

Minnesota Employee Withholding Allowance/Exemption Certificate

Employees

If you are claiming the same number of Minnesota allowances as federal and the number claimed is 10 or less, do not complete this form.

However, you must complete and provide your employer with Form W-4MN if you:

- claim fewer Minnesota withholding allowances than your federal allowances (your Minnesota allowances cannot exceed the number of your federal allowances),
- claim more than 10 Minnesota withholding allowances,
- want additional Minnesota withholding deducted from your pay each pay period, or
- claim to be exempt from federal withholding or claim to be exempt from Minnesota withholding.

Employee information	Employee's first name and initial	Last name	Employee's Social Security number
	Permanent address		Marital status (check one box) <input type="checkbox"/> Single; Married, but legally separated; or Spouse is a nonresident alien <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate
	City	State	Zip code

Employees: Read instructions on back, complete Section 1 or Section 2, sign and give the completed form to your employer.

Minnesota allowances	<input type="checkbox"/> Section 1 — Determining Minnesota allowances
	Complete Section 1 if you claim fewer Minnesota allowances than your federal allowances, AND/OR if you want additional Minnesota withholding deducted each pay period.
	<p>1 Total number of federal allowances claimed on federal Form W-4 1 _____</p> <p>2 Total number of Minnesota allowances (<i>line 2 cannot be more than line 1</i>) 2 _____</p> <p>3 Additional Minnesota withholding you want deducted each pay period 3 \$ _____</p>

Exempt from Minnesota withholding	<input type="checkbox"/> Section 2 — Exemption from Minnesota withholding for calendar year: _____
	Complete Section 2 if you claim to be exempt from Minnesota income tax withholding (<i>see Section 2 instructions for qualifications</i>). If applicable, check one box below to indicate the reason why you believe you are exempt:
	<input type="checkbox"/> I meet the requirements and claim exempt from both federal and Minnesota income tax withholding. <input type="checkbox"/> Even though I did not claim exempt from federal withholding, I claim exempt from Minnesota withholding because I had no Minnesota income tax liability last year, I received a refund of all Minnesota income tax withheld, AND I expect to have no Minnesota income tax liability this year. <input type="checkbox"/> My spouse is a military service member assigned to a military location in Minnesota, my domicile (legal residence) is in another state, AND I am in Minnesota solely to be with my spouse. My state of domicile is _____

Sign here	<i>I certify that all information provided in Section 1 or Section 2 is correct. I understand there is a \$500 penalty for filing a false withholding allowance/exemption certificate.</i>		
	Employee's signature	Date	Daytime phone

Employees: Give the completed form to your employer.

Employers

If you are required to send a copy of this form to the Department of Revenue (*see instructions*), enter the employer information below and mail this form to: Minnesota Revenue, Mail Station 6501, St. Paul, MN 55146-6501. A \$50 penalty may be assessed for each required Form W-4MN not filed with the department.

Keep a copy for your records.

Employer information	Name of employer	Federal employer ID number (FEIN)	Minnesota tax ID number
	Address	City	State Zip code

Questions? Website: www.taxes.state.mn.us. Email: withholding.tax@state.mn.us.
Phone: 651-282-9999 or 1-800-657-3594. TTY users: Call 711 for Minnesota Relay