

## 4190020105

**REV-419** 

# EMPLOYEE'S NONWITHHOLDING APPLICATION CERTIFICATE

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Please print or type. A fill-in form may be obtained from www.revenue.pa.gov.

SECTION I EMPLOYEE INFORMATION								
Employee Name: first, middle initial, last	Social Security Number	Telephone Number						
Street Address City State Zip Code			Tax Year (not necessary if checking Box b below)					
SECTION II EXEMPTION I	NFORMATION	1	,					
I claim exception from withholding because	:							
a. I qualified for Tax Forgivenes and/or I expect to qualify for Tax all income tax withheld.	ss of my PA personal income x Forgiveness of my PA perso	tax liability onal income	last year, and he tax liability this	ad a right to a full refund of a year and expect to have a r	all income tax withheld ight to a full refund of			
b. I declare I am a resident of the	ne reciprocal state checked be	elow:						
□ <sub>INDIANA</sub> □ <sub>MARYLA</sub>	ND NEW JERSEY	□ оню	□ <sub>VIRGINI</sub>	A  WEST VIRGINIA				
and that pursuant to the recip income tax and authorize my enensylvania.								
c. I certify I am a legal resident forth under the Servicemembers	of the state of and am not s Civil Relief Act, as amended	subject to F I, and as se	Pennsylvania wi et forth in revised	thholding because I meet the difference of the Personal Income Tax Bulle	e requirements set etin 2010-01.			
SECTION III CERTIFICATIO	ON							
Under penalties of perjury, I certify that I did expect to incur any liability during the curren				during the preceding tax yea	ar and/or I do not			
Employee Signature				Date Example 08/15/2004				
Employer Name				Federal Employer Identification Number				
Business Address					Telephone Number			
City, State, ZIP					<u>l</u>			
Employer's Signature  Employee's Quarterly Compensation (not required for applicants checking Box b or c a \$								

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REV-419 IN (EX) 09-20

## **Instructions for REV-419**

Employee's Nonwithholding Application Certificate

## WHAT'S NEW

The form has been redesigned to meet the branding, for-withholding. matting and instructions standards used for all department forms. The instructions and form have also been updated Under the SCRA, as amended, you may be exempt from as a result of recent amendments to the federal Service- PA personal income tax on your wages if (i) your spouse members Civil Relief Act.

## **GENERAL INFORMATION**

#### **PURPOSE OF FORM**

Complete Form REV-419 so that your employer can withhold the correct Pennsylvania personal income tax from your pay. Complete a new Form REV-419 every year or when your personal or financial situation changes. Photocopies of this form are acceptable.

**NOTE:** Unless the state of residence changes, residents of the reciprocal states listed in the next paragraph do not need to refile this application every year.

## **GENERAL INSTRUCTIONS**

#### WHO IS ELIGIBLE FOR NONWITHHOLDING?

You may be entitled to nonwithholding of PA personal income tax if you incurred no liability for income tax the preceding tax year and/or you anticipate that you will incur no liability for income tax during the current tax year, according to the Special Tax Provisions of section 304 of the Tax Reform Code, as a resident of the reciprocal state of Indiana, Maryland, New Jersey, Ohio, Virginia or West Virginia and your employer agrees to withhold the income tax from that state or as the spouse of an active duty service member under the Servicemembers Civil Relief Act (SCRA), as amended.

### WHEN TO CLAIM?

File this certificate with your employer as soon as you determine you are entitled to claim nonwithholding. You must file a certificate each year you are eligible (see Note above for an exception). If you are employed by more than one employer you must file a separate REV-419 with each employer.

#### **RESPONSIBILITIES OF EMPLOYEES**

You must revoke this certification within 10 days from the change is required. If the department disapproves the apday you anticipate you will incur PA personal income tax plication, the employer must immediately commence withliability for the current tax year. To discontinue or revoke this holding at the regular rate. Once a certificate is revoked by certification, submit notification in writing to your employer. the department, the employer must send any new applica-Claimants who qualify for complete Tax Forgiveness under tion received from the employee to the department for apsection 304 of the Tax Reform Code must file a PA-40,

Pennsylvania Personal Income Tax Return, and Schedule SP to claim Tax Forgiveness even if they are eligible for non-

is a member of the armed forces present in PA in compliance with military orders; (ii) you are present in PA solely to be with your spouse; and (iii) you and your spouse both maintain domicile (state residency) in another state. If you claim exemption under the SCRA, enter your state of domicile (legal residence) on Line d below and attach a copy of your spousal military identification card and your spouse's current military orders to form REV-419. See Personal Income Tax Bulletin 2010-01 for additional information.

## **RESPONSIBILITIES OF EMPLOYER**

If you agree not to withhold PA tax because your employee is a resident of a reciprocal state, you must withhold the other state's tax.

Retain Form REV-419 with your records. You are required to submit a copy of this certificate and accompanying attachments to the PA DEPARTMENT OF REVENUE, BUREAU OF INDIVIDUAL TAXES, PO BOX 280507, HARRISBURG, PA 17128-0507, when:

- 1. You have reason to believe this certificate is incorrect:
- 2. The PA taxable gross compensation of any employee who claimed exemption from nonwithholding on the form under Section II, Line a, exceeds \$1,625 for any quarter;
- 3. The employee claims an exemption from withholding on the basis of residence in a reciprocal state (Indiana. Maryland, New Jersey, Ohio, Virginia or West Virginia) and therefore, you agree to withhold income tax of the employee's state of residence; or
- 4. The employee claims an exemption from withholding under the SCRA, as amended.

#### DEPARTMENT'S RESPONSIBILITY

Upon receipt of any exemption application, the department will make a determination and notify the employer if a proval before implementing the nonwithholding.

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