Directions for changing your name and/or address information:

All four forms must all be completed in order for the change to be effective

- 1. Name and/or address change form
- 2. City of flint FW-4 form
- 3. Michigan MI-4 form
- 4. Federal W-4 form

These forms may be submitted in person, mailed or faxed to:
Genesee County Human Resources
1101 Beach Street
Flint, MI 48502
810-257-3034
810-768-7097 (fax)

NAME AND/OR ADDRESS CHANGE FORM

Employee	 S.S. #		
If name change, previous name			
Department			
Old Address			
-			
New Address			
			· · · · · · · · · · · · · · · · · · ·
Telephone No	_ Flint City Resident	Yes	No
	Enrolled in ICMA	Yes	No
Signature	Date		

Form W-4 (2017)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2017 expires February 15, 2018. See Pub. 505, Tax Withholding and Estimated Tax.

Note: If another person can claim you as a dependent on his or her tax return, you can't claim exemption from withholding if your total income exceeds \$1,050 and includes more than \$350 of unearned income (for example, interest and dividends).

Exceptions. An employee may be able to claim exemption from withholding even if the employee is a dependent, if the employee:

- Is age 65 or older,
- Is blind, or
- Will claim adjustments to income; tax credits; or itemized deductions, on his or her tax return.

The exceptions don't apply to supplemental wages greater than \$1,000,000.

Basic instructions. If you aren't exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the Personal Allowances Worksheet below. See Pub. 505 for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

Nonresident alien. If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2017. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Future developments. Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at www.irs.gov/w4.

		Persona	I Allowances Works	heet (Keep fo	or your records.)					
Α	Enter "1" for yo	ourself if no one else can o	claim you as a dependent				A			
	ſ	 You're single and have 	e only one job; or)				
В	Enter "1" if:		only one job, and your spo			} .	В			
	(Your wages from a sec 	ond job or your spouse's v	wages (or the tot	al of both) are \$1,500 c	or less.		***************************************		
С	Enter "1" for yo	our spouse. But, you may	choose to enter "-0-" if ye	ou are married	and have either a worl	king spouse o	or more			
	than one job. (E	Entering "-0-" may help yo	u avoid having too little ta	ax withheld.) .			с			
D	Enter number of	of dependents (other than	your spouse or yourself)	you will claim o	n your tax return		D			
E	Enter "1" if you	will file as head of house	hold on your tax return (s	see conditions ι	ınder Head of house h	nold above)	E			
F	Enter "1" if you	have at least \$2,000 of ch	nild or dependent care e	xpenses for wh	nich you plan to claim	a credit .	F			
	(Note: Do not i	nclude child support payn	nents. See Pub. 503, Chil	d and Depende	nt Care Expenses, for	details.)				
G	Child Tax Cred	dit (including additional ch	ild tax credit). See Pub. 9	72, Child Tax C	redit, for more informa	ation.				
		ncome will be less than \$7				n less "1" if y	you			
		ır eligible children or less '		-						
		come will be between \$70,0	-		**	•				
Н	Add lines A throu	ugh G and enter total here. (N	lote: This may be different f	rom the number	of exemptions you claim	n on your tax re	eturn.) 🕨 H			
	For accuracy,	• If you plan to itemize and Adjustments World	or claim adjustments to i	ncome and wan	t to reduce your withho	olding, see the	Deduction	s		
	complete all	• If you are single and	you are single and have more than one job or are married and you and your spouse both work and the combined							
	worksheets	earnings from all jobs e	xceed \$50,000 (\$20,000 if	married), see the	e Two-Earners/Multipl	le Jobs Work	sheet on pa	ige 2		
	that apply.	to avoid having too little	e tax withheld. e situations applies, stop h	ere and enter th	e number from line H o	n line 5 of For	m W 4 bolo	147		
								VV.		
		Separate here and	give Form W-4 to your en	nployer. Keep th	ne top part for your re	cords				
	W-A	Employe	e's Withholding	Allowan	ce Certificate		OMB No. 1	545-0074		
Form	ment of the Treasury	► Whether you are ent	itled to claim a certain numb	er of allowances o	or exemption from withho	olding is	200	17		
	I Revenue Service	subject to review by t	he IRS. Your employer may b	e required to sen	d a copy of this form to th	ne IRS.	40			
1	Your first name	and middle initial	Last name		2	Your social	security num	ber		
		34 - 5 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4	<u> </u>	,						
	Home address (number and street or rural route	e)	3 Single	Married Married	, but withhold a	t higher Single	e rate.		
				Note: If married, be	ut legally separated, or spouse	is a nonresident a	lien, check the "	'Single" box.		
	City or town, sta	ate, and ZIP code		4 If your last na	ame differs from that sho	wn on your so	cial security of	card,		
					You must call 1-800-772	<u> </u>	lacement ca	ırd. 🕨 🗌		
5	Total number	of allowances you are cla	iming (from line H above	or from the app	licable worksheet on p	page 2)	5			
6	, , , ,									
7	7 I claim exemption from withholding for 2017, and I certify that I meet both of the following conditions for exemption.									
	•	nad a right to a refund of a			• • • • • • • • • • • • • • • • • • • •					
	-	expect a refund of all fede		•		у.	\$100 King	The state of		
		oth conditions, write "Exe								
Unde	er penalties of per	jury, I declare that I have ex	amined this certificate and	, to the best of m	ny knowledge and belie	t, it is true, co	rrect, and co	omplete.		
	loyee's signature									
		unless you sign it.) ▶	alata linas O and 10 and 16	dia a ta tha IDC		ate ▶	1.6.			
8	⊏mpioyer's nam	e and address (Employer: Com	piete iiries & and Tu only if send	aing to the IRS.)	9 Office code (optional) 10	J Employer id	entification nu	mber (EIN)		

