Texas Bar Exam Proctor

Job Summary

The Texas Board of Law Examiners is hiring temporary proctors for the Texas Bar Exam, July 30-31, 2024. We are hiring proctors for our exam site in Houston.

Proctor responsibilities

- 07/17/2025 from 2:00 PM 4:00 PM: Attend remote training.
- 07/28/2025 from 2:00 PM to 5:00 PM: Attend on-site training. Parking is provided.
- 07/29/2025 from 6:30 AM to 5:30 PM: Proctor exam on-site and in-person. Parking is provided.
- 07/30/2025 from 6:30 AM to 5:30 PM: Proctor exam on-site and in-person. Parking is provided.
- Dress business casual (no jeans, t-shirts, etc.) with comfortable shoes. (Athletic shoes are acceptable.)
- Monitor 1 to 60 examinees, which includes walking for long periods of time.
- Check admission tickets and photo IDs.
- Distribute, collect, and accurately account for confidential examination materials. Sort exam materials in numerical order with accuracy and speed. Maintain security of the exam. Complete forms.

Minimum qualifications

- At least 18 years of age
- High school graduate or equivalent
- Proficient in the English language
- Ability to lift 25 pounds
- Ability to walk as much as 75% of your shift

The BLE considers all applications equally without regard to race, sex, age, color, national origin, or disability in accordance with applicable laws. The BLE is an equal opportunity employer and participates in E-Verify by providing the Social Security Administration and, if necessary, the Department of Homeland Security with information from new employee's Form I-9 to confirm work authorization.

Pay

\$20 per hour.

To Apply

Please complete the following application and e-mail to Noelia. Villarreal@ble.texas.gov.

Board of Law Examiners Appointed by the Supreme Court of Texas

Proctor Employment Application

| Per | sonal Information | | | | | |
|------|--|-----------------------|------------------|-------------------|----------------|----------------|
| | First Name | | | Last N | ame | |
| | Mailing address | | City | y . | State | Zip |
| | Phone | E | -mail address | | Date | of Birth |
| | ıcation | | | | | |
| Plea | se check all that apply. High school diploma or GED | Some colleg | ge | Associates degree | Bacl | nelor's degree |
| List | ployment History your employment for the last 3 years. E tinue on a separate sheet of paper. | Begin with your curre | ent or most rece | nt employment. | If you need mo | ore space, |
| () | Employer Dates of Employment: From | | | Superv To | risor | |
| | Mailing address | | City | <u> </u> | State | Zip |
| | Phone Reason for leaving: | | | E-mail a | ddress | |
| (2) | | | | | | |
| | Employer | | | Superv | | |
| | Dates of Employment: From | | | То | | |
| | Mailing address | | City | <i>y</i> | State | Zip |
| | Phone Reason for leaving: | | | E-mail a | ddress | |
| (3) | Employer | | | | | |
| | Dates of Employment: From: | | | To: | | |
| | Mailing address | | City | 7 | State | Zip |
| | Phone Reason for leaving: | | | E-mail a | | |
| Oth | ner | | | | | |
| (a) | Would you have difficulty getting to the | he exam site by 7:00 | a.m.? | | Yes | No |
| (b) | Are you attending law school? | | | | Yes | No |
| (c) | Are you a law school graduate?If so, when did you graduate? Are planning to take the Texas Bar Ex | | | | | □ No |
| (d) | Are planning to take the Texas Bar Ex If so, when? | | | | Yes | No |

| (e) | Are you related to, or do you know, anyone in law school, or anyone planning to take the Texas Bar Exam within the next 2 years? |
|-----|---|
| (f) | Are you, or have you ever been, licensed as an attorney in any jurisdiction, including Texas? Yes No If so, where and when? |
| (g) | Have you ever been employed as a Proctor for another licensing board, educational institution, or testing entity? |
| (h) | Have you ever been convicted of any crime, other than a minor traffic violation? |
| (i) | Are you related to any employee or member of the Board of Law Examiners? |
| (j) | If so, who? How did you learn about this position? |
| | |
| Ava | ailability |
| | Which exam sites are you available for? (BLE does not pay for hotel or travel.) |
| | Houston DFW area Austin Lubbock San Antonio Waco |
| Ceı | rtification |
| Car | My responses on this application are complete and true to the best of my knowledge. Any misstatement, falsification, or omission may be cause for refusal to hire, or if hired, dismissal. If hired, I agree to fulfill the duties and responsibilities stated in the attached BLE's Proctor Job Description. If hired, I must provide 2 documents establishing my identity and my eligibility to work in the United States. I authorize any person or organization referenced in this application to give the BLE and its staff any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, regarding any subject covered in this application. I release all such parties from all liability from any damages resulting from furnishing such information to the BLE and its staff. |
| | Your Signature (Typed Signatures are accepted.) Date |
| | E-Mail completed application, with your original signature, to: Noelia.Villarreal@ble.texas.gov |



