

HIGHLANDS SWIM AND TENNIS CLUB

1515 Bryan Branch Road • McLean, VA 22101

APPLICATION FOR SEASONAL EMPLOYMENT

POSITION APPLIED FOR:	Lifeguard		
Name:			
First	Middle		Last
Address:	City	Chaha	7:
Address	City	State	Zip
Date of Birth://	E-mail address:		
Phone Number:/			
Are you at least 18 years of age?	Yes No _		
Proof of U.S. Citizenship or imm	igration status will be requ	ired upon employ	yment.
Are you legally eligible for empl	oyment in this country? Ye	es	No
Are you currently certified in Li Red Cross? Yes If yes, please provide the expira	No	Í	
Have you ever been employed b	y Highlands <mark>Swim and T</mark> en	nis Club before?	Yes No
If yes, dates and position:	Mark The State of		
Location:Dates of EmploynSupervisor's Nam	lifeguard experience: nent: ne & Contact:		
Reason for Leavir	ng:		

Are you available to start working	on Memo	rial Da _ʻ	y Week	end? Y	les	N	0	
Work availability while your		S	M	Т	W	R	F	S
school is in session starting May	From							
17 th - June 11 th (from 3pm-8pm)	То							
Weekends from 8am-8pm								
Memorial Day Weekend Availab From 10am-8pm	ility:		Fro To	m	Sat	Sun	M	on
747	1	S	M	Т	W	R	F	S
Work availability for the summer starting June 12 th - August 18 th	From	3	141	1	VV	11	1.	3
(from 8am-9pm)	To							
YAY 1 01 100 100 1 1 1 1	The same			m	¥47	В	Г	
Work availability while school is back in session starting August	From	S	M	T	W	R	F	S
19 th – Sep 8 th (from 3pm-8pm) Weekend from 8am-8pm	То							
Labor Day Weekend Availability		(A)	A	9	Sat	Sun	M	on
Labor Day Weekend Avanabinty			Fro	m	Sat	Suii	141	.011
	То							
7	Va Juli			/				
Do you have any vacations planned	1?	_ If yes,		give th	e dates:			

EMERGENCY INFORMATION

In the case of an emergency, please notify:Phone:
Can you perform the essential functions of this job with or without reasonable accommodations? Yes No
What, if any, accommodations are required?
Have you ever been convicted of a felony? If so, explain:
"Highlands Swim and Tennis Club is an equal opportunity employer. Our policy is to adhere to all applicable laws that prohibit discrimination in employment."
"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained here in and the references listed above may give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from any liability for any damage that may result from furnishing the same to you."
"I understand and agree that, if hired, my employment is at will for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice."
"Should I become injured on the job and file a claim under Workman's Compensation, I authorize any past or present treating doctor or hospital to release medical information requested by my employer or their insurance carrier for the purpose of processing my claim. A photocopy of this authorization shall be as valid as the original."
"UNDER VIRGINIA, MARYLAND AND NORTH CAROLINA LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100."
Signature Date

Lifeguard Position Description

Purpose

The primary responsibility as a lifeguard is to prevent drowning and other injuries from occurring. Candidates must be able to ensure the safety of members and guests by minimizing or eliminating hazardous situations or behaviors. Lifeguards must be able to enforce pool policies rules and be able to communicate effectively why policies and rules are in place.

Physical Demands

- Ability to react to emergency situations by quick movements, strenuous activity, and on occasion assist or lift persons in distress of varying weights.
- Required to remain alert to dangerous situations while sitting, standing or walking for various lengths of time

Minimum Qualifications

- Current Red Cross Lifeguard Certification Required.
- Current CPR/ First Aid/AED Certifications Required.
- Must be available to work a minimum of 15-20 hours per week.

Preferred Qualifications

- Previous lifeguarding experience but not required. Lifeguard training is provided for new candidates.
- Must be at least 15 years of age and acquire an Employment Certificate from: The Virginia Department of Labor and Industry (if 15 years old).
 - Strong interpersonal/communication skills to deal with a membership that has high standards and expectations.
 - Available to work from Opening day (May 18th) to end of summer season including
 Memorial and Labor Day weekends, and 4th of July.

