



# NC-4 Employee's Withholding Allowance Certificate

11-19

**PURPOSE** - Complete Form NC-4 so that your employer can withhold the correct amount of State income tax from your pay. If you do not provide an NC-4 to your employer, your employer is required to withhold based on the filing status, "Single" with zero allowances.

**FORM NC-4 EZ** - You may use Form NC4-EZ if you plan to claim either the N.C. Standard Deduction or the N.C. Child Deduction Amount (but no other N.C. deductions), and you do not plan to claim any N.C. tax credits.

**FORM NC-4 NRA** - If you are a nonresident alien you must use Form NC-4 NRA. In general, a nonresident alien is an alien (not a U.S. citizen) who has not passed the green card test or the substantial presence test. (See Publication 519, U.S. Tax Guide for Aliens, for more information on the green card test and the substantial presence test.)

**FORM NC-4 BASIC INSTRUCTIONS** - Complete the NC-4 Allowance Worksheet. The worksheet will help you determine your withholding allowances based on federal and State adjustments to gross income including the N.C. Child Deduction Amount, N.C. itemized deductions, and N.C. tax credits. However, you may claim fewer allowances than you are entitled to if you wish to increase the tax withheld during the tax year. If your withholding allowances decrease, you must file a new NC-4 with your employer within 10 days after the change occurs. Exception: When an individual ceases to be "Head of Household" after maintaining the household for the major portion of the year, a new NC-4 is not required until the next year.

**TWO OR MORE JOBS** - If you have more than one job, determine the total number of allowances you are entitled to claim on all jobs using one Form NC-4 Allowance Worksheet. Your withholding will usually be most accurate when all allowances are claimed on the NC-4 filed for the higher paying job and zero allowances are claimed for the other. You should also refer to the "Multiple Jobs Table" to determine the additional amount to be withheld on Line 2 of Form NC-4. (See page 4).

**NONWAGE INCOME** - If you have a large amount of nonwage income, such as interest or dividends, you should consider making estimated tax payments using Form NC-40 to avoid underpayment of estimated tax interest. Form NC-40 is available on the Department's website at [www.ncdor.gov](http://www.ncdor.gov).

**HEAD OF HOUSEHOLD** - Generally you may claim "Head of Household" filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals.

**SURVIVING SPOUSE** - You may claim "Surviving Spouse" filing status only if your spouse died in either of the two preceding tax years and you meet the following requirements:

1. Your home is maintained as the main household of a child or stepchild for whom you can claim a federal exemption; and
2. You were entitled to file a joint return with your spouse in the year of your spouse's death.

**MARRIED TAXPAYERS** - For married taxpayers, both spouses must agree as to whether they will complete the NC-4 Allowance Worksheet based on the filing status, "Married Filing Jointly" or "Married Filing Separately."

- Married taxpayers who complete the worksheet based on the filing status, "Married Filing Jointly" should consider the sum of both spouses' income, federal and State adjustments to income, and State tax credits to determine the number of allowances.
- Married taxpayers who complete the worksheet based on the filing status, "Married Filing Separately" should consider only his or her portion of income, federal and State adjustments to income, and State tax credits to determine the number of allowances.

**All NC-4 forms are subject to review by the North Carolina Department of Revenue. Your employer may be required to send this form to the North Carolina Department of Revenue.**

**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.

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



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# NC-4 Employee's Withholding Allowance Certificate

**1. Total number of allowances you are claiming**  
(Enter zero (0), or the number of allowances from Page 2, Line 17 of the NC-4 Allowance Worksheet)

**2. Additional amount, if any, withheld from each pay period** (Enter whole dollars)

Social Security Number  -  -

Filing Status  Single or Married Filing Separately  Head of Household  Married Filing Jointly or Surviving Spouse

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

Address  County (Enter first five letters)

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

Employee's Signature

Date

I certify, under penalties provided by law, that I am entitled to the number of withholding allowances claimed on Line 1 above.

Answer **all** of the following questions for your filing status.

