FORM VA-4

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF TAXATION
PERSONAL EXEMPTION WORKSHEET
(See back for instructions)

1. If you wish to claim yourself, write "1" .................................................................

2. If you are married and your spouse is not claimed
   on his or her own certificate, write "1" .................................................................

3. Write the number of dependents you will be allowed to claim
   on your income tax return (do not include your spouse) ........................................

4. Subtotal Personal Exemptions (add lines 1 through 3) ...........................................

5. Exemptions for age
   (a) If you will be 65 or older on January 1, write "1" ................................................
   (b) If you claimed an exemption on line 2 and your spouse
       will be 65 or older on January 1, write "1" ..........................................................

6. Exemptions for blindness
   (a) If you are legally blind, write "1" ..........................................................................
   (b) If you claimed an exemption on line 2 and your
       spouse is legally blind, write "1" ..........................................................................

7. Subtotal exemptions for age and blindness (add lines 5 through 6) ..........................

8. Total of Exemptions - add line 4 and line 7 ..............................................................

---

Detach here and give the certificate to your employer. Keep the top portion for your records

FORM VA-4
EMPLOYEE'S VIRGINIA INCOME TAX WITHHOLDING EXEMPTION CERTIFICATE

Your Social Security Number

Name

Street Address

City

State

Zip Code

COMPLETE THE APPLICABLE LINES BELOW

1. If subject to withholding, enter the number of exemptions claimed on:
   (a) Subtotal of Personal Exemptions - line 4 of the
       Personal Exemption Worksheet .................................................................
   (b) Subtotal of Exemptions for Age and Blindness
       line 7 of the Personal Exemption Worksheet ..............................................
   (c) Total Exemptions - line 8 of the Personal Exemption Worksheet ....................

2. Enter the amount of additional withholding requested (see instructions) ..................

3. I certify that I am not subject to Virginia withholding. I meet the conditions
   set forth in the instructions ................................................................. (check here) 

4. I certify that I am not subject to Virginia withholding. I meet the conditions set forth
   Under the Service member Civil Relief Act, as amended by the Military Spouses
   Residency Relief Act ................................................................. (check here) 

---

Signature

Date

EMPLOYER: Keep exemption certificates with your records. If you believe the employee has claimed too many exemptions, notify the Department of Taxation, P.O. Box 1115, Richmond, Virginia 23218-1115, telephone (804) 367-8037. Note: Employers may establish a system to electronically receive Forms VA-4 from employees, provided the system meets Internal Revenue Service requirements as specified in § 31.3402(f)(5)-1(c) of the Treasury Regulations (26 CFR).