Duties and Responsibilities include, but are not limited to:

- Recognize and respond effectively in emergency situations by activating the Emergency Action Plan (EAP).
- Actively guards and scan the pool area at all times; refrains from socializing while guarding.
- Communicate and enforce all Highlands Swim and Tennis Club policies and rules in a personable and professional manner.
- Dress and appearance are consistent with Highlands Swim and Tennis Club standards including wearing your swimsuit uniform, guard shirt, flip-flops, whistle and tube while on duty.
- Conduct pool inspections and report imbalances or concerns to the Pool/Assistant Managers.
- Proper radio protocol and response in a timely manner, includes radio communication to the front desk and Pool/Assistant Managers.
- Record daily participation duties and complete daily cleaning assignments.
- Attend and participate in regular in-service trainings.
- Provide a welcoming environment for all members and guests.
- Document any incidents and/or injuries and report to the Pool/Assistant Managers.
- Maintain a clean and tidy work space.
- Perform other duties as assigned...

Form W-4

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.

2025

OMB No. 1545-0074

internal Revenue Se	rvice	Tour within	iding is subject to review by the i	no.					
Step 1:	(a) F	irst name and middle initial	Last name		(b) So	cial security number			
Enter Personal Information	Addr	ess	name o	Does your name match the name on your social security card? If not, to ensure you get					
illorillation	City	r town, state, and ZIP code			credit f	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 survivi	ng spouse						
		Head of household (Check only if you're un	married and pay more than half the costs	of keeping up a home for y	ourself an	d a qualifying individual.			
are completing marital status, deductions, or	g this numl	the estimator at www.irs.gov/W4Ap form after the beginning of the year; per of jobs for you (and/or your spou its. Have your most recent pay stub ttor again to recheck your withholdir	expect to work only part of the se if married filing jointly), depes) from this year available when	year; or have change ndents, other income	s durino (not fro	g the year in your m jobs),			
		4 ONLY if they apply to you; other m withholding, and when to use the			on on ea	ach step, who can			
Step 2: Multiple Job	s	Complete this step if you (1) hold also works. The correct amount of							
or Spouse		Do only one of the following.							
Works		(a) Use the estimator at www.irs.gov/W4App for the most accurate withholding for this step (and Steps 3–4). If you or your spouse have self-employment income, use this option; or							
		(b) Use the Multiple Jobs Workshop	eet on page 3 and enter the resu	ult in Step 4(c) below;	or				
		(c) If there are only two jobs total, option is generally more accur higher paying job. Otherwise, (ate than (b) if pay at the lower p	aying job is more tha					
		4(b) on Form W-4 for only ONE of you complete Steps 3–4(b) on the F			bs. (You	r withholding will			
Step 3:		If your total income will be \$200,0	00 or less (\$400,000 or less if m	arried filing jointly):					
Claim		•	ng children under age 17 by \$2,0						
Dependent and Other		Multiply the number of other d		. \$	_ _				
Credits		Add the amounts above for qualif this the amount of any other credit		ents. You may add t	o 3	\$			
Step 4 (optional): Other		(a) Other income (not from job expect this year that won't hav This may include interest, divide	e withholding, enter the amount	_	I	\$			
Adjustments	S	(b) Deductions. If you expect to c want to reduce your withholdin the result here	aim deductions other than the sg, use the Deductions Workshee			\$			
		(c) Extra withholding. Enter any a	dditional tax you want withheld	each pay period	4(c)	\$			
Step 5: Sign Here	Unde	er penalties of perjury, I declare that this	certificate, to the best of my knowle	dge and belief, is true, o	correct, a	nd complete.			
	En	ployee's signature (This form is no	t valid unless you sign it.)	D	ate				
Employers Only	Emp	oyer's name and address		First date of employment	Employ- number	er identification (EIN)			
	1								

Cat. No. 10220Q

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;
- 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 www.irs.gov/w4App 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.

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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	Two jobs. 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, skip to line 3	1	\$
2	Three jobs. 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.		
	a 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	2 a	\$
	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	Divide the annual amount on line 1 or line 2c by the number of pay periods on line 3. Enter this amount here and in Step 4(c) 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 Sten 4(h) 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.

