

**Form
W-4ME**

**MAINE
Employee's Withholding Allowance Certificate**

1. Type or print your first name _____ M.I. _____ Last name _____ _____ Home address (number and street) _____ City or town _____ State _____ ZIP code _____	2. Your social security number [][][] - [][] - [][][][] 3. <input type="checkbox"/> Single or Head of Household <input type="checkbox"/> Married <input type="checkbox"/> Married, but withholding at higher single rate Note: If married but legally separated, or spouse is a nonresident alien, check the single box.
4. Total number of allowances you are claiming on the Personal Allowances Worksheet, line E below4. _____	
5. Additional amount, if any, you want withheld from your paycheck.....5. \$ _____	
6. If you do not want any state income tax withheld, check the appropriate box that applies to you (you must qualify - see instructions below). By signing below, you certify that you qualify for the exemption that you select:	
a. You wrote "Exempt" on your federal Form W-4..... 6a. <input type="checkbox"/>	
b. You wrote "No Withholding" on your federal Form W-4P..... 6b. <input type="checkbox"/>	
c. You are a resident employee with no Maine tax liability in prior and current years 6c. <input type="checkbox"/>	
d. You are a recipient of periodic retirement payments with no tax liability in prior and current years 6d. <input type="checkbox"/>	
e. Your spouse is a member of the military assigned to a location in Maine and you qualify for exemption under the Military Spouse's Residency Relief Act. You must attach supporting documents. See instructions. 6e. <input type="checkbox"/>	
7. Check this box if you are an enrolled tribal member residing on tribal land in Maine and you are claiming an exemption from Maine withholding on the wages, salaries, or other compensation derived from or connected with sources on tribal land in Maine (that is, wages, salaries, or other compensation for work performed in Maine on tribal land). See instructions for additional information. 7. <input type="checkbox"/>	

Under penalties of perjury, I certify that I am entitled to the number of withholding allowances or the exemption claimed on this certificate.

EMPLOYEE'S/PAYEE'S SIGNATURE

(Form is not valid unless you sign it.) ▶

Date ▶

TO BE COMPLETED BY EMPLOYER/PAYER (see instructions). Complete lines 8 through 11 only if sending to Maine Revenue Services.	
8. Employer/Payer Name and Address _____ _____ _____	9. Identification Number _____ _____
10. Employer/Payer Contact Person _____	11. Contact Person's Phone Number ([][][]) [][][] - [][][][]

----- Cut here and give the certificate above to your employer. Keep the part below for your records. -----

Personal Allowances Worksheet - for line 4 above

A. Enter "1" for yourself if no one else can claim you as a dependent.A. _____

B. Enter "1" for your spouse if you will file as married filing jointly. You may choose to enter "0" if you are married and have either a working spouse or more than one job. (Entering "0" may help avoid having too little tax withheld).....B. _____

C. Enter "1" if you will be filing as Head of Household..... C. _____

D. Enter the number of children and dependents eligible for the federal child tax credit or the federal credit for other dependents D. _____

E. Add lines A through D. (Maximum number of allowances you may claim)E. _____