Form SW-4 Instructions - revised 1/05/10

Purpose: Complete form SW-4 so your employer can withhold the correct amount of city income taxes from your pay.

Dependents: To qualify as your dependent (line 4 below), a person

- (a) Must receive more than one-half of his or her support from you for the year, and
- (b) Must have less than \$750.00 gross income during the year (except your child who is a student or who is under 19 years of age, and
- (c) Must not be claimed as an exemption by such person's husband or wife, and
- (d) Must be a citizen or resident of the United States, and
- (e) Must have your home as his/her principal residence and be a member of your household for the entire year, or Must be related to you as follows: Your son or daughter, grandchild, step-son/daughter, son/daughter-in-law, father, mother, grandparent, step-father/mother, father/mother-in-law, brother, sister, stepbrother/sister, half brother/sister, brother/sister-in-law, uncle, aunt, nephew, or niece (but only if related by blood).

Changes in exemptions: You *must* file a new certificate within 10 days if the number of exemptions previously claimed by you *decreases* for any of the following reasons:

- (a) Your wife/husband for whom you have been claiming exemption is divorced or legally separated, or claims her/his own exemption on a separate certificate.
- (b) The support of a dependent for whom you claimed exemption is taken over by someone else.
- (c) You find that a dependent for whom you claimed exemption will receive \$750.00 or more income of his/her own during the year (except your child who is a student and who is under 19 years of age).

Other Decreases: Such as the death of a wife, husband, or a dependent, do not affect your withholding until the next year, but require the filing of a new certificate by December 1 of the year in which they occur.

Change of Residence: You must file a new certificate within 10 days after you change your residence from or to a taxing city.

Employee: File this form with your employer. Otherwise your employer must withhold City of Saginaw income tax from your earnings without exemptions.

Employer: Keep this certificate with your record. If the information submitted by the employee is not believed to be true, correct and complete the *City of Saginaw* must be advised.

FORM SW-4 EMPLOYEE'S WITHHOLDING CERTIFICATE FOR											
CITY OF SAGINAW INCOME TAX											
City Resident or Non-City Resident			Your Social Security Number:								
Full Name: (First, Middle and Last Name)			Home Address: (Number & Street)								
City:			State:		Zip Code:						
Main place of employment: Print name of each city where you work for this employer and circle closest % of total earnings in each. This is for			City:		Under 25% ☐	40%	60% 80% 100%				
withholding purposes only.			City:		Under 25%	40%	60%	б <u></u>	80%	100%	
1. Exemptions for yourself: 2. 1			Exemptions for your spouse:				3. Enter Total number of boxes checked in 1& 2:				
Yourself age 65 or ov	er Blind	You	self	age 65	5 or over	Blind					
4. Other Exemptions: Number of exemptions for your children Number of exemptions for your other of					5. Enter total number of Other Exemptions in box 4 below:						
6. Add the number of exemptions which you have claimed in box 3 & 5 and write the total below:			7. Write the additional amounts you want withheld from each paycheck, if any:								
Employer's Name and Address:											
Employer's Name and Address: I certify that the information subm	nitted on this certifi	cate is tru	ıe, cor	rect and c	complete to	o the best o	f my l	know]	ledge and b	elief.	