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	Married Filing Jointly or Qualifying Surviving Spouse											
Higher Paying Job	Higher Paying Job Lower Paying Job Annual Taxable Wage & 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 \$300,000 - 319,999	2,040 2,040	4,440 4,440	6,840 6,840	8,390 8,390	9,790 9,790	11,100 11,100	12,300 12,300	13,500 13,500	14,700 14,700	15,900 15,900	17,100	18,300 19,170
\$320,000 - 364,999	2,040	4,440	6,840	8,390	9,790	11,100	12,300	14,470	16,470	18,470	17,170 20,470	22,470
\$365,000 - 524,999	2,040	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
φο <u>Σ</u> ο,σοσ απα σνοι	0,110	0,010		Single o					20,200	20,700	01,200	00,700
Higher Paying Job							_	Wage & S	Salary			
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	\$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 \$200,000 - 240,000	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 \$250,000 - 399,999	2,720 2,970	5,570 6,120	7,900 8,590	10,200 10,890	12,500 13,190	14,800 15,490	16,600 17,290	17,900 18,590	19,200 19,890	20,500	21,800 22,490	23,100 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 = 449,999 \$450,000 and over	3,140	6,490	9,160	11,660	14,160	16,660	18,660	20,160	21,660	23,160	24,660	26,160
φ 100,000 απα στοι	0,110	0,100	0,100			Househo		20,100	21,000	20,100	1 2 1,000	20,100
Higher Paying Job								Wage & S	Salary			
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 \$150,000 - 174,000	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 \$175,000 - 199,999	2,040 2,040	4,440 4,440	6,240 6,640	7,640 8,840	8,860 10,860	10,860 12,860	12,860 14,860	14,860 16,910	16,740 19,090	17,740 20,390	18,940 21,690	20,240 22,990
\$175,000 - 199,999 \$200,000 - 249,999	2,040	5,920	8,520	10,960	13,280	15,580	17,880	20,180	22,360	23,660	24,960	26,260
\$250,000 - 249,999	2,720	6,470	9,370	11,870	14,190	16,490	18,790	21,090	23,280	24,580	25,880	27,180
\$450,000 - 449,999 \$450,000 and over	3,140	6,840	9,370	12,640	15,160	17,660	20,160	22,660	25,050	26,550	28,050	29,550
ψ+JU,UUU and UVE	3,140	0,040	3,340	12,040	13,100	17,000	20,100	۷۷,000	20,000	20,000	20,000	28,000

FORM VA-4

COMMONWEALTH OF VIRGINIA DEPARTMENT OF TAXATION PERSONAL EXEMPTION WORKSHEET

(See back for instructions)

2.	If you a on his Write t	are married and you or her own certifica he number of deper	elf, write "1" ir spouse is not claimed te, write "1" ndents you will be allowed (do not include your spou	I to claim			-	
4.	Subtot	al Personal Exempt	ions (add lines 1 through	3)			_	
5.	Exemp	otions for age						
6.	(a) (b) Exemp (a) (b)	If you claimed an will be 65 or older otions for blindness If you are legally but If you claimed an	r older on January 1, write exemption on line 2 and y on January 1, write "1" blind, write "1" exemption on line 2 and y blind, write "1"	our spouse			- - -	
7.	Subtot	al exemptions for a	ge and blindness (add line	es 5 through 6)				
8.	Total o	f Exemptions - add	line 4 and line 7					
	RM VA		re and give the certificate to y S VIRGINIA INCOME TAX Name					
Stı	eet Addr	ress						
Cit	У			State		Zip Code	Э	
1.		Subtotal of Person Personal Exempti Subtotal of Exemp	E LINES BELOW nter the number of exemple all Exemptions - line 4 of the food worksheet	the ess				
	(c)		- line 8 of the Personal Ex					
2.	Enter t	he amount of additi	onal withholding requeste	d (see instructions)				
3.			ect to Virginia withholding.			iere)		
4.	-	,	ect to Virginia withholding. er Civil Relief Act, as amer					
	Reside	ency Relief Act			(check h	iere)		

301064 Rev 08/1

Signature

Date

EMPLOYER: Keen exemption certificates with your records. If you believe the employee has claimed too many exem

EMPLOYER: Keep exemption certificates with your records. If you believe the employee has claimed too many exemptions, notify the Department of Taxation, P.O. Box 1115, Richmond, Virginia 23218-1115, telephone (804) 367-8037. Note: Employers may establish a system to electronically receive Forms VA-4 from employees, provided the system meets Internal Revenue Service requirements as specified in § 31.3402(f)(5)-1(c) of the Treasury Regulations (26 CFR).

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.