDENT ALLOWANCES []
B. Married Filing Joint, both spouses working: enter 0 or 1 or 2[]	
C. Married Filing Joint, one spouse working: enter 0 or 1 or 2 []	5. ADDITIONAL ALLOWANCES [] (complete worksheet below)
D. Married Filing Separate: enter 0 or 1 or 2 []	
E. Head of Household: enter 0 or 1 or 2 []	6. ADDITIONAL WITHHOLDING \$
7. LETTER USED (Marital Status A, B, C, D, or E) (Employer: The letter indicates the tax tables on pages 20 throu	
8. EXEMPT: Read the Line 8 instructions on page 2 be	efore completing this section.
I claim exemption from withholding because I incurred no C have a Georgia income tax liability this year. Check here	
I certify under penalty of perjury that I am entitled to the number of w on this Form G-4. Also, I authorize my employer to deduct per pay p	vithholding allowances or the exemption from withholding status claimed period the additional amount listed above.
Employee's Signature	Date
Employer: Complete Line 9 and mail entire form only if the emp If necessary, mail form to: Georgia Department of Revenue, Withho	ployee claims over 14 allowances or exempt from withholding. olding Tax Unit, P. O. Box 49432, Atlanta, GA 30359.
9. EMPLOYER'S NAME AND ADDRESS:	EMPLOYER'S FEIN:
	EMPLOYER'S WH#:
Do not accept forms claiming additional allowances unless th claiming exempt if numbers are written on Lines 3 - 7.	e worksheet below has been completed. Do not accept forms
WORKSHEET FOR CALCULAT	TING ADDITIONAL ALLOWANCES
1. COMPLETE THIS LINE ONLY IF USING STANDARD D Yourself: Age 65 or over Blind	
	per of boxes checked x 1300\$
2. ADDITIONAL ALLOWANCES FOR DEDUCTIONS:	
A. Federal Estimated Itemized Deductions	
B. Georgia Standard Deduction (enter one): Single/Hea Each Spou	ise \$1,500 \$
	\$
-	ome\$
	\$
-	ing\$
	e)\$
H. Divide the Amount on Line G by \$3,000. Enter total h (This is the maximum number of additional allowance	here and on Line 5 aboveere and on Line 5 above

INSTRUCTIONS FOR COMPLETING FORM G-4

Enter your full name, address and social security number in boxes 1a through 2b.

Line 3: Write the number of allowances you are claiming in the brackets beside your marital status.

- A. Single enter 1 if you are claiming yourself
- B. Married Filing Joint, both spouses working enter 1 if you claim yourself or 2 if you claim yourself and your spouse
- C. Married Filing Joint, one spouse working enter 1 if you claim yourself or 2 if you claim yourself and your spouse
- D. Married Filing Separate enter 1 if you claim yourself or 2 if you claim yourself and your spouse
- E. Head of Household enter 1 if you claim yourself but the individual(s) for whom you maintain a home does not qualify as a dependent; or 2 if you claim yourself and a qualified dependent for whom you maintain a home

Do not claim a deduction on Line 4 for a dependent used to qualify you as head of household

- Line 4: Enter the number of dependent allowances you are entitled to claim.
- Line 5: Complete the worksheet at the bottom of Form G-4 if you claim additional allowances. Enter the number on Line H here.

Failure to complete and submit the worksheet will result in automatic denial of your claim.

- Line 6: Enter a specific dollar amount that you authorize your employer to withhold in addition to the tax withheld based on your marital status and number of allowances.
- Line 7: Enter the letter of your marital status from Line 3. Enter total of the numbers on Lines 3 5.
- Line 8: Check the box if you qualify to claim exempt from withholding. You can claim exempt if you filed a Georgia income tax return last year and the amount on Line 4 of Form 500EZ or Line 16 of Form 500 was zero, **and** you expect to file a Georgia tax return this year and will not have a tax liability. You can not claim exempt if you did not file a Georgia income tax return for the previous tax year. **Do not complete Lines 3 7 if claiming exempt.**
 - **EXAMPLES:** Your employer withheld \$500 of Georgia income tax from your wages. The amount on Line 4 of Form 500EZ (or Line 16 of Form 500) was \$100. Your tax liability is the amount on Line 4 (or Line 16); therefore, you **do not qualify** to claim exempt.

Your employer withheld \$500 of Georgia income tax from your wages. The amount on Line 4 of Form 500EZ (or Line 16 of Form 500) was \$0 (zero). Your tax liability is the amount on Line 4 (or Line 16) and you filed a prior year income tax return; therefore, you **qualify** to claim exempt.

NOTE: Effective January 1, 2003, the deduction allowed for the dependents increased from \$2,700 to \$3,000. This does not apply to the deduction allowed for you or your spouse.

O.C.G.A. § **48-7-102** requires you to complete and submit Form G-4 to your employer in order to have tax withheld from your wages. By correctly completing this form, you can adjust the amount of tax withheld to meet your tax liability. Failure to submit a properly completed Form G-4 will result in your employer withholding tax as though you are single with zero allowances.

Employers are required to mail any Form G-4 claiming more than 14 allowances or exempt from withholding to the Georgia Department of Revenue for approval. Employers will honor the properly completed form as submitted pending notification from the Withholding Tax Unit. Upon approval, such forms remain in effect until changed or until February 15 of the following year. Employers who know that a G-4 is erroneous should not honor the form and should withhold as if the employee is single claiming zero allowances until a corrected form has been received.