Employee’s Withholding Allowance Certificate
North Carolina Department of Revenue

Social Security Number

Marital Status
- Single
- Head of Household
- Married or Qualifying Widow(er)

First Name (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS) M.I. Last Name

Address

City

State Zip Code (5 Digit) Country (If not U.S.)

CAUTION: If you furnish an employer with an Employee’s Withholding Allowance Certificate that contains information which has no reasonable basis and results in a lesser amount of tax being withheld than would have been withheld had you furnished reasonable information, you are subject to a penalty of 50% of the amount not properly withheld.

I certify, under penalties provided by law, that I am entitled to the number of withholding allowances claimed on line 1 above, or if claiming exemption from withholding, that I am entitled to claim the exempt status on line 3 or 4, whichever applies.

Employee’s Signature

Date

Employer’s Name (USE CAPITAL LETTERS)

Employer’s Address

City

State Zip Code (5 Digit) Country (If not U.S.)

Web 12-09

(See Form NC-4 Instructions before completing this form)
Deductions, Adjustments, and Tax Credits Worksheet

1. Additional withholding allowances may be claimed if you expect to have allowable itemized deductions exceeding the standard deduction. Enter an estimate of the total itemized deductions to be claimed on your federal tax return less the amount of any State income tax included in your federal deductions ........................................................................................................... 

2. Enter $4,400 if head of household $3,000 if single $3,000 if married filing separately $6,000 if married filing jointly or qualifying widow(er) ........................................................................................... 

3. Subtract line 2 from line 1, enter the result here ........................................................................ 

4. Enter an estimate of your federal adjustments to income and your State deductions from federal taxable income .......................................................................................................................... 

5. Add lines 3 and 4 .................................................................................................................. 

10. Divide the amount on line 9 by $2,500 ($2,000 if you expect your income from all sources for the year to equal or exceed the following amounts for your filing status: $60,000 - single; $80,000 - head of household; $50,000 - married or qualifying widow(er)) and enter the result here. Drop any fraction .................................................................................................................. 

11. If you are entitled to tax credits, for each $175 ($140 if you expect your income from all sources for the year to equal or exceed the following amounts for your filing status: $60,000 - single; $80,000 - head of household; $50,000 - married or qualifying widow(er)) of tax credit, enter "1" additional allowance .......................................................................................................... 

12. Add lines 10 and 11 and enter total here .............................................................................. 

13. If you completed this worksheet on the basis of married filing jointly, enter the number from line 12 that your spouse will claim ........................................................................................................... 

14. Subtract line 13 from line 12 and enter the total here and on line E of the Personal Allowances Worksheet .................................................................................................................................