**Single -**

- |                                                                                  |                              |                             |
|----------------------------------------------------------------------------------|------------------------------|-----------------------------|
| 1. Will your N.C. itemized deductions from Page 3, Schedule 1 exceed \$13,249?   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Will your N.C. Child Deduction Amount from Page 3, Schedule 2 exceed \$2,499? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Will you have federal adjustments or State deductions from income?            | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Will you be able to claim any N.C. tax credits or tax credit carryovers?      | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If you answered "No" to all of the above, **STOP HERE** and enter **ZERO (0)** as total allowances on Form NC-4, Line 1.  
 If you answered "Yes" to any of the above, you may choose to go to Page 2, Part II to determine if you qualify for additional allowances. Otherwise, enter **ZERO (0)** on Form NC-4, Line 1.

**Married Filing Jointly -**

- |                                                                                                                                                             |                              |                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
| 1. Will your N.C. itemized deductions from Page 3, Schedule 1 exceed \$23,999?                                                                              | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Will your N.C. Child Deduction Amount from Page 3, Schedule 2 exceed \$2,499?                                                                            | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Will you have federal adjustments or State deductions from income?                                                                                       | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Will you be able to claim any N.C. tax credits or tax credit carryovers?                                                                                 | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. Will your spouse receive combined wages and taxable retirement benefits of less than \$8,250 or only retirement benefits not subject to N.C. income tax? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If you answered "No" to all of the above, **STOP HERE** and enter **ZERO (0)** as total allowances on Form NC-4, Line 1.  
 If you answered "Yes" to any of the above, you may choose to go to Page 2, Part II to determine if you qualify for additional allowances. Otherwise, enter **ZERO (0)** on Form NC-4, Line 1.

**Married Filing Separately -**

- |                                                                                           |                              |                             |
|-------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
| 1. Will your portion of N.C. itemized deductions from Page 3, Schedule 1 exceed \$13,249? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Will your N.C. Child Deduction Amount from Page 3, Schedule 2 exceed \$2,499?          | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Will you have federal adjustments or State deductions from income?                     | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Will you be able to claim any N.C. tax credits or tax credit carryovers?               | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If you answered "No" to all of the above, **STOP HERE** and enter **ZERO (0)** as total allowances on Form NC-4, Line 1.  
 If you answered "Yes" to any of the above, you may choose to go to Page 2, Part II to determine if you qualify for additional allowances. Otherwise, enter **ZERO (0)** on Form NC-4, Line 1.

**Head of Household-**

- |                                                                                  |                              |                             |
|----------------------------------------------------------------------------------|------------------------------|-----------------------------|
| 1. Will your N.C. itemized deductions from Page 3, Schedule 1 exceed \$18,624?   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Will your N.C. Child Deduction Amount from Page 3, Schedule 2 exceed \$2,499? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Will you have federal adjustments or State deductions from income?            | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Will you be able to claim any N.C. tax credits or tax credit carryovers?      | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If you answered "No" to all of the above, **STOP HERE** and enter **ZERO (0)** as total allowances on Form NC-4, Line 1.  
 If you answered "Yes" to any of the above, you may choose to go to Page 2, Part II to determine if you qualify for additional allowances. Otherwise, enter **ZERO (0)** on Form NC-4, Line 1.

# NC-4 Allowance Worksheet

## Surviving Spouse -

- |                                                                                  |                              |                             |
|----------------------------------------------------------------------------------|------------------------------|-----------------------------|
| 1. Will your N.C. itemized deductions from Page 3, Schedule 1 exceed 23,999?     | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Will your N.C. Child Deduction Amount from Page 3, Schedule 2 exceed \$2,499? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Will you have federal adjustments or State deductions from income?            | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Will you be able to claim any N.C. tax credits or tax credit carryovers?      | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If you answered "No" to all of the above, **STOP HERE** and enter **FOUR (4)** as total allowances on Form NC-4, Line 1. If you answered "Yes" to any of the above, you may choose to go to Part II to determine if you qualify for additional allowances. Otherwise, enter **FOUR (4)** on Form NC-4, Line 1.

