

Employee Tax Withholding Forms
(Payroll has up to 30 days to complete this request)

Employee Number: _____

Employee Name: _____

If you are claiming the exact same information for both Federal and State you will only need to complete the Federal form. If you are claiming different allowances for Federal and State you must complete two forms.

1. Federal Form W-4
 Claiming the exact same information for both federal and state
 Not claiming the exact same information for both federal and state. **Please fill a W-4MN form and a Federal W4 form.**

2. Minnesota Employee Withholding Allowance/Exemption Certificate W-4MN **MUST** be completed when:
 - Claiming fewer Minnesota withholding allowances than your federal allowances (your Minnesota allowances cannot exceed the number of your federal allowances)
 - Claiming more than 10 Minnesota withholding allowances
 - Requesting an additional Minnesota withholding deducted from your pay, each pay period.
Federal: _____
State: _____
 - Claiming to be exempt from federal withholding or claiming to be exempt from Minnesota withholding.

I live in North Dakota or Michigan and I wish to claim exemption from Minnesota withholding due to my North Dakota or Michigan residency:

- No
- Yes. If yes, a completed Reciprocity Exemption Affidavit is required and available on Employee Self Service, or in the HR Service Center.

Please return all required forms to:

HealthPartners Payroll Department
Mail Stop: N2060
Fax: (651) 254-2984
Payroll Phone: (651) 254-1397

Exemption from Social Security and Medicare withholding:

Do you hold a Certificate of Eligibility for Nonimmigrant Exchange or Student Visitor VISA (nonresident alien status: F1, J1, M1, Q1)?

- No
- Yes. Please submit a copy of your Exchange/Student Visitor VISA (ex: I-20 A-B, I-94A form) on your first day of employment.

Important Note: Employees are responsible for determining, and updating their Federal and State withholding status.