Employment Eligibility Verification

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No. 1615-0047 Expires 10/31/2022

▶ START HERE: Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

| and a ration of processing the contract of the | mune mega. | | | | | | | | |
|--|--|--------------|-----------------|--------------------------------|-------------|---|--|--|--|
| Section 1. Employee Information and Attestation (Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.) | | | | | | | | | |
| Last Name (Family Name) First Name (Given | Name) | | Middle Initial | Other Last Names Used (if any) | | | | | |
| Address (Street Number and Name) Apt. Number | ber City | or Town | | | State | ZIP Code | | | |
| Date of Birth (mm/dd/yyyy) U.S. Social Security Number | mployee's | E-mail Addro | ess | Er | mployee's T | Felephone Number | | | |
| I am aware that federal law provides for imprisonment as connection with the completion of this form. | | | | or use of | false dod | cuments in | | | |
| I attest, under penalty of perjury, that I am (check one of | the follo | wing boxe | es): | | | | | | |
| 1. A citizen of the United States | | | | | | | | | |
| 2. A noncitizen national of the United States (See instructions) | | | | | | | | | |
| 3. A lawful permanent resident (Alien Registration Number/US | SCIS Numb | per): | | | | | | | |
| | 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): Some aliens may write "N/A" in the expiration date field. (See instructions) | | | | | | | | |
| Aliens authorized to work must provide only one of the following do An Alien Registration Number/USCIS Number OR Form I-94 Admis 1. Alien Registration Number/USCIS Number: | | | , | | | Code - Section 1 t Write In This Space | | | |
| OR 2. Form I-94 Admission Number: | | | | | | | | | |
| OR | | | _ | | | | | | |
| 3. Foreign Passport Number: | | | _ | | | | | | |
| Country of Issuance: | | | _ | | | | | | |
| Signature of Employee | | | Today's Date | e (<i>mm/dd/</i> | ′уууу) | | | | |
| Preparer and/or Translator Certification (check | • | (s) assisted | the employee in | completin | g Section 1 | | | | |
| (Fields below must be completed and signed when preparers | | | | - | | · · · · · · · · · · · · · · · · · · · | | | |
| I attest, under penalty of perjury, that I have assisted in t knowledge the information is true and correct. | he compl | letion of S | ection 1 of th | | | | | | |
| Signature of Preparer or Translator | | | | Today's D | ate (mm/de | d/yyyy) | | | |
| Last Name (Family Name) | | First Name | e (Given Name) | | | | | | |
| Address (Street Number and Name) | City or | r Town | | | State | ZIP Code | | | |
| | | | | | | | | | |

STOP

Employer Completes Next Page

STOP

Form I-9 10/21/2019 Page 1 of 3



Employment Eligibility Verification Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No. 1615-0047 Expires 10/31/2022

Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You

| must physically examine one docu of Acceptable Documents.") | ment from List / | A OR a com | bination of one | document f | rom List B | and one | docum | ent from Li | st C as listed on the "Lists | |
|--|-------------------------|--------------------------------|-----------------------|------------------------------|-----------------|-------------------|--------------------------------|----------------------|--|--|
| Employee Info from Section 1 | Last Name (F | amily Name |) | First Name | e (Given Na | lame) | M. | I. Citizen | ship/Immigration Status | |
| List A Identity and Employment Aut | | R | R List B Identity | | | | | Emplo | List C byment Authorization | |
| Document Title | | Documer | nt Title | | | Docu | ument | Title | | |
| Issuing Authority | | Issuing A | uthority | | | Issui | ing Au | thority | | |
| Document Number | | Documer | nt Number | | | Doc | ument | Number | _ | |
| Expiration Date (if any) (mm/dd/yy | уу) | Expiration | n Date (if any) | (mm/dd/yyyy | /) | Expi | ration | Date (if any | y) (mm/dd/yyyy) | |
| Document Title | | | | | | | | | | |
| Issuing Authority | | Additio | nal Informatio | on | | | | | ode - Sections 2 & 3 of Write In This Space | |
| Document Number | | | | | | | | | | |
| Expiration Date (if any) (mm/dd/yy | 'yy) | | | | | | | | | |
| Document Title | | | | | | | | | | |
| Issuing Authority | | | | | | | | | | |
| Document Number | | | | | | | | | | |
| Expiration Date (if any) (mm/dd/yy | ryy) | | | | | | | | | |
| Certification: I attest, under po (2) the above-listed document(employee is authorized to wor | s) appear to b | e genuine | | | | | | | | |
| The employee's first day of | employment | (mm/dd/y | ууу): | | (See | e instruc | tions | for exem | ptions) | |
| Signature of Employer or Authorize | ed Representat | ive | Today's Da | ite (mm/dd/y | <i>ryyy)</i> Ti | itle of Emp | oloyer | or Authoriz | ed Representative | |
| Last Name of Employer or Authorized | Representative | First Name | e of Employer or | Authorized Representative Em | | | oloyer's | or Organization Name | | |
| Employer's Business or Organizati | ion Address (<i>St</i> | reet Numbe | er and Name) | City or Tov | vn | | | State | ZIP Code | |
| Section 3. Reverification | and Rehires | s (To be c | ompleted and | l signed by | employe | r or auth | orized | l represen | tative.) | |
| A. New Name (if applicable) | | | | | | | | . , , , | e (if applicable) | |
| Last Name (Family Name) | Name <i>(Give</i> | ne (Given Name) Middle Initial | | | Date | Date (mm/dd/yyyy) | | | | |
| C. If the employee's previous grant continuing employment authorization | | | | , provide the | informatio | on for the | docum | ent or rece | ipt that establishes | |
| Document Title | | | Docume | ent Number | | | E | xpiration Da | ate (if any) (mm/dd/yyyy) | |
| I attest, under penalty of perjuithe employee presented docur | | | | | | | | | | |
| Signature of Employer or Authorize | ed Representat | ive Toda | ay's Date <i>(mm/</i> | Name of Employer | | | r or Authorized Representative | | | |

LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

| | LIST A Documents that Establish Both Identity and Employment Authorization | OR | | LIST B Documents that Establish Identity AN | ID | LIST C Documents that Establish Employment Authorization |
|----|---|----|--------------|--|----|--|
| 2. | U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign passport that contains a temporary I-551 stamp or temporary | | l F r | Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address | 1. | A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION |
| 4. | I-551 printed notation on a machine- readable immigrant visa Employment Authorization Document that contains a photograph (Form I-766) | | į i į | ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address | 2. | (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240) |
| 5. | For a nonimmigrant alien authorized to work for a specific employer because of his or her status: a. Foreign passport; and b. Form I-94 or Form I-94A that has | 5 | 4. \ 5. \ | School ID card with a photograph Voter's registration card U.S. Military card or draft record Military dependent's ID card | 3. | Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal |
| | the following: (1) The same name as the passport; and | | 7. l | U.S. Coast Guard Merchant Mariner Card Native American tribal document | 5. | Native American tribal document U.S. Citizen ID Card (Form I-197) Identification Card for Use of |
| | (2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or | | Fo | 9. Driver's license issued by a Canadian government authority For persons under age 18 who are unable to present a document | | Resident Citizen in the United States (Form I-179) Employment authorization document issued by the Department of Homeland Security |
| 6. | limitations identified on the form. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI | | 11. | listed above: 10. School record or report card 11. Clinic, doctor, or hospital record 12. Day-care or nursery school record | | |

Examples of many of these documents appear in the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.

Form I-9 10/21/2019 Page 3 of 3

Employee's Withholding Certificate

► Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. ► Give Form W-4 to your employer.

OMB No. 1545-0074

| Department of the Ti Internal Revenue Sei | | | | | | | | | | | | |
|--|--|--|---------------------------------------|---|---------------|---|--|--|--|--|--|--|
| | | irst name and middle initial | Last name | no. | (b) So | cial security number | | | | | | |
| Step 1: | (ω) | not harrio and middle midal | Last Hame | | (5) 00 | olar occurry number | | | | | | |
| Enter Personal Information | Addre | | name o | Does your name match the name on your social security card? If not, to ensure you get | | | | | | | | |
| | City c | r town, state, and ZIP code | | | SSA at | credit for your earnings, contact SSA at 800-772-1213 or go to www.ssa.gov. | | | | | | |
| | (c) | Single or Married filing separately | | | ı | - | | | | | | |
| | | Married filing jointly or Qualifying widow(er) | | | | | | | | | | |
| | | Head of household (Check only if you're unmare | ried and pay more than half the costs | of keeping up a home for yo | urself and | d a qualifying individual.) | | | | | | |
| | | -4 ONLY if they apply to you; otherwis m withholding, when to use the estimat | | | n on ea | ach step, who can | | | | | | |
| Step 2: Multiple Job | s | Complete this step if you (1) hold mor also works. The correct amount of with | | | | | | | | | | |
| or Spouse | | Do only one of the following. | | | | | | | | | | |
| Works | | (a) Use the estimator at www.irs.gov/ | | = : | | | | | | | | |
| | | (b) Use the Multiple Jobs Worksheet of withholding; or | on page 3 and enter the resu | It in Step 4(c) below f | or roug | hly accurate | | | | | | |
| | | (c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld | | | | | | | | | | |
| | | TIP: To be accurate, submit a 2022 For income, including as an independent | | , , , , , | nave se | elf-employment | | | | | | |
| | | -4(b) on Form W-4 for only ONE of the you complete Steps 3–4(b) on the Form | | | s. (You | ır withholding will | | | | | | |
| Step 3: | | If your total income will be \$200,000 c | or less (\$400,000 or less if ma | arried filing jointly): | | | | | | | | |
| Claim | | Multiply the number of qualifying ch | ildren under age 17 by \$2,000 | \$ | | | | | | | | |
| Dependents | i | Multiply the number of other depe | ndents by \$500 | \$ | - | | | | | | | |
| | | Add the amounts above and enter the | 3 | \$ | | | | | | | | |
| Step 4 (optional): Other | | (a) Other income (not from jobs). expect this year that won't have w This may include interest, dividend | ithholding, enter the amount | of other income here. | | \$ | | | | | | |
| Adjustments | 5 | (b) Deductions. If you expect to claim want to reduce your withholding, u the result here | | | 1 | ¢ | | | | | | |
| | | the result here | | | T(D) | Ψ | | | | | | |
| | | (c) Extra withholding. Enter any additional control of the control | tional tax you want withheld e | each pay period | 4(c) | \$ | | | | | | |
| | ı | | | | | | | | | | | |
| Step 5: Sign | Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete. | | | | | | | | | | | |
| Here | E | mployee's signature (This form is not v | alid unless you sign it.) | D ar | te | | | | | | | |
| Employers Only | Emp | loyer's name and address | | | Employenumber | er identification (EIN) | | | | | | |