## NC-4 Part II

- |                                                                                                                                                                                                                                                                                                          |     |    |   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|---|
| 1. Enter your total estimated N.C. itemized deductions from Page 3, Schedule 1 .....                                                                                                                                                                                                                     | 1.  | \$ | . |
| 2. Enter the applicable N.C. standard deduction based on your filing status. <span style="font-size: 3em; vertical-align: middle;">}</span> \$10,750 if Single<br>\$21,500 if Married Filing Jointly or Surviving Spouse<br>\$10,750 if Married Filing Separately<br>\$16,125 if Head of Household ..... | 2.  | \$ | . |
| 3. Subtract Line 2 from Line 1. If Line 1 is less than Line 2, enter ZERO (0) .....                                                                                                                                                                                                                      | 3.  | \$ | . |
| 4. Enter an estimate of your total N.C. Child Deduction Amount from Page 3, Schedule 2 .....                                                                                                                                                                                                             | 4.  | \$ | . |
| 5. Enter an estimate of your total federal adjustments to income and State deductions from federal adjusted gross income.....                                                                                                                                                                            | 5.  | \$ | . |
| 6. Add Lines 3, 4, and 5.....                                                                                                                                                                                                                                                                            | 6.  | \$ | . |
| 7. Enter an estimate of your nonwage income (such as dividends or interest).....                                                                                                                                                                                                                         | 7.  | \$ | . |
| 8. Enter an estimate of your State additions to federal adjusted gross income .....                                                                                                                                                                                                                      | 8.  | \$ | . |
| 9. Add Lines 7 and 8.....                                                                                                                                                                                                                                                                                | 9.  | \$ | . |
| 10. Subtract Line 9 from Line 6 ( <i>Do not enter less than zero</i> ).....                                                                                                                                                                                                                              | 10. | \$ | . |
| 11. Divide the amount on Line 10 by \$2,500 . Round down to whole number .....                                                                                                                                                                                                                           | 11. |    |   |
| Ex. \$3,900 ÷ \$2,500 = 1.56 rounds down to 1                                                                                                                                                                                                                                                            |     |    |   |
| 12. Enter the amount of your estimated N.C. tax credits.....                                                                                                                                                                                                                                             | 12. | \$ | . |
| 13. Divide the amount on Line 12 by \$134. Round down to whole number .....                                                                                                                                                                                                                              | 13. |    |   |
| Ex. \$200 ÷ \$134 = 1.49 rounds down to 1                                                                                                                                                                                                                                                                |     |    |   |
| 14. If filing as Single, Head of Household, or Married Filing Separately, enter zero (0) on this line.<br>If filing as Surviving Spouse, enter 4.<br>If filing as Married Filing Jointly, enter the appropriate number from either (a), (b), (c), (d), or (e) below.                                     |     |    |   |
| (a) Your spouse expects to have combined wages and taxable retirement benefits of \$0 for N.C. purposes, enter 4. (Taxable retirement benefits do not include: <i>Bailey</i> , Social Security, and Railroad retirement)                                                                                 |     |    |   |
| (b) Your spouse expects to have combined wages and taxable retirement benefits of more than \$0 but less than or equal to \$3,250, enter 3.                                                                                                                                                              |     |    |   |
| (c) Your spouse expects to have combined wages and taxable retirement benefits of more than \$3,250 but less than or equal to \$5,750, enter 2.                                                                                                                                                          |     |    |   |
| (d) Your spouse expects to have combined wages and taxable retirement benefits of more than \$5,750 but less than or equal to \$8,250, enter 1.                                                                                                                                                          |     |    |   |
| (e) Your spouse expects to have combined wages and taxable retirement benefits of more than \$8,250, enter 0 .....                                                                                                                                                                                       | 14. |    |   |
| 15. Add Lines 11, 13, and 14, and enter the total here.....                                                                                                                                                                                                                                              | 15. |    |   |
| 16. If you completed this worksheet on the basis of Married Filing Jointly, the total number of allowances determined on Line 15 may be split between you and your spouse, however, you choose. Enter the number of allowances from Line 15 that your spouse plans to claim .....                        | 16. |    |   |
| 17. Subtract Line 16 from Line 15 and enter the total number of allowances here and on Line 1 of your <b>Form NC-4, Employee's Withholding Allowance Certificate</b> .....                                                                                                                               | 17. |    |   |

# NC-4 Allowance Worksheet Schedules

**Important:** If you cannot reasonably estimate the amount to enter in the schedules below, you should enter ZERO (0) on Line 1, NC-4.

Schedule 1	Estimated N.C. Itemized Deductions	
Qualifying mortgage interest	\$ _____	
Real estate property taxes	\$ _____	
Total qualifying mortgage interest and real estate property taxes*		\$ _____
Charitable Contributions (Same as allowed for federal purposes)		\$ _____
Medical and Dental Expenses (Same as allowed for federal purposes)		\$ _____
Total estimated N.C. itemized deductions. Enter on Page 2, Part II, Line 1		\$ _____

\*The sum of your qualified mortgage interest and real estate property taxes may not exceed \$20,000. For married taxpayers, the \$20,000 limitation applies to the combined total of qualified mortgage interest and real estate property taxes claimed by both spouses, rather than to each spouse separately.