Deductions and Adjustments Worksheet									
Note: Use this worksheet only if you plan to itemize deductions or claim certain credits or adjustments to income.									
1					g home mortgage interest, o				
					cellaneous deductions. For 2				
					ed filing jointly or you're a qua old and not a qualifying wido				
			ied filing jointly or qua				· · · · · · · ·		
2		9,350 if head		amying widow	,(01)		2 \$		
_			or married filing sepa	rotoly			<u>ε</u> <u>ψ</u>		
_		_	- ·		,		2		
3	·-		. If zero or less, enter						
4		•	•		y additional standard de	•	,		
5			•	-	nt for credits from the	-			
					o. 505.)		<u> </u>		
6	Enter an esti	mate of your 2	2017 nonwage incom		ridends or interest) .			And the second s	
7	Subtract line	e 6 from line 5	. If zero or less, enter	"-0-"			7 <u>\$</u>		
8	Divide the ar	mount on line	7 by \$4,050 and ente	r the result he	ere. Drop any fraction		8		
9	Enter the nur	nber from the	Personal Allowance	es Workshee	t, line H, page 1		9		
10	Add lines 8 a	and 9 and ente	er the total here. If yo	u plan to use	the Two-Earners/Mult	tiple Jobs Wo	orksheet,		
					d enter this total on Fo				
		Two-Earne	rs/Multiple Jobs	Worksheet	: (See Two earners o	or multiple i	obs on page 1.)		
Note	Name and Address of the Party o		the instructions unde			anarmanarmen en anarmanarmen de la composition de la composition de la composition de la composition de la comp	and the second s		
1		-		· · · · · · · · · · · · · · · · · · ·	sed the Deductions and A	Adiustments W	/orksheet) 1		
2					ST paying job and ent				
_					ing job are \$65,000 or I				
	than "3" .	• .			* •		2		
3					om line 1. Enter the res	eult boro (if z	********		
3			-		of this worksheet	•			
Mada									
Note					age 1. Complete lines	tnrougn 9 be	elow to		
	_		olding amount necess	sary to avoid	a year-end tax biii.				
4			2 of this worksheet			4			
5	Enter the nur	nber from line	1 of this worksheet			5			
6	Subtract line	5 from line 4					6		
7	Find the amo	ount in Table 2	2 below that applies t	o the HIGHE S	ST paying job and ente	r it here .			
8	Multiply line	7 by line 6 an	d enter the result her	e. This is the	additional annual withh	olding neede	d 8 \$	-	
9	Divide line 8 k	y the number	of pay periods remaini	ng in 2017. Fo	r example, divide by 25	if you are paid	every two		
9 Divide line 8 by the number of pay periods remaining in 2017. For example, divide by 25 if you are paid every two weeks and you complete this form on a date in January when there are 25 pay periods remaining in 2017. Enter									
the result here and on Form W-4, line 6, page 1. This is the additional amount to be withheld from each paycheck 9 \$									
Table 1 Table 2									
	Married Filing	Jointly	All Other	'S	Married Filing J	lointly	All Othe	rs	
If wans	s from LOWEST	Enter on	If wages from LOWEST	Enter on	If wages from HIGHEST	Enter on	If wages from HIGHEST	Enter on	
	job are—	line 2 above	paying job are—	line 2 above	paying job are—	line 7 above	paying job are—	line 7 above	
	\$0 - \$7,000	0	\$0 - \$8,000	0	\$0 - \$75,000	\$610	\$0 - \$38,000	\$610	
	001 - 14,000	1	8,001 - 16,000	1	75,001 - 135,000	1,010	38,001 - 85,000	1,010	
	001 - 22,000 001 - 27,000	2 3	16,001 - 26,000 26,001 - 34,000	2 3	135,001 - 205,000 205,001 - 360,000	1,130 1,340	85,001 - 185,000 185,001 - 400,000	1,130 1,340	
,	001 - 27,000	4	34,001 - 34,000	3 4	360,001 - 405,000	1,420	400,001 - 400,000 400,001 and over	1,600	
35,0	001 - 44,000	5	44,001 - 70,000	5	405,001 and over	1,600			
	001 - 55,000 001 - 65,000	6 7	70,001 - 85,000 85,001 - 110,000	6 7					
65,0	001 - 75,000	8	110,001 - 125,000	8					
	001 - 80,000	9	125,001 - 140,000	9					
	001 - 95,000 001 - 115,000	10 11	140,001 and over	10					
115,0	115,001 - 130,000 12								
	001 - 140,000 001 - 150,000	13 14							

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 who claims no withholding allowances; 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 possessions 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 FW-4 Instructions

Purpose: Complete form FW-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 \$600 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 \$600 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 Flint 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 Flint** must be advised.

