## DW-4

## EMPLOYEE'S WITHHOLDING CERTIFICATE FOR CITY OF DETROIT INCOME TAX

1. Print Full Name			Social Security No.				Office, Plant, Dept.				Employee Identification No.		
2. Address, Number and Street			City, Township or Village where you reside						Sta	ate	Zip Code		
Predominant Place of Employment     Print name of each city where you work for this			City Under 25% 40% 60%						80% 1009		Renaissance Zone Exemption		
employer and circle closest % of total earnings in each.		City				Under 25% 40% 60% 80% 100%				Renaissance Zone Exemption			
Exemptions for yourself									Enter number of exemptions checked				
Exemptions for your wife (husband)											Enter number of exemptions checked		
6. (a) Exemptions for	or your children		Number	1 6 (h) =xomp				r N	Number		Enter total of line 6 (a plus b)		
7. Add the number of exemptions which you have claimed on lines 4, 5 and 6 above and write the total												<b>→</b>	
I certify that the information submitted on this certificate is true, correct and complete to the best of my knowledge and belief													
8. Date			Się	Signature									
	4. Exemptions for yourself 5. Exemptions for your wife (husband) 6. (a) Exemptions for 7. Add the number of elements of the control of the co	4. Exemptions for your wife (husband)  6. (a) Exemptions for your ch  7. Add the number of exemption my knowledge and belief	City, Tow  City  City  City  4. Exemptions for yourself  5. Exemptions for your wife (husband)  6. (a) Exemptions for your children  7. Add the number of exemptions which your knowledge and belief	City, Township or Vill  City  City  4. Exemptions for yourself  5. Exemptions for your wife (husband) Regular exemption  6. (a) Exemptions for your children  7. Add the number of exemptions which you have clair I certify that the information submitted on this certific my knowledge and belief	City, Township or Village v  City  City  4. Exemptions	City, Township or Village where you reside  City  4. Exemptions for yourself exemption 65 or over at end of your wrife (husband) Regular exemption 65 or over at end of your wrife (husband) Number 6. (a) Exemptions for your children Number 6. (b) Exemption 7. Add the number of exemptions which you have claimed on lines 4, 5 and 6 I certify that the information submitted on this certificate is true, correct and my knowledge and belief	City, Township or Village where you reside  City Under 25%  City Under 25%  4. Exemptions for yourself exemption 65 or over at end of year  5. Exemptions for your wife (husband) Regular exemption 65 or over at end of year  6. (a) Exemptions for your children Number 6. (b) Exemptions for your wife (husband) Regular exemption 65 or over at end of year  7. Add the number of exemptions which you have claimed on lines 4, 5 and 6 above ar I certify that the information submitted on this certificate is true, correct and complete my knowledge and belief	City, Township or Village where you reside  City Under 25% 40%  City Under 25% 40%  4. Exemptions for yourself exemption 65 or over at end of year exemption for your wife (husband) Regular exemption 65 or over at end of year exemption 65 or over at end of year exemption 6. (a) Exemptions for your children Number 6. (b) Exemptions for your othe dependents  7. Add the number of exemptions which you have claimed on lines 4, 5 and 6 above and write 1 certify that the information submitted on this certificate is true, correct and complete to the my knowledge and belief	City, Township or Village where you reside  City Under 25% 40% 60%  City Under 25% 40% 60%  City Additional exemption if 65 or over at end of year exemption  S. Exemptions for yourself exemption Additional exemption if 65 or over at end of year exemption  S. Exemptions for Regular exemption Additional exemption if 65 or over at end of year exemption  S. Exemptions for your other exemption 65 or over at end of year exemption  Additional exemption if 65 or over at end of year exemption  Additional exemption if 65 or over at end of year exemption  Additional exemption if 65 or over at end of year exemption  Additional exemption if 65 or over at end of year exemption  Additional exemption if 65 or over at end of year exemption  Additional exemption if 65 or over at end of year exemption  Additional exemption if 65 or over at end of year exemption  Additional exemption if 65 or over at end of year exemption  Additional exemption if 65 or over at end of year exemption  Additional exemption if 65 or over at end of year exemption  Additional exemption if 65 or over at end of year exemption  Exemptions for your other of exemptions which you have claimed on lines 4, 5 and 6 above and write the total interest in the information submitted on this certificate is true, correct and complete to the best of my knowledge and belief	City, Township or Village where you reside  City Under 25% 40% 60% 80% 1009 25% 40% 40% 60% 80% 1009 25% 40% 40% 40% 40% 40% 40% 40% 40% 40% 40	City, Township or Village where you reside  City  Under 25% 40% 60% 80% 100%  Rei 25% 40% 60% 80% 100%  Rei 25% 40% 60% 80% 100%  4. Exemptions for yourself  Exemptions for yourself  S. Exemptions for your children  Additional exemption if 65 or over at end of year exemption if blind exemption if blind exemption if 65 or over at end of year exemption if blind exemption if	City, Township or Village where you reside  City  Additional exemption if exemption if exemption if exemption if blind  Enter number of exemptions check  City  City  City  City  City  City  City  City  City  Additional exemption if blind  Enter number of exemptions check  City  City  City  Additional exemption if blind  Enter number of exemptions check  City  Additional exemption if blind  Enter number of exemptions check  City  Additional exemption if blind  Enter number of exemptions check  City  Additional exemption if Additional exemption if exemption if blind  Enter number of exemptions check  City  City	

LINE 3 INSTRUCTIONS — If you work for this employer in more than two cities or communities, print names of the two Michigan cities or communities where you perform the greatest percentage of your work. Circle the closest percent of total earnings for work done or services rendered in each city or community listed. The estimated percent of total earnings from this employer for work done or services performed within taxing cities (line 3 on other side) is for withholding purposes only. In determining final tax liability this estimate is subject to substantiation and audit.

RENAISSANCE ZONE EXEMPTION — Attach copy of Certification of Qualification.

EXEMPTIONS — An employee is allowed the same number of exemptions for himself and dependents as for federal income tax purposes, except that additional withholding allowances claimed on Schedule A of Federal Form W-4 are not allowed for City of Detroit income tax purposes.

 $\hbox{CHANGES IN EXEMPTIONS} - \hbox{You should file a new certificate with your employer at any time the number of your exemptions changes. } \\$ 

CHANGE OF RESIDENCE — You must file a new certificate within 10 days after you change your residence from or to a taxing city.

CHANGES IN EMPLOYMENT — You must file a new certificate by December 1 of each year if your Line 3 estimate of the percent of work done or services to be rendered in cities levying an income tax will change for the ensuing year.

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