Form W-4 (2022) Page **2**

General Instructions

Section references are to the Internal Revenue Code.

Future Developments

For the latest information about developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

Purpose of Form

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. If too little is withheld, you will generally owe tax when you file your tax return and may owe a penalty. If too much is withheld, you will generally be due a refund. Complete a new Form W-4 when changes to your personal or financial situation would change the entries on the form. For more information on withholding and when you must furnish a new Form W-4, see Pub. 505, Tax Withholding and Estimated Tax.

Exemption from withholding. You may claim exemption from withholding for 2022 if you meet both of the following conditions: you had no federal income tax liability in 2021 and you expect to have no federal income tax liability in 2022. You had no federal income tax liability in 2021 if (1) your total tax on line 24 on your 2021 Form 1040 or 1040-SR is zero (or less than the sum of lines 27a, 28, 29, and 30), or (2) you were not required to file a return because your income was below the filing threshold for your correct filing status. If you claim exemption, you will have no income tax withheld from your paycheck and may owe taxes and penalties when you file your 2022 tax return. To claim exemption from withholding, certify that you meet both of the conditions above by writing "Exempt" on Form W-4 in the space below Step 4(c). Then, complete Steps 1(a), 1(b), and 5. Do not complete any other steps. You will need to submit a new Form W-4 by February 15, 2023.

Your privacy. If you prefer to limit information provided in Steps 2 through 4, use the online estimator, which will also increase accuracy.

As an alternative to the estimator: if you have concerns with Step 2(c), you may choose Step 2(b); if you have concerns with Step 4(a), you may enter an additional amount you want withheld per pay period in Step 4(c). If this is the only job in your household, you may instead check the box in Step 2(c), which will increase your withholding and significantly reduce your paycheck (often by thousands of dollars over the year).

When to use the estimator. Consider using the estimator at *www.irs.gov/W4App* if you:

- 1. Expect to work only part of the year;
- 2. Have dividend or capital gain income, or are subject to additional taxes, such as Additional Medicare Tax;
- 3. Have self-employment income (see below); or
- Prefer the most accurate withholding for multiple job situations.

Self-employment. Generally, you will owe both income and self-employment taxes on any self-employment income you receive separate from the wages you receive as an employee. If you want to pay these taxes through withholding from your wages, use the estimator at www.irs.gov/W4App to figure the amount to have withheld.

Nonresident alien. If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Specific Instructions

Step 1(c). Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

Step 2. Use this step if you (1) have more than one job at the same time, or (2) are married filing jointly and you and your spouse both work.

Option (a) most accurately calculates the additional tax you need to have withheld, while option (b) does so with a little less accuracy.

If you (and your spouse) have a total of only two jobs, you may instead check the box in option (c). The box must also be checked on the Form W-4 for the other job. If the box is checked, the standard deduction and tax brackets will be cut in half for each job to calculate withholding. This option is roughly accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld, and this extra amount will be larger the greater the difference in pay is between the two jobs.



Multiple jobs. Complete Steps 3 through 4(b) on only one Form W-4. Withholding will be most accurate if you do this on the Form W-4 for the highest paying job.