FORM FW-4	EMPLOYEE'S WITHHOLDING CERTIFICATE FOR CITY OF FLINT INCOME TAX					
City Resident or Non-City Resident			Your Social Security Number:			
Full Name: (First, Middle and L	ast Name)	Home	e Address: (1	Number & Street)		
City:			:	Zip Code:		
1. Exemptions for yourself: Yourself age 65 or o		emptions for your spouse: 3. Enter Total number of boxes checked in 1& 2: Sourself age 65 or over Blind				
4. Other Exemptions: Number of exemptions for your children	nptions lependents	5. Enter total number of Other Exemptions in box 4 below:				
6. Add the number of exempticlaimed in box 3 & 5 and write			rite the addineck, if any:	tional amounts you wan	t withheld from each	
Employer's Name and Address:						
I certify that the information sub	mitted on this certifica	te is true	, correct and		knowledge and belief.	
SIGNATURE:			DATE:			

MI-W4

EMPLOYEE'S MICHIGAN WITHHOLDING EXEMPTION CERTIFICATE STATE OF MICHIGAN - DEPARTMENT OF TREASURY

This certificate is for Michigan income tax withholding purposes only. You must file a revised form within 10 days if your exemptions decrease or your residency status changes from nonresident to resident. Read instructions below before completing this form.

Issued under P.A. 281 of 1967.	, ,	▶ 1. Social Security Number	▶ 2. Date of Birth			
▶ 3. Type or Print Your First Name, Middle Initial and Last	Name	4. Driver License Number				
Home Address (No., Street, P.O. Box or Rural Route)		▶ 5. Are you a new employee? Yes If Yes, enter date of hire				
City or Town	State ZIP Code ·	No	· L			
Enter the number of personal and depender. Additional amount you want deducted from (if employer agrees)	n each pay		. 7. \$.00			
8. I claim exemption from withholding because a. A Michigan income tax liability is b. Wages are exempt from withhold c. Permanent home (domicile) is located.	not expected this year. ding. Explain:	sident members of flow-through enti				
EMPLOYEE: If you fail or refuse to file this form, your employer must withhold Michigan income tax	Under penalty of perjury, I certify that the number of withholding exemptions claimed on this certificate does not exceed the number to which I am entitled. If claiming exemption from withholding, I certify that I anticipate that I will not incur a Michigan income tax liability for this year.					
from your wages without allowance for any exemptions. Keep a copy of this form for your records.	9. Employee's Signature	▶ Date				
INSTRUCTIONS TO EMPLOYER: Employers must report all new hires to the State of Michigan. Keep a copy of this certificate with your records. If the employee claims 10 or more personal and dependent exemptions or claims a status exempting the employee from withholding, you must file their original MI-W4 form with the Michigan Department of Treasury. Mail to: New Hire Operations Center, P.O. Box 85010; Lansing, MI 48908-5010.	▶11. Federal Employer Identification Number					

INSTRUCTIONS TO EMPLOYEE

You must submit a Michigan withholding exemption certificate (form MI-W4) to your employer on or before the date that employment begins. If you fail or refuse to submit this certificate, your employer must withhold tax from your compensation without allowance for any exemptions. Your employer is required to notify the Michigan Department of Treasury if you have claimed 10 or more personal and dependent exemptions or claimed a status which exempts you from withholding.

You MUST file a new MI-W4 within 10 days if your residency status changes or if your exemptions decrease because: a) your spouse, for whom you have been claiming an exemption, is divorced or legally separated from you or claims his/her own exemption(s) on a separate certificate, or b) a dependent must be dropped for federal purposes.

Line 5: If you check "Yes," enter your date of hire (mo/day/year).

Line 6: Personal and dependent exemptions. The total number of exemptions you claim on the MI-W4 may not exceed the number of exemptions you are entitled to claim when you file your Michigan individual income tax return.

If you are married and you and your spouse are both employed, you both may not claim the same exemptions with each of your employers. If you hold more than one job, you may not claim the same exemptions with more than one employer. If you claim the same exemptions at more than one job, your tax will be under withheld.

Line 7: You may designate additional withholding if you expect to owe more than the amount withheld.

Line 8: You may claim exemption from Michigan income tax withholding ONLY if you do not anticipate a Michigan income tax liability for the current year because all of the following exist: a) your employment is less than full time, b) your personal and dependent exemption allowance exceeds your annual compensation, c) you claimed exemption from federal withholding, d) you did not incur a Michigan income tax liability for the previous year. You may also claim exemption if your permanent home (domicile) is located in a Renaissance Zone. Members of flow-through entities may not claim exemption from nonresident flow-through withholding. For more information on Renaissance Zones call the Michigan Tele-Help System, 1-800-827-4000. Full-time students that do not satisfy all of the above requirements cannot claim exempt status.

Web Site

Visit the Treasury Web site at: www.michigan.gov/businesstax