Schedule 2		Estimated N.C. Child Deduction Amount		
<p>A taxpayer who is allowed a federal child tax credit under section 24 of the Internal Revenue Code is allowed a deduction for each dependent child unless adjusted gross income exceeds the threshold amount shown below.</p> <p>The N.C. Child Deduction Amount can be claimed only for a child who is under 17 years of age on the last day of the year.</p>				
Filing Status	Adjusted Gross Income	No. of Children	Deduction Amount per Qualifying Child	Estimated Deduction
Single	Up to \$ 20,000	_____	\$ 2,500	_____
	Over \$ 20,000 Up to \$ 30,000	_____	\$ 2,000	_____
	Over \$ 30,000 Up to \$ 40,000	_____	\$ 1,500	_____
	Over \$ 40,000 Up to \$ 50,000	_____	\$ 1,000	_____
	Over \$ 50,000 Up to \$ 60,000	_____	\$ 500	_____
	Over \$ 60,000	_____	\$ -	_____
MFJ or SS	Up to \$ 40,000	_____	\$ 2,500	_____
	Over \$ 40,000 Up to \$ 60,000	_____	\$ 2,000	_____
	Over \$ 60,000 Up to \$ 80,000	_____	\$ 1,500	_____
	Over \$ 80,000 Up to \$ 100,000	_____	\$ 1,000	_____
	Over \$ 100,000 Up to \$ 120,000	_____	\$ 500	_____
	Over \$ 120,000	_____	\$ -	_____
HOH	Up to \$ 30,000	_____	\$ 2,500	_____
	Over \$ 30,000 Up to \$ 45,000	_____	\$ 2,000	_____
	Over \$ 45,000 Up to \$ 60,000	_____	\$ 1,500	_____
	Over \$ 60,000 Up to \$ 75,000	_____	\$ 1,000	_____
	Over \$ 75,000 Up to \$ 90,000	_____	\$ 500	_____
	Over \$ 90,000	_____	\$ -	_____
MFS	Up to \$ 20,000	_____	\$ 2,500	_____
	Over \$ 20,000 Up to \$ 30,000	_____	\$ 2,000	_____
	Over \$ 30,000 Up to \$ 40,000	_____	\$ 1,500	_____
	Over \$ 40,000 Up to \$ 50,000	_____	\$ 1,000	_____
	Over \$ 50,000 Up to \$ 60,000	_____	\$ 500	_____
	Over \$ 60,000	_____	\$ -	_____

## Multiple Jobs Table

Find the amount of your estimated annual wages from your lowest paying job(s) in the left hand column. Follow across to find the amount of additional tax to be withheld for each pay period. Enter the additional amount to be withheld on Line 2 of your **Form NC-4**.

### Additional Withholding for Single, Married, or Surviving Spouse with Multiple Jobs

Estimated Annual Wages		Payroll Period			
At Least	But Less Than	Monthly	Semimonthly	Biweekly	Weekly
0	1000	2	1	1	1
1000	2000	7	3	3	2
2000	3000	11	6	5	3
3000	4000	16	8	7	4
4000	5000	20	10	9	5
5000	6000	25	12	11	6
6000	7000	29	14	13	7
7000	8000	33	17	15	8
8000	9000	38	19	17	9
9000	10000	42	21	20	10
10000	10750	46	23	21	11
10750	Unlimited	48	24	22	11

### Additional Withholding for Head of Household Filers with Multiple Jobs

Estimated Annual Wages		Payroll Period			
At Least	But Less Than	Monthly	Semimonthly	Biweekly	Weekly
0	1000	2	1	1	1
1000	2000	7	3	3	2
2000	3000	11	6	5	3
3000	4000	16	8	7	4
4000	5000	20	10	9	5
5000	6000	25	12	11	6
6000	7000	29	14	13	7
7000	8000	33	17	15	8
8000	9000	38	19	17	9
9000	10000	42	21	20	10
10000	11000	47	23	22	11
11000	12000	51	26	24	12
12000	13000	56	28	26	13
13000	14000	60	30	28	14
14000	15000	65	32	30	15
15000	16000	69	35	32	16
16000	Unlimited	71	36	33	16