Step 3. This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 501, Dependents, Standard Deduction, and Filing Information. You can also include other tax credits for which you are eligible in this step, such as the foreign tax credit and the education tax credits. To do so, add an estimate of the amount for the year to your credits for dependents and enter the total amount in Step 3. Including these credits will increase your paycheck and reduce the amount of any refund you may receive when you file your tax return.

Step 4 (optional).

Step 4(a). Enter in this step the total of your other estimated income for the year, if any. You shouldn't include income from any jobs or self-employment. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your paycheck, see Form 1040-ES, Estimated Tax for Individuals.

Step 4(b). Enter in this step the amount from the Deductions Worksheet, line 5, if you expect to claim deductions other than the basic standard deduction on your 2022 tax return and want to reduce your withholding to account for these deductions. This includes both itemized deductions and other deductions such as for student loan interest and IRAs.

Step 4(c). Enter in this step any additional tax you want withheld from your pay **each pay period**, including any amounts from the Multiple Jobs Worksheet, line 4. Entering an amount here will reduce your paycheck and will either increase your refund or reduce any amount of tax that you owe.

Form W-4 (2022)

Step 2(b) – Multiple Jobs Worksheet (Keep for your records.)



If you choose the option in Step 2(b) on Form W-4, complete this worksheet (which calculates the total extra tax for all jobs) on **only ONE** Form W-4. Withholding will be most accurate if you complete the worksheet and enter the result on the Form W-4 for the highest paying job.

Note: If more than one job has annual wages of more than \$120,000 or there are more than three jobs, see Pub. 505 for additional tables; or, you can use the online withholding estimator at www.irs.gov/W4App.

| 1 | Two jobs. If you have two jobs or you're married filing jointly and you and your spouse each have one job, find the amount from the appropriate table on page 4. Using the "Higher Paying Job" row and the "Lower Paying Job" column, find the value at the intersection of the two household salaries and enter that value on line 1. Then, skip to line 3 | 1 | \$ |
|---|---|----|----|
| 2 | Three jobs. If you and/or your spouse have three jobs at the same time, complete lines 2a, 2b, and 2c below. Otherwise, skip to line 3. | | |
| | a Find the amount from the appropriate table on page 4 using the annual wages from the highest paying job in the "Higher Paying Job" row and the annual wages for your next highest paying job in the "Lower Paying Job" column. Find the value at the intersection of the two household salaries and enter that value on line 2a | 2a | \$ |
| | b Add the annual wages of the two highest paying jobs from line 2a together and use the total as the wages in the "Higher Paying Job" row and use the annual wages for your third job in the "Lower Paying Job" column to find the amount from the appropriate table on page 4 and enter this amount on line 2b | 2b | \$ |
| | c Add the amounts from lines 2a and 2b and enter the result on line 2c | 2c | \$ |
| 3 | Enter the number of pay periods per year for the highest paying job. For example, if that job pays weekly, enter 52; if it pays every other week, enter 26; if it pays monthly, enter 12, etc | 3 | |
| 4 | "Lower Paying Job" column, find the value at the intersection of the two household salaries and that value on line 1. Then, skip to line 3. Three jobs. If you and/or your spouse have three jobs at the same time, complete lines 2a, 2 2c below. Otherwise, skip to line 3. a Find the amount from the appropriate table on page 4 using the annual wages from the h paying job in the "Higher Paying Job" row and the annual wages for your next highest payin in the "Lower Paying Job" column. Find the value at the intersection of the two households and enter that value on line 2a. b Add the annual wages of the two highest paying jobs from line 2a together and use the total wages in the "Higher Paying Job" row and use the annual wages for your third job in the Paying Job" column to find the amount from the appropriate table on page 4 and enter this a on line 2b. c Add the amounts from lines 2a and 2b and enter the result on line 2c. Enter the number of pay periods per year for the highest paying job. For example, if that job weekly, enter 52; if it pays every other week, enter 26; if it pays monthly, enter 12, etc. Divide the annual amount on line 1 or line 2c by the number of pay periods on line 3. Ent amount here and in Step 4(c) of Form W-4 for the highest paying job (along with any other add amount you want withheld) Step 4(b)—Deductions Worksheet (Keep for your records.) Enter an estimate of your 2022 itemized deductions (from Schedule A (Form 1040)). Such deduction makes and paying lob if you're married filing jointly or qualifying widow(er) \$\int \frac{1}{2} \int \frac{2}{2} \int \frac{2}{2} \text{ the prior of the paying paying in the state and local taxes} \frac{2}{2} \int \frac{2}{2} the paying pay | | \$ |
| | Step 4(b) – Deductions Worksheet (Keep for your records.) | | |
| 1 | Enter an estimate of your 2022 itemized deductions (from Schedule A (Form 1040)). Such deductions may include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of your income | 1 | \$ |
| 2 | Enter: • \$25,900 if you're married filing jointly or qualifying widow(er) • \$19,400 if you're head of household • \$12,950 if you're single or married filing separately | 2 | \$ |
| 3 | If line 1 is greater than line 2, subtract line 2 from line 1 and enter the result here. If line 2 is greater than line 1, enter "-0-" | 3 | \$ |
| 4 | Enter an estimate of your student loan interest, deductible IRA contributions, and certain other adjustments (from Part II of Schedule 1 (Form 1040)). See Pub. 505 for more information | 4 | \$ |
| 5 | Add lines 3 and 4. Enter the result here and in Step 4(b) of Form W-4 | 5 | \$ |

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person with no other entries on the form; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

Form W-4 (2022)

| | Married Filing Jointly or Qualifying Widow(er) | | | | | | | | | | | | | |
|--|--|------------|----------|--------------|------------|------------|------------|------------|--|------------|----------|--------------|-----------|--|
| | Higher Paving Job | | | | | | | | | | | | | |
| | Annual Taxable | | | | \$30,000 - | \$40,000 - | \$50,000 - | \$60,000 - | \$70,000 - | \$80,000 - | , | | | |
| | \$0 - 9,999 | \$0 | \$110 | \$850 | \$860 | \$1,020 | \$1,020 | \$1,020 | \$1,020 | \$1,020 | \$1,020 | \$1,770 | \$1,870 | |
| Section Sect | \$10,000 - 19,999 | 110 | 1,110 | 1,860 | 2,060 | 2,220 | 2,220 | 2,220 | 2,220 | 2,220 | 2,970 | 3,970 | 4,070 | |
| March Marc | \$20,000 - 29,999 | 850 | 1,860 | 2,800 | 3,000 | 3,160 | 3,160 | 3,160 | 3,160 | 3,910 | 4,910 | 5,910 | 6,010 | |
| SSO,000 - 69,999 | \$30,000 - 39,999 | 860 | 2,060 | 3,000 | 3,200 | 3,360 | 3,360 | 3,360 | 4,110 | 5,110 | 6,110 | 7,110 | 7,210 | |
| | \$40,000 - 49,999 | 1,020 | 2,220 | 3,160 | 3,360 | 3,520 | 3,520 | 4,270 | 5,270 | 6,270 | 7,270 | 8,270 | 8,370 | |
| \$\frac{8}{10000} = 79,999 | \$50,000 - 59,999 | 1,020 | 2,220 | 3,160 | 3,360 | 3,520 | 4,270 | 5,270 | 6,270 | 7,270 | 8,270 | 9,270 | 9,370 | |
| | . , | 1,020 | 2,220 | 3,160 | 3,360 | 4,270 | 5,270 | 6,270 | 1 | 8,270 | 9,270 | 10,270 | 10,370 | |
| \$\frac{100,000 - 148,989} 3,870 4,070 6,010 7,210 8,370 9,370 10,540 11,740 12,940 14,140 15,340 16,840 18,830 \$240,000 - 259,999 2,040 4,440 6,580 7,980 9,340 10,540 11,740 12,940 14,140 16,340 16,540 17,960 19,960 10,960 11,740 12,940 14,140 16,340 16,540 17,960 19,960 19,999 10,999 10,940 11,740 12,940 14,140 16,100 18,100 19,190 19,900 19,909 10,900 11,740 12,940 14,140 16,100 18,100 19,190 19,000 1 | | • | 1 | 3,160 | 1 | 5,270 | 1 | 1 | 8,270 | | 1 | 11,270 | 11,370 | |
| | | | I | | | | i | I | | | | | | |
| S240,000 - 259,999 2,040 | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | | 1 | 1 | | |
| Segn.000 - 279.999 | | • | 1 | 1 | · ' | 1 | 1 1 | 1 ' | 1 | · ' | 1 | 1 | 1 | |
| S280,000 - 299,999 | | | | <u> </u> | | | i | I | | | | | | |
| \$\frac{8}{3}\frac{9}{0}\color - 319,999 2,040 4,440 6,680 7,980 9,340 11,300 13,300 15,000 17,000 22,600 22,600 24,670 26,260 28,500 26,070 28,500 26,260 28,670 28,500 | | | 1 | 1 | | 1 | 1 | 1 ' | 1 | | | 1 | 1 1 | |
| | . , | , | 1 | 1 | · ' | 1 | 1 1 | 1 ' | 1 | · ' | 1 | 1 | | |
| Section Sect | | | | | | | | - | | | | | | |
| | | | 1 | 1 | 1 | | | 1 | 1 | l ' | | 1 | 1 | |
| Higher Paying Job Lower Paying Job Lower Paying Job Annual Taxable Single or Married Filing Separately | | | | 1 | | 1 | 1 1 | 1 | | | 1 | 1 | 1 | |
| Higher Paying Job Lower Paying Job Annual Taxable Wage & Salary Annual Taxable Wage & Salary Solary 19,999 19,999 29,999 30,000 \$30,000 \$50,000 \$50,000 \$70,000 \$80,000 \$90,000 \$10, | \$525,000 and over | 3,140 | 0,840 | | | | | | | 25,640 | 20,140 | 30,640 | 32,240 | |
| Annual Taxable Yange & Salary Yange Ya | Higher Poving Joh | | | | | | | | | | | | | |
| Wage & Salary 9,999 19,999 29,999 39,999 49,999 59,999 69,999 79,999 89,999 99,999 109,999 120,000 \$0 - 9,999 \$400 \$390 \$1,020 \$1,250 \$1,870 \$1,870 \$1,870 \$1,970 \$2,040 \$2,040 \$2,040 \$2,040 \$2,000 \$2,040 \$2,000 \$2,040 \$2,000 \$2,000 \$2,000 \$3,00 3,510 3,610 3,880 3,880 3,880 3,880 3,880 \$3,800 \$3,510 4,610 4,610 4,710 4,910 5,110 5,110 5,110 5,180 5,180 5,600 5,710 5,910 6,110 6,310 6,380 4,600 7,900 7,900 7,900 8,100 8,200 8,300 8,370 8,970 9,770 \$80,000 - 99,999 1,940 3,580 5,180 6,280 7,580 8,400 8,700 8,700 9,100 10,100 10,700 11,770 13,200 14,100 11,740 | | Φ Ω | \$10,000 | \$20,000 | | | | | | | 000 000 | \$100,000 | \$110,000 | |
| \$10,000 - 19,999 | Wage & Salary | 9,999 | 19,999 | 29,999 | 39,999 | 49,999 | 59,999 | 69,999 | 79,999 | 89,999 | 99,999 | 109,999 | 120,000 | |
| \$20,000 - 29,999 | ' ' | | | 1 | | 1 | | 1 | | 1 | | | | |
| \$30,000 - 39,999 | | | 1 | 1 | | 1 | 1 | 1 | | | 1 | 1 | | |
| \$40,000 - 59,999 | | | | | | | · · | <u> </u> | | · · | <u> </u> | | | |
| \$60,000 - 79,999 | | • | 1 | 1 | | 1 | 1 | | 1 | | 1 | 1 | 1 | |
| \$80,000 - 99,999 | . , | • | 1 | 1 | 1 | 1 | 1 | | 1 | 1 | 1 | 1 | | |
| \$100,000 - 124,999 | | | I | | | | | <u> </u> | | | | | | |
| \$125,000 - 149,999 | . , | | 1 | 1 | 1 | 1 | | 1 | | 1 | 1 | 1 | | |
| \$150,000 - 174,999 | | • | 1 | 1 ' | 1 | 1 | 1 | · ' | | · ' | 1 | 1 | | |
| \$175,000 - 199,999 | | | | | | | · · | <u> </u> | | | | | | |
| \$200,000 - 249,999 | | | 1 | 1 | 1 | 1 | | 1 | 1 | 1 | 1 | 1 | 1 | |
| \$250,000 - 399,999 | . , | | 1 | 1 1 | | 1 | 1 | 1 | 1 | | 1 | | 1 | |
| \$400,000 - 449,999 2,970 5,920 8,310 10,610 12,910 14,840 16,140 17,440 18,740 20,040 21,210 22,470 \$450,000 and over 3,140 6,290 8,880 11,380 13,880 16,010 17,510 19,010 20,510 22,010 23,380 24,680 Higher Paying Job Annual Taxable Wage & Salary Head of Household **Nonual Taxable Wage & Salary** 9,999 \$10,000 - \$20,000 - \$30,000 - \$40,000 - \$50,000 - \$60,000 - \$70,000 - \$80,000 - \$9,999 109,99 | | | I | | | | i | I | | | I | | | |
| Higher Paying Job So | | | 1 | 1 | | 1 | 1 | 1 | 1 | | 1 | 1 | 1 | |
| Higher Paying Job Annual Taxable Wage & Salary \$0 - | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | | 1 | 1 | 1 | |
| Annual Taxable Wage & Salary \$0 - 9,999 \$10,000 - 29,999 \$30,000 - 39,999 \$40,000 - 59,999 \$50,000 - 69,999 \$70,000 - 69,999 \$80,000 - 99,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 109,999 \$100,000 - 100,99 | | | | | ı | Head of | Househo | | 1 | | | • | | |
| Wage & Salary 9,999 19,999 29,999 39,999 49,999 59,999 69,999 79,999 89,999 99,999 109,999 120,000 \$0 - 9,999 \$0 \$760 \$910 \$1,020 \$1,020 \$1,190 \$1,870 \$1,870 \$2,040 \$2,040 \$10,000 - 19,999 760 1,820 2,110 2,220 2,220 2,390 3,390 4,070 4,040 4,440 4,440 \$20,000 - 29,999 910 2,110 2,400 2,510 2,680 3,680 4,680 5,360 5,530 5,730 5,930 \$30,000 - 39,999 1,020 2,220 2,510 2,790 3,790 4,790 5,790 6,640 6,840 7,040 7,240 7,240 \$40,000 - 59,999 1,020 2,240 3,530 4,640 5,640 6,780 7,980 8,860 9,060 9,260 9,460 9,460 \$60,000 - 79,999 1,870 4,070 5,360 6,610 7,810 | Higher Paying Job | | | | Lowe | er Paying | Job Annu | al Taxable | Wage & S | Salary | | | | |
| \$0 - 9,999 \$0 \$760 \$910 \$1,020 \$1,020 \$1,020 \$1,190 \$1,870 \$1,870 \$2,040 \$2,040 \$10,000 - 19,999 760 1,820 2,110 2,220 2,220 2,390 3,390 4,070 4,070 4,240 4,440 4,440 \$20,000 - 29,999 910 2,110 2,400 2,510 2,680 3,680 4,680 5,360 5,530 5,730 5,930 5,930 \$30,000 - 39,999 1,020 2,220 2,510 2,790 3,790 4,790 5,790 6,640 6,840 7,040 7,240 7,240 \$40,000 - 59,999 1,020 2,240 3,530 4,640 5,640 6,780 7,980 8,860 9,060 9,260 9,460 9,460 \$60,000 - 79,999 1,870 4,070 5,360 6,610 7,810 9,010 10,210 11,090 11,290 11,490 11,690 12,170 \$80,000 - 99,999 1,870 4,210 5,700 7,010 8,210 9,410 10,610 11,490 11,690 12,380 13,370 14,170 \$100,000 - 124,999 2,040 4,440 5,930 7,240 8,440 9,640 10,860 12,540 13,540 14,540 15,540 16,480 \$125,000 - 174,999 2,040 4,440 5,930 7,240 8,860 10,860 12,860 14,540 15,540 16,830 18,130 19,230 \$175,000 - 174,999 2,040 4,460 6,750 8,860 10,860 12,860 15,000 16,980 18,280 19,580 20,880 21,980 \$175,000 - 199,999 2,720 5,920 8,210 10,320 12,600 14,900 17,200 19,180 20,480 21,780 23,080 24,180 \$200,000 - 449,999 2,970 6,470 9,060 11,480 13,780 16,080 18,380 20,360 21,660 22,960 24,250 25,360 | | | | | | | | | | | | | | |
| \$10,000 - 19,999 | \$0 - 9,999 | | | | | | | | | | | | | |
| \$20,000 - 29,999 | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | | 1 | 1 | 1 | |
| \$30,000 - 39,999 | | | 1 | 1 | 1 | 1 | 1 | 1 | | | 1 | 1 | 1 | |
| \$40,000 - 59,999 | | | | | | | | | | | | | | |
| \$60,000 - 79,999 | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | |
| \$80,000 - 99,999 | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | | 1 | 1 | 1 | |
| \$100,000 - 124,999 | | | | | | | | | | | | | | |
| \$150,000 - 174,999 | \$100,000 - 124,999 | 2,040 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 13,540 | 1 | 1 | 1 | |
| \$175,000 - 199,999 | \$125,000 - 149,999 | 2,040 | 4,440 | 1 | 7,240 | 8,860 | 10,860 | 12,860 | 14,540 | 15,540 | 16,830 | 18,130 | 1 | |
| <u>\$200,000 - 449,999</u> | | 2,040 | | | 8,860 | | 12,860 | 15,000 | | 18,280 | | | | |
| | \$175,000 - 199,999 | 2,720 | 5,920 | 8,210 | 10,320 | 12,600 | 14,900 | 17,200 | 19,180 | 20,480 | 21,780 | 23,080 | 24,180 | |
| \$450,000 and over 3,140 6,840 9,630 12,250 14,750 17,250 19,750 21,930 23,430 24,930 26,420 27,730 | \$200,000 - 449,999 | 2,970 | 6,470 | 9,060 | 11,480 | 13,780 | 16,080 | 18,380 | 20,360 | 21,660 | 22,960 | 24,250 | 25,360 | |
| | \$450,000 and over | 3,140 | 6,840 | 9,630 | 12,250 | 14,750 | 17,250 | 19,750 | 21,930 | 23,430 | 24,930 | 26,420 | 27,730 | |